

**Attachment D-5**

**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 42**

Attachment	Sector	Instrument Path	Instrument Path Title
D-5	42	42311	Motor Vehicles
		42432	Men's and Boy's Clothing
		42441	General-line Groceries
		42542	Pharmaceuticals, Cosmetics, and Toiletries Agents and Brokers

**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
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**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  
 Select States and Territories

ZIP Code

Describe kind of business at this location

Type of operation at this location (see Additional Information).

**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**

**A.** What were the sales and operating receipts?

(Include the gross selling value of business conducted for others. Include shipping and handling charges. Exclude sales taxes and Hawaii's General Excise Tax.)

Check if None

2017	
\$	_____ ,000.00

**B.** Did this establishment earn commissions for the sale of merchandise?

- Yes - Go to line C
- No - Go to line F

**C.** What was the gross selling value of goods sold on a commission basis?  
(Include on line A.)

2017	
\$	_____ ,000.00

**D.** What were the commissions, including selling or listing fees, received on transactions reported on line C?

2017	
\$	_____ ,000.00

**E.** What was this establishment's average commission rate earned?

2017	
_____	%

**F.** Is this the only establishment of this firm?

- Yes - Go to line H
- No - Go to line G

**G.** What was the percent of products sold by this establishment manufactured or mined in the United States by **your company** or its subsidiaries?

Check if None

2017	
_____	%

**H.** Did e-commerce account for more than 50% of this establishment's sales and/or operating receipts as reported on line A?

- Yes
- No

**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 9: VALUE OF INVENTORIES**

Did this establishment own inventories, regardless of where held, at the end of 2017 and/or 2016?

- Yes
- No

**ITEM 9: VALUE OF INVENTORIES**

What were the inventories and Last-in, First-out (LIFO) adjustment, if any, for products owned by this establishment as of December 31?

	Check if None	End of 2017	Check if None	End of 2016
<b>1. Total inventories before LIFO adjustment</b> (if any)	<input type="checkbox"/>	\$ <input type="text"/> ,000.00	<input type="checkbox"/>	\$ <input type="text"/> ,000.00
<b>2. LIFO reserve</b> (if any)	<input type="checkbox"/>	\$ <input type="text"/> ,000.00	<input type="checkbox"/>	\$ <input type="text"/> ,000.00
<b>3. Total inventories after LIFO adjustment</b> (Line 1 minus line 2.)	<input type="checkbox"/>	\$ <input type="text"/> ,000.00	<input type="checkbox"/>	\$ <input type="text"/> ,000.00



**ITEM 10: INVENTORIES BY VALUATION METHOD**

How much of the inventory reported in **Item 9**, line 1, for 2017 is subject to the following valuation methods?

	Check if None	End of 2017
<b>A.</b> LIFO valuation method before adjustment	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
<b>B.</b> First-in, First-out (FIFO)	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
<b>C.</b> Average cost	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
<b>D.</b> Standard cost	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
<b>E.</b> Other valuation method - Describe	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
Describe <input style="width: 300px;" type="text"/>	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
<b>F. TOTAL</b> (Sum of lines A through E should equal <b>Item 9</b> , line 1.)	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00

**ITEM 16: SELECTED EXPENSES**

<p><b>A.</b> What were the operating expenses? (Include payroll. Exclude cost of goods sold and interest expense.)</p>	<p>Check if None</p> <input type="checkbox"/>	<p>2017</p> <p>\$ <input type="text"/> ,000.00</p>
<p><b>B.</b> What were purchases of merchandise for resale, net of returns, allowances, and trade and cash discounts? (Include amounts allowed for trade-ins.)</p>	<input type="checkbox"/>	<p>\$ <input type="text"/> ,000.00</p>
<p><b>C.</b> For the value reported on line B, were any of these goods ordered over an Internet, Extranet, Electronic Data Interchange (EDI) network, electronic mail, or other online system?</p>		
<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> Do not know</p>		

**ITEM 17A: 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.**

- |            |                       |  |
|------------|-----------------------|--|
| 423110 101 | <input type="radio"/> | New and used automobiles and motorcycles   |
| 441110 003 | <input type="radio"/> | Retail new and used motor vehicle dealer   |
| 425120 311 | <input type="radio"/> | Automobile auction, wholesale  |
| 423110 201 | <input type="radio"/> | Buses, recreational vehicles (RVs), motor homes, and campers   |
| 423110 301 | <input type="radio"/> | Light trucks, 14,000 lb. or less   |
| 423110 401 | <input type="radio"/> | Medium trucks and tractors, 14,001 lb. to 33,000 lb.   |
| 423110 501 | <input type="radio"/> | Heavy trucks, road tractors, and truck trailers, over 33,000 lb.   |
| 336211 001 | <input type="radio"/> | Truck equipment distributor/upfitter primarily completing trucks by installing and assembling truck bodies and/or other equipment onto truck chassis |
| 777420 001 | <input type="radio"/> | Truck equipment distributor primarily reselling equipment, parts, and accessories, with or without installation onto completed vehicles              |
| 423110 102 | <input type="radio"/> | All-terrain vehicles (ATVs), snowmobiles, motor scooters, mopeds, and other motorized recreational-use vehicles                                      |
| 423120 101 | <input type="radio"/> | New motor vehicle parts, warehouse distributor, sold primarily to jobbers or other wholesalers   |
| 423120 201 | <input type="radio"/> | New motor vehicle parts, jobber, sold primarily to retailers and repair shops  |
| 423140 101 | <input type="radio"/> | Used motor vehicle parts and supplies dealer   |
| 771000 001 | <input type="radio"/> | Other principal business or activity - Describe  |

**ITEM 17B: TYPE OF OPERATION**

Which ONE of the following best describes this establishment's principal type of operation in 2017?

**Merchant wholesaler, buying and selling on own account**

12  Importer

13  Exporter

11  Merchant wholesale distributor or jobber

14  Own-brand importer and marketer

20  **Manufacturers' sales branch or office**

**Agent, broker, or commission merchant**

46  Manufacturers' representative or agent

41  Auction company

42  Broker, representing buyers and sellers

43  Commission merchant

44  Import agent

45  Export agent

49  **Electronic market - business-to-business marketplace that facilitates the sale of goods via the Internet or other electronic means, and operates on a commission or fee basis**

77  Other broker or agent - Describe

Describe

**ITEM 20: CLASS OF CUSTOMER**

**A.** As a general business practice, did this establishment sell to household consumers and individual users in 2017?

- Yes
- No

**B.** Were 75% or more of this establishment's sales to retailers/wholesalers/distributors for resale in 2017?

- Yes
- No

**C.** Did this establishment require proof of business or professional license from new customers?

- Yes
- No

**D.** What was the estimated percentage of this establishment's total sales by class of customer in 2017?

	2017
1. Household consumers and individuals	<input type="text"/> %
2. Export sales	<input type="text"/> %
3. Retailers for resale	<input type="text"/> %
4. Wholesalers/distributors for resale	<input type="text"/> %
5. Repair shops for use in repair work	<input type="text"/> %
6. Manufacturing and mining industrial users for use as input goods in production	<input type="text"/> %
7. Restaurants, hotels, food services, and contract feeding	<input type="text"/> %
8. Businesses for end use in their own operation, not for resale or production	<input type="text"/> %
9. Building contractors, heavy construction, and special trade contractors	<input type="text"/> %
10. Farmers for use in farm production	<input type="text"/> %
11. Governmental bodies (Federal, state, and local)	<input type="text"/> %
12. Other	<input type="text"/> %
<input type="text" value="Describe"/>	<input type="text"/> %
<b>13. TOTAL</b> (Sum of lines 1 through 12 should equal 100%.)	<input type="text"/> %

**ITEM 21: METHOD OF SELLING**

Which ONE of the following best describes this establishment's principal method of selling in 2017?

- Electronic commerce (selling goods or facilitating the sale of goods via the Internet or other electronic means)
- Warehouse or office (including telephone/fax orders or outside sales representatives)
- Store or display showroom (selling from a fixed or permanent location with physical displays of priced merchandise and/or from a counter)
- Mail order
- Home shopping via television
- Direct selling (selling in a face-to-face manner away from a fixed location, such as house-to-house, party plan, or temporary kiosk sales)
- Vending machines
- Other

Describe

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

1. Wholesale sales of new and used automobiles, including crossovers	<input type="checkbox"/>	4001325000
a. Wholesale sales of new automobiles	<input type="checkbox"/>	4001325003
b. Wholesale sales of used automobiles	<input type="checkbox"/>	4001325006
2. Wholesale sales of motorcycles and other sports vehicles, including utility trailers	<input type="checkbox"/>	4001250000
a. Wholesale sales of motorcycles	<input type="checkbox"/>	4001250003
b. Wholesale sales of utility trailers	<input type="checkbox"/>	4001250006
c. Wholesale sales of all-terrain vehicles (ATVs), snowmobiles, motor scooters, mopeds, and other motorized recreational-use vehicles	<input type="checkbox"/>	4001250009
3. Wholesale sales of new and used light trucks, 14,000 lb. or less, including vans, cargo vans, and SUVs	<input type="checkbox"/>	4001350000
a. Wholesale sales of new light trucks and SUVs	<input type="checkbox"/>	4001350003
b. Wholesale sales of used light trucks and SUVs	<input type="checkbox"/>	4001350006
c. Wholesale sales of new and used vans and cargo vans	<input type="checkbox"/>	4001350009
4. Wholesale sales of new light truck, van, and SUV bodies	<input type="checkbox"/>	4004200000
5. Wholesale sales of medium trucks and tractors, 14,001 lb. to 33,000 lb.	<input type="checkbox"/>	4001950000
a. Wholesale sales of new medium trucks and tractors	<input type="checkbox"/>	4001950003
b. Wholesale sales of used medium trucks and tractors	<input type="checkbox"/>	4001950006
6. Wholesale sales of new medium truck bodies	<input type="checkbox"/>	4004325000
7. Wholesale sales of heavy trucks, trailers, and road tractors, more than 33,000 lb.	<input type="checkbox"/>	4001975000
a. Wholesale sales of new heavy trucks	<input type="checkbox"/>	4001975003
b. Wholesale sales of new heavy truck tractors	<input type="checkbox"/>	4001975006
c. Wholesale sales of new truck trailers	<input type="checkbox"/>	4001975009
d. Wholesale sales of used heavy trucks, tractors, and trailers	<input type="checkbox"/>	4001975012

8. Wholesale sales of new heavy truck bodies	<input type="checkbox"/>	4004350000
9. Wholesale sales of buses	<input type="checkbox"/>	4001925000
10. Wholesale sales of motor homes, travel trailers, and campers	<input type="checkbox"/>	4001375000
11. Wholesale sales of new and rebuilt automotive parts and supplies, and trailer parts and supplies, except automotive bodies and chemicals	<input type="checkbox"/>	4004175000
a. Wholesale sales of automotive batteries	<input type="checkbox"/>	4004175003
b. Wholesale sales of complete engines	<input type="checkbox"/>	4004175006
c. Wholesale sales of electrical engine parts, including ignition parts	<input type="checkbox"/>	4004175009
d. Wholesale sales of brake parts, including fluid and all disk and drum parts	<input type="checkbox"/>	4004175012
e. Wholesale sales of exhaust system parts	<input type="checkbox"/>	4004175015
f. Wholesale sales of automotive glass	<input type="checkbox"/>	4004175018
g. Wholesale sales of hoses, belts, gaskets, and wiper blades	<input type="checkbox"/>	4004175021
h. Wholesale sales of filters, including oil, air, gas, and transmission	<input type="checkbox"/>	4004175024
i. Wholesale sales of engine parts, except electrical parts	<input type="checkbox"/>	4004175027
j. Wholesale sales of body parts and repair materials	<input type="checkbox"/>	4004175031
k. Wholesale sales of suspension parts, including shocks, struts, and ball joints	<input type="checkbox"/>	4004175033
l. Wholesale sales of automotive accessories, except car stereos and CD players	<input type="checkbox"/>	4004175039
m. Wholesale sales of other automotive parts and supplies	<input type="checkbox"/>	4004175036
12. Wholesale sales of car stereos, tape players, and CD players	<input type="checkbox"/>	4004195000
13. Wholesale sales of used automotive parts and accessories	<input type="checkbox"/>	4004250000
14. Wholesale sales of tires and tubes	<input type="checkbox"/>	4004150000
a. Wholesale sales of new automobile tires and tubes	<input type="checkbox"/>	4004150003
b. Wholesale sales of re-treaded and used automobile tires and repair materials	<input type="checkbox"/>	4004150006
c. Wholesale sales of new truck and bus tires, including industrial, off-road, and farm tractor tires	<input type="checkbox"/>	4004150009
d. Wholesale sales of re-treaded and used truck and bus tires and repair materials, including industrial, off-road, and farm tractor tires	<input type="checkbox"/>	4004150012



e. Wholesale sales of aircraft tires	<input type="checkbox"/>	4004150015
15. Wholesale sales of automotive chemicals, including polishes and cleaners, fuel and oil additives, and antifreeze	<input type="checkbox"/>	4004225000
16. Wholesale sales of refined petroleum products, except liquefied petroleum (LP)	<input type="checkbox"/>	4002775000
17. Wholesale sales of other transportation equipment	<input type="checkbox"/>	4002050000
18. Wholesale sales of farm machinery and equipment	<input type="checkbox"/>	4002075000
19. Wholesale sales of construction, forestry, and mining machinery and equipment, including attachments	<input type="checkbox"/>	4002100000
20. Wholesale sales of new industrial machinery and equipment, not elsewhere classified, including storage tanks, pumps and scales	<input type="checkbox"/>	4002425000
21. Maintenance and repair services for automobiles and light-duty trucks	<input type="checkbox"/>	7002625000
22. Rental of automobiles and light-duty trucks	<input type="checkbox"/>	7003800000
23. Automobile and light-duty truck leasing services	<input type="checkbox"/>	7005528000
24. Rental services for recreational, sports, and fitness equipment (including boats, motorcycles, other sports vehicles, and musical instruments)	<input type="checkbox"/>	7001800000
25. Maintenance and repair services for other industrial, commercial, and service industry machinery and equipment, not elsewhere classified	<input type="checkbox"/>	7009500000

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
<b>1. Wholesale sales of new and used automobiles, including crossovers</b>		
a. Wholesale sales of new automobiles	\$ <input type="text"/> ,000.00	4001325003
b. Wholesale sales of used automobiles	\$ <input type="text"/> ,000.00	4001325006
<b>Subtotal</b>	\$ <input type="text"/> ,000.00	4001325000
<b>2. Wholesale sales of motorcycles and other sports vehicles, including utility trailers</b>		
a. Wholesale sales of motorcycles	\$ <input type="text"/> ,000.00	4001250003
b. Wholesale sales of utility trailers	\$ <input type="text"/> ,000.00	4001250006
c. Wholesale sales of all-terrain vehicles (ATVs), snowmobiles, motor scooters, mopeds, and other motorized recreational-use vehicles	\$ <input type="text"/> ,000.00	4001250009
<b>Subtotal</b>	\$ <input type="text"/> ,000.00	4001250000
<b>3. Wholesale sales of new and used light trucks, 14,000 lb. or less, including vans, cargo vans, and SUVs</b>		
a. Wholesale sales of new light trucks and SUVs	\$ <input type="text"/> ,000.00	4001350003
b. Wholesale sales of used light trucks and SUVs	\$ <input type="text"/> ,000.00	4001350006
c. Wholesale sales of new and used vans and cargo vans	\$ <input type="text"/> ,000.00	4001350009
<b>Subtotal</b>	\$ <input type="text"/> ,000.00	4001350000
<b>4. Wholesale sales of new light truck, van, and SUV bodies</b>		
	\$ <input type="text"/> ,000.00	4004200000
<b>5. Wholesale sales of medium trucks and tractors, 14,001 lb. to 33,000 lb.</b>		
a. Wholesale sales of new medium trucks and tractors	\$ <input type="text"/> ,000.00	4001950003
b. Wholesale sales of used medium trucks and tractors	\$ <input type="text"/> ,000.00	4001950006
<b>Subtotal</b>	\$ <input type="text"/> ,000.00	4001950000
<b>6. Wholesale sales of new medium truck bodies</b>		
	\$ <input type="text"/> ,000.00	4004325000
<b>7. Wholesale sales of heavy trucks, trailers, and road tractors, more than 33,000 lb.</b>		
a. Wholesale sales of new heavy trucks	\$ <input type="text"/> ,000.00	4001975003
b. Wholesale sales of new heavy truck tractors	\$ <input type="text"/> ,000.00	4001975006
c. Wholesale sales of new truck trailers	\$ <input type="text"/> ,000.00	4001975009

d. Wholesale sales of used heavy trucks, tractors, and trailers	\$		,000.00	4001975012
<b>Subtotal</b>	\$		,000.00	4001975000
8. Wholesale sales of new heavy truck bodies	\$		,000.00	4004350000
9. Wholesale sales of buses	\$		,000.00	4001925000
10. Wholesale sales of motor homes, travel trailers, and campers	\$		,000.00	4001375000
11. Wholesale sales of new and rebuilt automotive parts and supplies, and trailer parts and supplies, except automotive bodies and chemicals				
a. Wholesale sales of automotive batteries	\$		,000.00	4004175003
b. Wholesale sales of complete engines	\$		,000.00	4004175006
c. Wholesale sales of electrical engine parts, including ignition parts	\$		,000.00	4004175009
d. Wholesale sales of brake parts, including fluid and all disk and drum parts	\$		,000.00	4004175012
e. Wholesale sales of exhaust system parts	\$		,000.00	4004175015
f. Wholesale sales of automotive glass	\$		,000.00	4004175018
g. Wholesale sales of hoses, belts, gaskets, and wiper blades	\$		,000.00	4004175021
h. Wholesale sales of filters, including oil, air, gas, and transmission	\$		,000.00	4004175024
i. Wholesale sales of engine parts, except electrical parts	\$		,000.00	4004175027
j. Wholesale sales of body parts and repair materials	\$		,000.00	4004175031
k. Wholesale sales of suspension parts, including shocks, struts, and ball joints	\$		,000.00	4004175033
l. Wholesale sales of automotive accessories, except car stereos and CD players	\$		,000.00	4004175039
m. Wholesale sales of other automotive parts and supplies	\$		,000.00	4004175036
<b>Subtotal</b>	\$		,000.00	4004175000
12. Wholesale sales of car stereos, tape players, and CD players	\$		,000.00	4004195000
13. Wholesale sales of used automotive parts and accessories	\$		,000.00	4004250000
14. Wholesale sales of tires and tubes				
a. Wholesale sales of new automobile tires and tubes	\$		,000.00	4004150003
b. Wholesale sales of re-treaded and used automobile tires and repair materials	\$		,000.00	4004150006
c. Wholesale sales of new truck and bus tires, including industrial, off-road, and farm tractor tires	\$		,000.00	4004150009

d. Wholesale sales of re-treaded and used truck and bus tires and repair materials, including industrial, off-road, and farm tractor tires	\$ <input type="text"/> ,000.00	4004150012
e. Wholesale sales of aircraft tires	\$ <input type="text"/> ,000.00	4004150015
<b>Subtotal</b>	\$ <input type="text"/> ,000.00	4004150000
15. Wholesale sales of automotive chemicals, including polishes and cleaners, fuel and oil additives, and antifreeze	\$ <input type="text"/> ,000.00	4004225000
16. Wholesale sales of refined petroleum products, except liquefied petroleum (LP)	\$ <input type="text"/> ,000.00	4002775000
17. Wholesale sales of other transportation equipment	\$ <input type="text"/> ,000.00	4002050000
18. Wholesale sales of farm machinery and equipment	\$ <input type="text"/> ,000.00	4002075000
19. Wholesale sales of construction, forestry, and mining machinery and equipment, including attachments	\$ <input type="text"/> ,000.00	4002100000
20. Wholesale sales of new industrial machinery and equipment, not elsewhere classified, including storage tanks, pumps and scales	\$ <input type="text"/> ,000.00	4002425000
21. Maintenance and repair services for automobiles and light-duty trucks	\$ <input type="text"/> ,000.00	7002625000
22. Rental of automobiles and light-duty trucks	\$ <input type="text"/> ,000.00	7003800000
23. Automobile and light-duty truck leasing services	\$ <input type="text"/> ,000.00	7005528000
24. Rental services for recreational, sports, and fitness equipment (including boats, motorcycles, other sports vehicles, and musical instruments)	\$ <input type="text"/> ,000.00	7001800000
25. Maintenance and repair services for other industrial, commercial, and service industry machinery and equipment, not elsewhere classified	\$ <input type="text"/> ,000.00	7009500000
26. Wholesale sales of other goods, not elsewhere classified		
a. Wholesale sales of other goods, not elsewhere classified - write-in #1		
<input type="text" value="Describe"/>	\$ <input type="text"/> ,000.00	4005500003
b. Wholesale sales of other goods, not elsewhere classified - write-in #2		
<input type="text" value="Describe"/>	\$ <input type="text"/> ,000.00	4005500006
c. Wholesale sales of other goods, not elsewhere classified - write-in #3		
<input type="text" value="Describe"/>	\$ <input type="text"/> ,000.00	4005500009
d. Wholesale sales of other goods, not elsewhere classified - write-in #4		
<input type="text" value="Describe"/>	\$ <input type="text"/> ,000.00	4005500012
e. Wholesale sales of other goods, not elsewhere classified - write-in #5		
<input type="text" value="Describe"/>	\$ <input type="text"/> ,000.00	4005500015
f. Wholesale sales of other goods, not elsewhere classified - write-in #6		
<input type="text" value="Describe"/>	\$ <input type="text"/> ,000.00	4005500018
27. 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
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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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<b>TOTAL - Sum of lines should equal total Sales, Shipments, Receipts, or Revenue reported in Item 5</b>		\$ <input type="text"/>	,000.00	9900000000
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**ITEM 24: SHIPPING AND HANDLING**

Did this establishment have any receipts from customers for shipping and handling of merchandise in 2017?

- Yes
- No

**ITEM 24: SHIPPING AND HANDLING**

What were the total receipts of this establishment from customers for shipping and handling of merchandise?

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

Are receipts for shipping and handling included in sales and receipts (reported in **Item 5**)?

- Yes
- No

**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 27: Manufacturing Activities - Manufacturing at This Location

**ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING AT THIS LOCATION**

In 2017, did this establishment manufacture any products or produce any goods at this location?

- Yes
- No

Item 27: Manufacturing Activities - Manufacturing by Other Company Locations Inside the U.S.

**ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING BY OTHER COMPANY LOCATIONS INSIDE THE U.S.**

In 2017, did this establishment have any manufacturing done on its behalf by any other locations of your company **inside the U.S.**?

- Yes
- No

**ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING BY AFFILIATED COMPANIES INSIDE THE U.S.**

In 2017, did this establishment have any manufacturing done on its behalf by any **affiliated** companies **inside the U.S.**?

- Yes
- No

**ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING BY UNAFFILIATED COMPANIES INSIDE THE U.S.**

In 2017, did this establishment have any manufacturing done on its behalf by any **unaffiliated** companies **inside the U.S.**?

- Yes
- No

**ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING DONE OUTSIDE THE U.S.**

In 2017, did this establishment have any manufacturing done on its behalf **outside the U.S.**?

*Include manufacturing done outside the U.S. by both affiliated and unaffiliated companies.*

- Yes
- No

**ITEM 27: MANUFACTURING ACTIVITIES - DESIGN OR SPECIFICATION FOR PRODUCTS MANUFACTURED ON ITS BEHALF**

In 2017, did this establishment determine the design or specifications for any of the products that were manufactured on its behalf?

*"Design or specifications" refers to the function of the product, not just the appearance or its packaging.*

- Yes
- No

**ITEM 27: MANUFACTURING ACTIVITIES - PERCENTAGE OF REVENUE FOR PRODUCTS MANUFACTURED ON ITS BEHALF**

What percentage of this establishment's total revenue in 2017 was from the sale of products that were manufactured on its behalf, per this establishment's design or specifications?

*Estimates are acceptable.*

- 0%
- 1-25%
- 26-50%
- 51-75%
- 76-99%
- 100%



**ITEM 27: MANUFACTURING ACTIVITIES - U.S. COMPANY AS A WHOLE - MANUFACTURING DONE OUTSIDE THE U.S.**

In 2017, was your **U.S. company as a whole** responsible for the design of any products that were manufactured outside the U.S.?

- Yes
- No

**ITEM 28: SPECIAL INQUIRIES - EMPLOYMENT BY PRIMARY FUNCTION**

List the number of employees reported in **Item 7**, line A, by the employee's primary function.

	2017 Paid Employees
1. Selling	<input type="text"/>
2. Sales support - including office, clerical, warehousing, customer service, maintenance employees, and drivers	<input type="text"/>
3. General support of other establishments in your company - including central administrative, accounting, research, and other support employees	<input type="text"/>
4. Packaging	<input type="text"/>
5. Production - including employees who manufacture products from raw materials or semi-finished products (Report 'knockdown' assembly employees on line 6 below.)	<input type="text"/>
6. 'Knockdown' assembly - assembling prefabricated components designed for a single application or reassembly of completed products	<input type="text"/>
7. Other	<input type="text"/>
<input type="text" value="Describe"/>	<input type="text"/>
<b>8. TOTAL</b> (Sum of lines 1 through 7 should equal <b>Item 7</b> , line A.)	<input type="text"/>

**ITEM 28: SPECIAL INQUIRIES - PERCENT OF DROP SHIPPED SALES**

What was the percentage of sales that were drop shipped and did not enter this establishment?

2017  
 %

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  
\$ 2036 ,000.00

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

Report  Check if None

2017  
\$ ,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 State or Territory

ZIP Code

EIN

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

Did your company operate in more than one location in 2017?

- 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 and Street

City, town, village, etc.

State  
 Select State or Territory

ZIP Code

Describe kind of business at this location

Type of operation at this location (see Additional Information).

**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.**

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

2017
<input type="text"/>

What was the annual payroll?

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

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

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

What were the sales, shipments, receipts, or revenue?

2017
\$ <input type="text"/> ,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 State or Territory

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

**ITEM 5: SALES, SHIPMENTS, RECEIPTS, OR REVENUE**

**A.** What were the sales and operating receipts?

(Include the gross selling value of business conducted for others. Include shipping and handling charges. Exclude sales taxes and Hawaii's General Excise Tax.)

Check if None

2017  
\$  ,000.00

**B.** Did this establishment earn commissions for the sale of merchandise?

- Yes - Go to line C
- No - Go to line F

**C.** What was the gross selling value of goods sold on a commission basis?

(Include on line A.)

2017  
\$  ,000.00

**D.** What were the commissions, including selling or listing fees, received on transactions reported on line C?

2017  
\$  ,000.00

**E.** What was this establishment's average commission rate earned?

2017  
 %

**F.** Is this the only establishment of this firm?

- Yes - Go to line H
- No - Go to line G

**G.** What was the percent of products sold by this establishment manufactured or mined in the United States by **your company** or its subsidiaries?

Check if None

2017  
 %

**H.** Did e-commerce account for more than 50% of this establishment's sales and/or operating receipts as reported on line A?

- Yes
- No



**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 9: VALUE OF INVENTORIES**

Did this establishment own inventories, regardless of where held, at the end of 2017 and/or 2016?

- Yes
- No

**ITEM 9: VALUE OF INVENTORIES**

What were the inventories and Last-in, First-out (LIFO) adjustment, if any, for products owned by this establishment as of December 31?

	Check if None	End of 2017	Check if None	End of 2016
<b>1. Total inventories before LIFO adjustment</b> (if any)	<input type="checkbox"/>	\$ <input type="text"/> ,000.00	<input type="checkbox"/>	\$ <input type="text"/> ,000.00
<b>2. LIFO reserve</b> (if any)	<input type="checkbox"/>	\$ <input type="text"/> ,000.00	<input type="checkbox"/>	\$ <input type="text"/> ,000.00
<b>3. Total inventories after LIFO adjustment</b> (Line 1 minus line 2.)	<input type="checkbox"/>	\$ <input type="text"/> ,000.00	<input type="checkbox"/>	\$ <input type="text"/> ,000.00

**ITEM 10: INVENTORIES BY VALUATION METHOD**

How much of the inventory reported in **Item 9**, line 1, for 2017 is subject to the following valuation methods?

	Check if None	End of 2017
<b>A.</b> LIFO valuation method before adjustment	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
<b>B.</b> First-in, First-out (FIFO)	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
<b>C.</b> Average cost	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
<b>D.</b> Standard cost	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
<b>E.</b> Other valuation method - Describe	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
Describe <input style="width: 300px;" type="text"/>	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
<b>F. TOTAL</b> (Sum of lines A through E should equal <b>Item 9</b> , line 1.)	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00

**ITEM 16: SELECTED EXPENSES**

<p><b>A.</b> What were the operating expenses? (Include payroll. Exclude cost of goods sold and interest expense.)</p>	<p>Check if None</p> <input type="checkbox"/>	<p>2017</p> <p>\$ <input type="text"/> ,000.00</p>
<p><b>B.</b> What were purchases of merchandise for resale, net of returns, allowances, and trade and cash discounts? (Include amounts allowed for trade-ins.)</p>	<input type="checkbox"/>	<p>\$ <input type="text"/> ,000.00</p>
<p><b>C.</b> For the value reported on line B, were any of these goods ordered over an Internet, Extranet, Electronic Data Interchange (EDI) network, electronic mail, or other online system?</p>		
<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> Do not know</p>		

**ITEM 17A: 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.**

424320 004  Men's and boys' clothing and accessories, including uniforms

424330 003  Women's, children's, and infants' clothing and accessories, including uniforms

423910 001  Sporting and recreational goods and supplies

424340 001  Footwear

771000 001  Other principal business or activity - Describe

Describe

**ITEM 17B: TYPE OF OPERATION**

Which ONE of the following best describes this establishment's principal type of operation in 2017?

**Merchant wholesaler, buying and selling on own account**

12  Importer

13  Exporter

11  Merchant wholesale distributor or jobber

14  Own-brand importer and marketer

20  **Manufacturers' sales branch or office**

**Agent, broker, or commission merchant**

46  Manufacturers' representative or agent

41  Auction company

42  Broker, representing buyers and sellers

43  Commission merchant

44  Import agent

45  Export agent

49  **Electronic market - business-to-business marketplace that facilitates the sale of goods via the Internet or other electronic means, and operates on a commission or fee basis**

77  Other broker or agent - Describe

Describe

**ITEM 20: CLASS OF CUSTOMER**

**A.** As a general business practice, did this establishment sell to household consumers and individual users in 2017?

- Yes
- No

**B.** Were 75% or more of this establishment's sales to retailers/wholesalers/distributors for resale in 2017?

- Yes
- No

**C.** Did this establishment require proof of business or professional license from new customers?

- Yes
- No

**D.** What was the estimated percentage of this establishment's total sales by class of customer in 2017?

	2017
1. Household consumers and individuals	<input type="text"/> %
2. Export sales	<input type="text"/> %
3. Retailers for resale	<input type="text"/> %
4. Wholesalers/distributors for resale	<input type="text"/> %
5. Repair shops for use in repair work	<input type="text"/> %
6. Manufacturing and mining industrial users for use as input goods in production	<input type="text"/> %
7. Restaurants, hotels, food services, and contract feeding	<input type="text"/> %
8. Businesses for end use in their own operation, not for resale or production	<input type="text"/> %
9. Building contractors, heavy construction, and special trade contractors	<input type="text"/> %
10. Farmers for use in farm production	<input type="text"/> %
11. Governmental bodies (Federal, state, and local)	<input type="text"/> %
12. Other	<input type="text"/> %
<input type="text" value="Describe"/>	<input type="text"/> %
<b>13. TOTAL</b> (Sum of lines 1 through 12 should equal 100%.)	<input type="text"/> %



**ITEM 21: METHOD OF SELLING**

Which ONE of the following best describes this establishment's principal method of selling in 2017?

- Electronic commerce (selling goods or facilitating the sale of goods via the Internet or other electronic means)
- Warehouse or office (including telephone/fax orders or outside sales representatives)
- Store or display showroom (selling from a fixed or permanent location with physical displays of priced merchandise and/or from a counter)
- Mail order
- Home shopping via television
- Direct selling (selling in a face-to-face manner away from a fixed location, such as house-to-house, party plan, or temporary kiosk sales)
- Vending machines
- Other

Describe

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

1. Wholesale sales of men's and boys' clothing	<input type="checkbox"/>	4000500000
a. Wholesale sales of men's and boys' suits, coats, and formal wear	<input type="checkbox"/>	4000500003
b. Wholesale sales of men's and boys' dress and casual shirts, sweaters, slacks, and jeans	<input type="checkbox"/>	4000500006
c. Wholesale sales of men's and boys' underwear and sleepwear	<input type="checkbox"/>	4000500009
d. Wholesale sales of men's and boys' work clothing and uniforms, except athletic uniforms	<input type="checkbox"/>	4000500012
e. Wholesale sales of other men's and boys' clothing, except accessories	<input type="checkbox"/>	4000500015
2. Wholesale sales of novelty T-shirts and other unisex clothing	<input type="checkbox"/>	4000525000
a. Wholesale sales of women's, misses', and girls' dresses, blouses, and sweaters, including unisex clothing	<input type="checkbox"/>	4000525003
b. Wholesale sales of women's, misses', and girls' suits and coats	<input type="checkbox"/>	4000525006
c. Wholesale sales of women's, misses', and girls' outerwear, including skirts, slacks, and jeans	<input type="checkbox"/>	4000525009
d. Wholesale sales of women's, misses', and girls' underwear and sleepwear	<input type="checkbox"/>	4000525012
e. Wholesale sales of other women's, misses', and girls' clothing, except accessories	<input type="checkbox"/>	4000525015
3. Wholesale sales of clothing accessories, including novelty hats	<input type="checkbox"/>	4000625000
a. Wholesale sales of men's and boys' clothing accessories, including hats, gloves, and neckwear	<input type="checkbox"/>	4000625003
b. Wholesale sales of women's and girls' clothing accessories, including hats, gloves, and handbags	<input type="checkbox"/>	4000625006
4. Wholesale sales of infants' and children's clothing, to size 6X, including accessories	<input type="checkbox"/>	4000550000
5. Wholesale sales of footwear and footwear accessories	<input type="checkbox"/>	4000600000
a. Wholesale sales of athletic footwear, excluding cleated and other specialized athletic footwear	<input type="checkbox"/>	4000600003
b. Wholesale sales of infants' footwear	<input type="checkbox"/>	4000600006
c. Wholesale sales of women's, misses', and girls' footwear (including slippers), except athletic footwear	<input type="checkbox"/>	4000600009
d. Wholesale sales of men's and boys' footwear (including slippers), except athletic footwear	<input type="checkbox"/>	4000600012

---

e. Wholesale sales of shoe accessories (polishes, laces, trees, storage bags, etc.)	<input type="checkbox"/>	4000600015
6. Wholesale sales of athletic uniforms	<input type="checkbox"/>	4000575000
7. Wholesale sales of sporting and recreational equipment	<input type="checkbox"/>	4001175000
8. Maintenance, repair, and alteration services for apparel, footwear, watches, and jewelry	<input type="checkbox"/>	7000200000

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
<b>1. Wholesale sales of men's and boys' clothing</b>		
a. Wholesale sales of men's and boys' suits, coats, and formal wear	\$ <input type="text"/> ,000.00	4000500003
b. Wholesale sales of men's and boys' dress and casual shirts, sweaters, slacks, and jeans	\$ <input type="text"/> ,000.00	4000500006
c. Wholesale sales of men's and boys' underwear and sleepwear	\$ <input type="text"/> ,000.00	4000500009
d. Wholesale sales of men's and boys' work clothing and uniforms, except athletic uniforms	\$ <input type="text"/> ,000.00	4000500012
e. Wholesale sales of other men's and boys' clothing, except accessories	\$ <input type="text"/> ,000.00	4000500015
<b>Subtotal</b>	\$ <input type="text"/> ,000.00	4000500000
<b>2. Wholesale sales of novelty T-shirts and other unisex clothing</b>		
a. Wholesale sales of women's, misses', and girls' dresses, blouses, and sweaters, including unisex clothing	\$ <input type="text"/> ,000.00	4000525003
b. Wholesale sales of women's, misses', and girls' suits and coats	\$ <input type="text"/> ,000.00	4000525006
c. Wholesale sales of women's, misses', and girls' outerwear, including skirts, slacks, and jeans	\$ <input type="text"/> ,000.00	4000525009
d. Wholesale sales of women's, misses', and girls' underwear and sleepwear	\$ <input type="text"/> ,000.00	4000525012
e. Wholesale sales of other women's, misses', and girls' clothing, except accessories	\$ <input type="text"/> ,000.00	4000525015
<b>Subtotal</b>	\$ <input type="text"/> ,000.00	4000525000
<b>3. Wholesale sales of clothing accessories, including novelty hats</b>		
a. Wholesale sales of men's and boys' clothing accessories, including hats, gloves, and neckwear	\$ <input type="text"/> ,000.00	4000625003
b. Wholesale sales of women's and girls' clothing accessories, including hats, gloves, and handbags	\$ <input type="text"/> ,000.00	4000625006
<b>Subtotal</b>	\$ <input type="text"/> ,000.00	4000625000
<b>4. Wholesale sales of infants' and children's clothing, to size 6X, including accessories</b>		
	\$ <input type="text"/> ,000.00	4000550000
<b>5. Wholesale sales of footwear and footwear accessories</b>		
a. Wholesale sales of athletic footwear, excluding cleated and other specialized athletic footwear	\$ <input type="text"/> ,000.00	4000600003
b. Wholesale sales of infants' footwear	\$ <input type="text"/> ,000.00	4000600006
c. Wholesale sales of women's, misses', and girls' footwear (including slippers), except athletic footwear	\$ <input type="text"/> ,000.00	4000600009
d. Wholesale sales of men's and boys' footwear (including slippers), except athletic footwear	\$ <input type="text"/> ,000.00	4000600012

e. Wholesale sales of shoe accessories (polishes, laces, trees, storage bags, etc.)	\$		,000.00	4000600015
<b>Subtotal</b>	\$		,000.00	4000600000
6. Wholesale sales of athletic uniforms	\$		,000.00	4000575000
7. Wholesale sales of sporting and recreational equipment	\$		,000.00	4001175000
8. Maintenance, repair, and alteration services for apparel, footwear, watches, and jewelry	\$		,000.00	7000200000
9. Wholesale sales of other goods, not elsewhere classified				
a. Wholesale sales of other goods, not elsewhere classified - write-in #1				
Describe	\$		,000.00	4005500003
b. Wholesale sales of other goods, not elsewhere classified - write-in #2				
Describe	\$		,000.00	4005500006
c. Wholesale sales of other goods, not elsewhere classified - write-in #3				
Describe	\$		,000.00	4005500009
d. Wholesale sales of other goods, not elsewhere classified - write-in #4				
Describe	\$		,000.00	4005500012
e. Wholesale sales of other goods, not elsewhere classified - write-in #5				
Describe	\$		,000.00	4005500015
f. Wholesale sales of other goods, not elsewhere classified - write-in #6				
Describe	\$		,000.00	4005500018
10. All other products and services, not elsewhere classified				
a. All other products and services, not elsewhere classified - write-in #1				
Pick one Describe	\$		,000.00	9000000003
b. All other products and services, not elsewhere classified - write-in #2				
Pick one Describe	\$		,000.00	9000000006
c. All other products and services, not elsewhere classified - write-in #3				
Pick one Describe	\$		,000.00	9000000009
Add Additional Products				
<b>TOTAL - Sum of lines should equal total Sales, Shipments, Receipts, or Revenue reported in Item 5</b>	\$		,000.00	9900000000

**ITEM 24: SHIPPING AND HANDLING**

Did this establishment have any receipts from customers for shipping and handling of merchandise in 2017?

- Yes
- No

**ITEM 24: SHIPPING AND HANDLING**

What were the total receipts of this establishment from customers for shipping and handling of merchandise?

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

Are receipts for shipping and handling included in sales and receipts (reported in **Item 5**)?

- Yes
- No

**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 27: Manufacturing Activities - Manufacturing at This Location

**ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING AT THIS LOCATION**

In 2017, did this establishment manufacture any products or produce any goods at this location?

- Yes
- No

**ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING BY OTHER COMPANY LOCATIONS INSIDE THE U.S.**

In 2017, did this establishment have any manufacturing done on its behalf by any other locations of your company **inside the U.S.**?

- Yes
- No

**ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING BY AFFILIATED COMPANIES INSIDE THE U.S.**

In 2017, did this establishment have any manufacturing done on its behalf by any **affiliated** companies **inside the U.S.**?

- Yes
- No

**ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING BY UNAFFILIATED COMPANIES INSIDE THE U.S.**

In 2017, did this establishment have any manufacturing done on its behalf by any **unaffiliated** companies **inside the U.S.**?

- Yes
- No

**ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING DONE OUTSIDE THE U.S.**

In 2017, did this establishment have any manufacturing done on its behalf **outside the U.S.**?

*Include manufacturing done outside the U.S. by both affiliated and unaffiliated companies.*

- Yes
- No

**ITEM 27: MANUFACTURING ACTIVITIES - DESIGN OR SPECIFICATION FOR PRODUCTS MANUFACTURED ON ITS BEHALF**

In 2017, did this establishment determine the design or specifications for any of the products that were manufactured on its behalf?

*"Design or specifications" refers to the function of the product, not just the appearance or its packaging.*

- Yes
- No

**ITEM 27: MANUFACTURING ACTIVITIES - PERCENTAGE OF REVENUE FOR PRODUCTS MANUFACTURED ON ITS BEHALF**

What percentage of this establishment's total revenue in 2017 was from the sale of products that were manufactured on its behalf, per this establishment's design or specifications?

*Estimates are acceptable.*

- 0%
- 1-25%
- 26-50%
- 51-75%
- 76-99%
- 100%

**ITEM 27: MANUFACTURING ACTIVITIES - U.S. COMPANY AS A WHOLE - MANUFACTURING DONE OUTSIDE THE U.S.**

In 2017, was your **U.S. company as a whole** responsible for the design of any products that were manufactured outside the U.S.?

- Yes
- No



**ITEM 28: SPECIAL INQUIRIES - EMPLOYMENT BY PRIMARY FUNCTION**

List the number of employees reported in **Item 7**, line A, by the employee's primary function.

	2017 Paid Employees
1. Selling	<input type="text"/>
2. Sales support - including office, clerical, warehousing, customer service, maintenance employees, and drivers	<input type="text"/>
3. General support of other establishments in your company - including central administrative, accounting, research, and other support employees	<input type="text"/>
4. Packaging	<input type="text"/>
5. Production - including employees who manufacture products from raw materials or semi-finished products (Report 'knockdown' assembly employees on line 6 below.)	<input type="text"/>
6. 'Knockdown' assembly - assembling prefabricated components designed for a single application or reassembly of completed products	<input type="text"/>
7. Other	<input type="text"/>
<input type="text" value="Describe"/>	<input type="text"/>
<b>8. TOTAL</b> (Sum of lines 1 through 7 should equal <b>Item 7</b> , line A.)	<input type="text"/>

**ITEM 28: SPECIAL INQUIRIES - PERCENT OF DROP SHIPPED SALES**

What was the percentage of sales that were drop shipped and did not enter this establishment?

2017  
 %

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	
\$	2036	,000.00

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

Report  Check if None

	2017	
\$		,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 State or Territory

ZIP Code

EIN

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

Did your company operate in more than one location in 2017?

- Yes
- No

**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 and Street

City, town, village, etc.

State  
 Select State or Territory

ZIP Code

Describe kind of business at this location

Type of operation at this location (see Additional Information).

**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.**

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

2017
<input type="text"/>

What was the annual payroll?

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

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

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

What were the sales, shipments, receipts, or revenue?

2017
\$ <input type="text"/> ,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 State or Territory

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

**ITEM 5: SALES, SHIPMENTS, RECEIPTS, OR REVENUE**

**A.** What were the sales and operating receipts?

(Include the gross selling value of business conducted for others. Include shipping and handling charges. Exclude sales taxes and Hawaii's General Excise Tax.)

Check if None

2017  
\$  ,000.00

**B.** Did this establishment earn commissions for the sale of merchandise?

- Yes - Go to line C
- No - Go to line F

**C.** What was the gross selling value of goods sold on a commission basis?

(Include on line A.)

2017  
\$  ,000.00

**D.** What were the commissions, including selling or listing fees, received on transactions reported on line C?

2017  
\$  ,000.00

**E.** What was this establishment's average commission rate earned?

2017  
 %

**F.** Is this the only establishment of this firm?

- Yes - Go to line H
- No - Go to line G

**G.** What was the percent of products sold by this establishment manufactured or mined in the United States by **your company** or its subsidiaries?

Check if None

2017  
 %

**H.** Did e-commerce account for more than 50% of this establishment's sales and/or operating receipts as reported on line A?

- Yes
- No

**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 9: VALUE OF INVENTORIES**

Did this establishment own inventories, regardless of where held, at the end of 2017 and/or 2016?

- Yes
- No

**ITEM 9: VALUE OF INVENTORIES**

What were the inventories and Last-in, First-out (LIFO) adjustment, if any, for products owned by this establishment as of December 31?

	Check if None	End of 2017	Check if None	End of 2016
<b>1. Total inventories before LIFO adjustment</b> (if any)	<input type="checkbox"/>	\$ <input type="text"/> ,000.00	<input type="checkbox"/>	\$ <input type="text"/> ,000.00
<b>2. LIFO reserve</b> (if any)	<input type="checkbox"/>	\$ <input type="text"/> ,000.00	<input type="checkbox"/>	\$ <input type="text"/> ,000.00
<b>3. Total inventories after LIFO adjustment</b> (Line 1 minus line 2.)	<input type="checkbox"/>	\$ <input type="text"/> ,000.00	<input type="checkbox"/>	\$ <input type="text"/> ,000.00

**ITEM 10: INVENTORIES BY VALUATION METHOD**

How much of the inventory reported in **Item 9**, line 1, for 2017 is subject to the following valuation methods?

	Check if None	End of 2017
<b>A.</b> LIFO valuation method before adjustment	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
<b>B.</b> First-in, First-out (FIFO)	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
<b>C.</b> Average cost	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
<b>D.</b> Standard cost	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
<b>E.</b> Other valuation method - Describe	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
Describe <input style="width: 300px;" type="text"/>		
<b>F. TOTAL</b> (Sum of lines A through E should equal <b>Item 9</b> , line 1.)	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00

**ITEM 16: SELECTED EXPENSES**

<p><b>A.</b> What were the operating expenses? (Include payroll. Exclude cost of goods sold and interest expense.)</p>	<p>Check if None</p> <input type="checkbox"/>	<p>2017</p> <p>\$ <input type="text"/> ,000.00</p>
<p><b>B.</b> What were purchases of merchandise for resale, net of returns, allowances, and trade and cash discounts? (Include amounts allowed for trade-ins.)</p>	<input type="checkbox"/>	<p>\$ <input type="text"/> ,000.00</p>
<p><b>C.</b> For the value reported on line B, were any of these goods ordered over an Internet, Extranet, Electronic Data Interchange (EDI) network, electronic mail, or other online system?</p> <p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> Do not know</p>		

**ITEM 17A: 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.**

- 424410 001  General-line groceries, including dried milk
- 424490 301  Soft drinks, bottled water, juices, and nonalcoholic beverages, including beverage concentrates
- 424490 101  Coffee, tea, and powdered drink mixes
- 424490 202  Bread and baked goods, including baking ingredients, spices, and cooking oil
- 424490 401  Nonperishable (canned and packaged) food, including condensed and evaporated milk
- 424420 001  Packaged frozen food
- 424450 001  Confectioneries, including candy, nuts, chips, and popcorn
- 424480 001  Fresh fruits and vegetables
- 424430 201  Dairy products, excluding dried, canned, and raw milk and cream
- 424440 201  Eggs, poultry, and poultry products, excluding live poultry
- 424470 001  Meat and meat products
- 424460 001  Fish and seafood
- 424490 601  Other grocery specialties
- 424490 604  Pet food
- 771000 004  Other principal business or activity - Describe

Describe

**ITEM 17B: TYPE OF OPERATION**

Which ONE of the following best describes this establishment's principal type of operation in 2017?

**Merchant wholesaler, buying and selling on own account**

12  Importer

13  Exporter

11  Merchant wholesale distributor or jobber

14  Own-brand importer and marketer

20  **Manufacturers' sales branch or office**

**Agent, broker, or commission merchant**

46  Manufacturers' representative or agent

41  Auction company

42  Broker, representing buyers and sellers

43  Commission merchant

44  Import agent

45  Export agent

49  **Electronic market - business-to-business marketplace that facilitates the sale of goods via the Internet or other electronic means, and operates on a commission or fee basis**

77  Other broker or agent - Describe

Describe

**ITEM 20: CLASS OF CUSTOMER**

**A.** As a general business practice, did this establishment sell to household consumers and individual users in 2017?

- Yes
- No

**B.** Were 75% or more of this establishment's sales to retailers/wholesalers/distributors for resale in 2017?

- Yes
- No

**C.** Did this establishment require proof of business or professional license from new customers?

- Yes
- No

**D.** What was the estimated percentage of this establishment's total sales by class of customer in 2017?

	2017
1. Household consumers and individuals	<input type="text"/> %
2. Export sales	<input type="text"/> %
3. Retailers for resale	<input type="text"/> %
4. Wholesalers/distributors for resale	<input type="text"/> %
5. Repair shops for use in repair work	<input type="text"/> %
6. Manufacturing and mining industrial users for use as input goods in production	<input type="text"/> %
7. Restaurants, hotels, food services, and contract feeding	<input type="text"/> %
8. Businesses for end use in their own operation, not for resale or production	<input type="text"/> %
9. Building contractors, heavy construction, and special trade contractors	<input type="text"/> %
10. Farmers for use in farm production	<input type="text"/> %
11. Governmental bodies (Federal, state, and local)	<input type="text"/> %
12. Other	<input type="text"/> %
<input type="text" value="Describe"/>	<input type="text"/> %
<b>13. TOTAL</b> (Sum of lines 1 through 12 should equal 100%.)	<input type="text"/> %

**ITEM 21: METHOD OF SELLING**

Which ONE of the following best describes this establishment's principal method of selling in 2017?

- Electronic commerce (selling goods or facilitating the sale of goods via the Internet or other electronic means)
- Warehouse or office (including telephone/fax orders or outside sales representatives)
- Store or display showroom (selling from a fixed or permanent location with physical displays of priced merchandise and/or from a counter)
- Mail order
- Home shopping via television
- Direct selling (selling in a face-to-face manner away from a fixed location, such as house-to-house, party plan, or temporary kiosk sales)
- Vending machines
- Other

Describe



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

1. Wholesale sales of nonperishable (canned and packaged) food	<input type="checkbox"/>	4000250000
a. Wholesale sales of nonperishable (canned and packaged) fruits and vegetables	<input type="checkbox"/>	4000250003
b. Wholesale sales of nonperishable (canned and packaged) fish and seafood	<input type="checkbox"/>	4000250012
c. Wholesale sales of nonperishable (canned and packaged) meat	<input type="checkbox"/>	4000250009
d. Wholesale sales of nonperishable (canned and packaged) milk	<input type="checkbox"/>	4000250015
e. Wholesale sales of baby food	<input type="checkbox"/>	4000250006
f. Wholesale sales of soup	<input type="checkbox"/>	4000250033
g. Wholesale sales of sauces, salad dressing, dips, and vinegar	<input type="checkbox"/>	4000250024
h. Wholesale sales of pickles and olives	<input type="checkbox"/>	4000250018
i. Wholesale sales of preserves, jellies, jams, peanut butter, and honey	<input type="checkbox"/>	4000250021
j. Wholesale sales of condiments	<input type="checkbox"/>	4000250027
k. Wholesale sales of other nonperishable (canned and packaged) food, including nonperishable poultry	<input type="checkbox"/>	4000250036
2. Wholesale sales of grocery specialties	<input type="checkbox"/>	4000275000
a. Wholesale sales of pasta	<input type="checkbox"/>	4000275006
b. Wholesale sales of polished rice	<input type="checkbox"/>	4000275009
c. Wholesale sales of breakfast cereals and bars	<input type="checkbox"/>	4000275003
d. Wholesale sales of packaged meals, except frozen	<input type="checkbox"/>	4000275012
e. Wholesale sales of other grocery specialties, including dried and soy milk, and edible dried beans	<input type="checkbox"/>	4000275015
3. Wholesale sales of grains, beans, and seeds used in food production	<input type="checkbox"/>	4002875000
4. Wholesale sales of packaged frozen food	<input type="checkbox"/>	4000025000
a. Wholesale sales of frozen vegetables	<input type="checkbox"/>	4000025009

<b>b.</b> Wholesale sales of frozen fish and seafood products	<input type="checkbox"/>	4000025006
<b>c.</b> Wholesale sales of frozen meat products	<input type="checkbox"/>	4000025015
<b>d.</b> Wholesale sales of frozen baked goods	<input type="checkbox"/>	4000025018
<b>e.</b> Wholesale sales of frozen poultry products	<input type="checkbox"/>	4000025021
<b>f.</b> Wholesale sales of frozen fruits and fruit juices	<input type="checkbox"/>	4000025012
<b>g.</b> Wholesale sales of frozen meals	<input type="checkbox"/>	4000025003
<b>h.</b> Wholesale sales of other frozen foods, except frozen dairy products	<input type="checkbox"/>	4000025024
<b>5.</b> Wholesale sales of baking ingredients	<input type="checkbox"/>	4000225000
<b>a.</b> Wholesale sales of spices	<input type="checkbox"/>	4000225012
<b>b.</b> Wholesale sales of cooking oils and margarine	<input type="checkbox"/>	4000225003
<b>c.</b> Wholesale sales of flour	<input type="checkbox"/>	4000225006
<b>d.</b> Wholesale sales of refined sugar	<input type="checkbox"/>	4000225009
<b>e.</b> Wholesale sales of baking mixes and dough	<input type="checkbox"/>	4000225015
<b>6.</b> Wholesale sales of cookies, bread, and baked goods	<input type="checkbox"/>	4000125000
<b>a.</b> Wholesale sales of cookies and cakes	<input type="checkbox"/>	4000125006
<b>b.</b> Wholesale sales of bread and rolls	<input type="checkbox"/>	4000125003
<b>c.</b> Wholesale sales of other baked goods, including crackers	<input type="checkbox"/>	4000125009
<b>7.</b> Wholesale sales of dairy products, except dried, canned, condensed, and evaporated dairy products	<input type="checkbox"/>	4000050000
<b>a.</b> Wholesale sales of cheese	<input type="checkbox"/>	4000050006
<b>b.</b> Wholesale sales of milk and cream, except raw milk and cream	<input type="checkbox"/>	4000050009
<b>c.</b> Wholesale sales of butter	<input type="checkbox"/>	4000050003
<b>d.</b> Wholesale sales of ice cream and other frozen dairy products	<input type="checkbox"/>	4000050012
<b>e.</b> Wholesale sales of yogurt	<input type="checkbox"/>	4000050015
<b>f.</b> Wholesale sales of other dairy products	<input type="checkbox"/>	4000050018

8. Wholesale sales of raw milk and cream	<input type="checkbox"/>	4002925000
9. Wholesale sales of confectionery and snack food, including chips	<input type="checkbox"/>	4000100000
a. Wholesale sales of candy, including chocolate	<input type="checkbox"/>	4000100003
b. Wholesale sales of chewing gum	<input type="checkbox"/>	4000100006
c. Wholesale sales of chips and popcorn	<input type="checkbox"/>	4000100012
d. Wholesale sales of nuts, except raw	<input type="checkbox"/>	4000100009
e. Wholesale sales of other confectioneries	<input type="checkbox"/>	4000100015
10. Wholesale sales of soft drinks, bottled water, juices, and nonalcoholic beverages	<input type="checkbox"/>	4000350000
a. Wholesale sales of packaged soft drinks	<input type="checkbox"/>	4000350003
b. Wholesale sales of bottled water	<input type="checkbox"/>	4000350009
c. Wholesale sales of non-frozen fruit and vegetable juices	<input type="checkbox"/>	4000350018
d. Wholesale sales of sport and energy drinks, including bottled and canned coffee and tea	<input type="checkbox"/>	4000350015
e. Wholesale sales of pre-mix and post-mix bulk soft drinks	<input type="checkbox"/>	4000350006
f. Wholesale sales of nonalcoholic beer and mixers	<input type="checkbox"/>	4000350012
11. Wholesale sales of coffee, tea, and powdered drink mixes	<input type="checkbox"/>	4000300000
a. Wholesale sales of coffee, except bottled and canned	<input type="checkbox"/>	4000300003
b. Wholesale sales of tea, except bottled and canned	<input type="checkbox"/>	4000300006
c. Wholesale sales of powdered drink mixes	<input type="checkbox"/>	4000300009
12. Wholesale sales of fresh fruits and vegetables	<input type="checkbox"/>	4000200000
13. Wholesale sales of fresh meat and meat products, except canned and frozen	<input type="checkbox"/>	4000175000
a. Wholesale sales of beef	<input type="checkbox"/>	4000175003
b. Wholesale sales of pork	<input type="checkbox"/>	4000175012
c. Wholesale sales of fresh sausage and prepared meats	<input type="checkbox"/>	4000175015
d. Wholesale sales of veal	<input type="checkbox"/>	4000175006

e. Wholesale sales of lamb and mutton	■	4000175009
f. Wholesale sales of other meat and meat products, including bison, venison, deli (sliced) meats, and edible organs	■	4000175018
14. Wholesale sales of eggs and poultry, except canned and frozen poultry products	■	4000075000
15. Wholesale sales of fish and seafood, except canned and frozen fish and seafood	■	4000150000
16. Wholesale sales of food and beverage basic materials, including flavoring extracts, fruit peel, sausage casings, hop extract, malt, and yeast	■	4000325000
17. Wholesale sales of household pets, pet foods, and pet supplies	■	4001300000
18. Wholesale sales of disposable paper and plastic products	■	4005275000
19. Wholesale sales of restaurant, commercial food service and hotel equipment	■	4002560000
20. Wholesale sales of cosmetics, beauty supplies, perfumes and colognes, including hair preparations and hair brushes	■	4001575000
21. Wholesale sales of bath, facial, and hand soaps, including shampoos	■	4001600000
22. Wholesale sales of other personal care supplies, including toothbrushes (except electric), razor blades, and razors (except electric)	■	4001650000
23. Wholesale sales of cleaning chemicals	■	4005230000
24. Wholesale sales of tobacco products and electronic cigarettes	■	4000450000
25. Wholesale sales of household furnishings, except artificial flowers, plants, and trees	■	4000850000
26. Wholesale sales of tableware, kitchenware, cookware, and glassware, except cutlery and novelty glassware	■	4000900000
27. Wholesale sales of beer and ale	■	4000375000
28. Wholesale sales of brewers' products	■	4002950000
29. Wholesale sales of wine and distilled liquor, including premixed alcoholic drinks	■	4000400000

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
<b>1. Wholesale sales of nonperishable (canned and packaged) food</b>		
a. Wholesale sales of nonperishable (canned and packaged) fruits and vegetables	\$ <input type="text"/> ,000.00	4000250003
b. Wholesale sales of nonperishable (canned and packaged) fish and seafood	\$ <input type="text"/> ,000.00	4000250012
c. Wholesale sales of nonperishable (canned and packaged) meat	\$ <input type="text"/> ,000.00	4000250009
d. Wholesale sales of nonperishable (canned and packaged) milk	\$ <input type="text"/> ,000.00	4000250015
e. Wholesale sales of baby food	\$ <input type="text"/> ,000.00	4000250006
f. Wholesale sales of soup	\$ <input type="text"/> ,000.00	4000250033
g. Wholesale sales of sauces, salad dressing, dips, and vinegar	\$ <input type="text"/> ,000.00	4000250024
h. Wholesale sales of pickles and olives	\$ <input type="text"/> ,000.00	4000250018
i. Wholesale sales of preserves, jellies, jams, peanut butter, and honey	\$ <input type="text"/> ,000.00	4000250021
j. Wholesale sales of condiments	\$ <input type="text"/> ,000.00	4000250027
k. Wholesale sales of other nonperishable (canned and packaged) food, including nonperishable poultry	\$ <input type="text"/> ,000.00	4000250036
<b>Subtotal</b>	\$ <input type="text"/> ,000.00	4000250000
<b>2. Wholesale sales of grocery specialties</b>		
a. Wholesale sales of pasta	\$ <input type="text"/> ,000.00	4000275006
b. Wholesale sales of polished rice	\$ <input type="text"/> ,000.00	4000275009
c. Wholesale sales of breakfast cereals and bars	\$ <input type="text"/> ,000.00	4000275003
d. Wholesale sales of packaged meals, except frozen	\$ <input type="text"/> ,000.00	4000275012
e. Wholesale sales of other grocery specialties, including dried and soy milk, and edible dried beans	\$ <input type="text"/> ,000.00	4000275015
<b>Subtotal</b>	\$ <input type="text"/> ,000.00	4000275000
<b>3. Wholesale sales of grains, beans, and seeds used in food production</b>	\$ <input type="text"/> ,000.00	4002875000
<b>4. Wholesale sales of packaged frozen food</b>		
a. Wholesale sales of frozen vegetables	\$ <input type="text"/> ,000.00	4000025009
b. Wholesale sales of frozen fish and seafood products	\$ <input type="text"/> ,000.00	4000025006

c. Wholesale sales of frozen meat products	\$		,000.00	4000025015
d. Wholesale sales of frozen baked goods	\$		,000.00	4000025018
e. Wholesale sales of frozen poultry products	\$		,000.00	4000025021
f. Wholesale sales of frozen fruits and fruit juices	\$		,000.00	4000025012
g. Wholesale sales of frozen meals	\$		,000.00	4000025003
h. Wholesale sales of other frozen foods, except frozen dairy products	\$		,000.00	4000025024
<b>Subtotal</b>	\$		,000.00	4000025000
<b>5. Wholesale sales of baking ingredients</b>				
a. Wholesale sales of spices	\$		,000.00	4000225012
b. Wholesale sales of cooking oils and margarine	\$		,000.00	4000225003
c. Wholesale sales of flour	\$		,000.00	4000225006
d. Wholesale sales of refined sugar	\$		,000.00	4000225009
e. Wholesale sales of baking mixes and dough	\$		,000.00	4000225015
<b>Subtotal</b>	\$		,000.00	4000225000
<b>6. Wholesale sales of cookies, bread, and baked goods</b>				
a. Wholesale sales of cookies and cakes	\$		,000.00	4000125006
b. Wholesale sales of bread and rolls	\$		,000.00	4000125003
c. Wholesale sales of other baked goods, including crackers	\$		,000.00	4000125009
<b>Subtotal</b>	\$		,000.00	4000125000
<b>7. Wholesale sales of dairy products, except dried, canned, condensed, and evaporated dairy products</b>				
a. Wholesale sales of cheese	\$		,000.00	4000050006
b. Wholesale sales of milk and cream, except raw milk and cream	\$		,000.00	4000050009
c. Wholesale sales of butter	\$		,000.00	4000050003
d. Wholesale sales of ice cream and other frozen dairy products	\$		,000.00	4000050012
e. Wholesale sales of yogurt	\$		,000.00	4000050015
f. Wholesale sales of other dairy products	\$		,000.00	4000050018
<b>Subtotal</b>	\$		,000.00	4000050000

8. Wholesale sales of raw milk and cream	\$		,000.00	4002925000
9. Wholesale sales of confectionery and snack food, including chips				
a. Wholesale sales of candy, including chocolate	\$		,000.00	4000100003
b. Wholesale sales of chewing gum	\$		,000.00	4000100006
c. Wholesale sales of chips and popcorn	\$		,000.00	4000100012
d. Wholesale sales of nuts, except raw	\$		,000.00	4000100009
e. Wholesale sales of other confectioneries	\$		,000.00	4000100015
<b>Subtotal</b>	\$		,000.00	4000100000
10. Wholesale sales of soft drinks, bottled water, juices, and nonalcoholic beverages				
a. Wholesale sales of packaged soft drinks	\$		,000.00	4000350003
b. Wholesale sales of bottled water	\$		,000.00	4000350009
c. Wholesale sales of non-frozen fruit and vegetable juices	\$		,000.00	4000350018
d. Wholesale sales of sport and energy drinks, including bottled and canned coffee and tea	\$		,000.00	4000350015
e. Wholesale sales of pre-mix and post-mix bulk soft drinks	\$		,000.00	4000350006
f. Wholesale sales of nonalcoholic beer and mixers	\$		,000.00	4000350012
<b>Subtotal</b>	\$		,000.00	4000350000
11. Wholesale sales of coffee, tea, and powdered drink mixes				
a. Wholesale sales of coffee, except bottled and canned	\$		,000.00	4000300003
b. Wholesale sales of tea, except bottled and canned	\$		,000.00	4000300006
c. Wholesale sales of powdered drink mixes	\$		,000.00	4000300009
<b>Subtotal</b>	\$		,000.00	4000300000
12. Wholesale sales of fresh fruits and vegetables				
13. Wholesale sales of fresh meat and meat products, except canned and frozen				
a. Wholesale sales of beef	\$		,000.00	4000175003
b. Wholesale sales of pork	\$		,000.00	4000175012
c. Wholesale sales of fresh sausage and prepared meats	\$		,000.00	4000175015
d. Wholesale sales of veal	\$		,000.00	4000175006

e. Wholesale sales of lamb and mutton	\$ <input type="text"/> ,000.00	4000175009
f. Wholesale sales of other meat and meat products, including bison, venison, deli (sliced) meats, and edible organs	\$ <input type="text"/> ,000.00	4000175018
<b>Subtotal</b>	\$ <input type="text"/> ,000.00	4000175000
14. Wholesale sales of eggs and poultry, except canned and frozen poultry products	\$ <input type="text"/> ,000.00	4000075000
15. Wholesale sales of fish and seafood, except canned and frozen fish and seafood	\$ <input type="text"/> ,000.00	4000150000
16. Wholesale sales of food and beverage basic materials, including flavoring extracts, fruit peel, sausage casings, hop extract, malt, and yeast	\$ <input type="text"/> ,000.00	4000325000
17. Wholesale sales of household pets, pet foods, and pet supplies	\$ <input type="text"/> ,000.00	4001300000
18. Wholesale sales of disposable paper and plastic products	\$ <input type="text"/> ,000.00	4005275000
19. Wholesale sales of restaurant, commercial food service and hotel equipment	\$ <input type="text"/> ,000.00	4002560000
20. Wholesale sales of cosmetics, beauty supplies, perfumes and colognes, including hair preparations and hair brushes	\$ <input type="text"/> ,000.00	4001575000
21. Wholesale sales of bath, facial, and hand soaps, including shampoos	\$ <input type="text"/> ,000.00	4001600000
22. Wholesale sales of other personal care supplies, including toothbrushes (except electric), razor blades, and razors (except electric)	\$ <input type="text"/> ,000.00	4001650000
23. Wholesale sales of cleaning chemicals	\$ <input type="text"/> ,000.00	4005230000
24. Wholesale sales of tobacco products and electronic cigarettes	\$ <input type="text"/> ,000.00	4000450000
25. Wholesale sales of household furnishings, except artificial flowers, plants, and trees	\$ <input type="text"/> ,000.00	4000850000
26. Wholesale sales of tableware, kitchenware, cookware, and glassware, except cutlery and novelty glassware	\$ <input type="text"/> ,000.00	4000900000
27. Wholesale sales of beer and ale	\$ <input type="text"/> ,000.00	4000375000
28. Wholesale sales of brewers' products	\$ <input type="text"/> ,000.00	4002950000
29. Wholesale sales of wine and distilled liquor, including premixed alcoholic drinks	\$ <input type="text"/> ,000.00	4000400000
30. Wholesale sales of other goods, not elsewhere classified		
a. Wholesale sales of other goods, not elsewhere classified - write-in #1		
<input type="text" value="Describe"/>	\$ <input type="text"/> ,000.00	4005500003
b. Wholesale sales of other goods, not elsewhere classified - write-in #2		
<input type="text" value="Describe"/>	\$ <input type="text"/> ,000.00	4005500006



c. Wholesale sales of other goods, not elsewhere classified - write-in #3

Describe

\$ ,000.00

4005500009

d. Wholesale sales of other goods, not elsewhere classified - write-in #4

Describe

\$ ,000.00

4005500012

e. Wholesale sales of other goods, not elsewhere classified - write-in #5

Describe

\$ ,000.00

4005500015

f. Wholesale sales of other goods, not elsewhere classified - write-in #6

Describe

\$ ,000.00

4005500018

31. All other products and services, not elsewhere classified

a. All other products and services, not elsewhere classified - write-in #1

Pick one

Describe

\$ ,000.00

9000000003

b. All other products and services, not elsewhere classified - write-in #2

Pick one

Describe

\$ ,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 24: SHIPPING AND HANDLING**

Did this establishment have any receipts from customers for shipping and handling of merchandise in 2017?

- Yes
- No

**ITEM 24: SHIPPING AND HANDLING**

What were the total receipts of this establishment from customers for shipping and handling of merchandise?

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

Are receipts for shipping and handling included in sales and receipts (reported in **Item 5**)?

- Yes
- No

**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 27: Manufacturing Activities - Manufacturing at This Location

**ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING AT THIS LOCATION**

In 2017, did this establishment manufacture any products or produce any goods at this location?

- Yes
- No

Item 27: Manufacturing Activities - Manufacturing by Other Company Locations Inside the U.S.

**ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING BY OTHER COMPANY LOCATIONS INSIDE THE U.S.**

In 2017, did this establishment have any manufacturing done on its behalf by any other locations of your company **inside the U.S.**?

- Yes
- No

**ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING BY AFFILIATED COMPANIES INSIDE THE U.S.**

In 2017, did this establishment have any manufacturing done on its behalf by any **affiliated** companies **inside the U.S.**?

- Yes
- No

**ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING BY UNAFFILIATED COMPANIES INSIDE THE U.S.**

In 2017, did this establishment have any manufacturing done on its behalf by any **unaffiliated** companies **inside the U.S.**?

- Yes
- No



**ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING DONE OUTSIDE THE U.S.**

In 2017, did this establishment have any manufacturing done on its behalf **outside the U.S.**?

*Include manufacturing done outside the U.S. by both affiliated and unaffiliated companies.*

- Yes
- No

**ITEM 27: MANUFACTURING ACTIVITIES - DESIGN OR SPECIFICATION FOR PRODUCTS MANUFACTURED ON ITS BEHALF**

In 2017, did this establishment determine the design or specifications for any of the products that were manufactured on its behalf?

*"Design or specifications" refers to the function of the product, not just the appearance or its packaging.*

- Yes
- No

**ITEM 27: MANUFACTURING ACTIVITIES - PERCENTAGE OF REVENUE FOR PRODUCTS MANUFACTURED ON ITS BEHALF**

What percentage of this establishment's total revenue in 2017 was from the sale of products that were manufactured on its behalf, per this establishment's design or specifications?

*Estimates are acceptable.*

- 0%
- 1-25%
- 26-50%
- 51-75%
- 76-99%
- 100%

**ITEM 27: MANUFACTURING ACTIVITIES - U.S. COMPANY AS A WHOLE - MANUFACTURING DONE OUTSIDE THE U.S.**

In 2017, was your **U.S. company as a whole** responsible for the design of any products that were manufactured outside the U.S.?

- Yes
- No

**ITEM 28: SPECIAL INQUIRIES - EMPLOYMENT BY PRIMARY FUNCTION**

List the number of employees reported in **Item 7**, line A, by the employee's primary function.

	2017 Paid Employees
1. Selling	<input type="text"/>
2. Sales support - including office, clerical, warehousing, customer service, maintenance employees, and drivers	<input type="text"/>
3. General support of other establishments in your company - including central administrative, accounting, research, and other support employees	<input type="text"/>
4. Packaging	<input type="text"/>
5. Production - including employees who manufacture products from raw materials or semi-finished products (Report 'knockdown' assembly employees on line 6 below.)	<input type="text"/>
6. 'Knockdown' assembly - assembling prefabricated components designed for a single application or reassembly of completed products	<input type="text"/>
7. Other	<input type="text"/>
<input type="text" value="Describe"/>	<input type="text"/>
<b>8. TOTAL</b> (Sum of lines 1 through 7 should equal <b>Item 7</b> , line A.)	<input type="text"/>

**ITEM 28: SPECIAL INQUIRIES - PERCENT OF DROP SHIPPED SALES**

What was the percentage of sales that were drop shipped and did not enter this establishment?

2017  
 %

**ITEM 28: SPECIAL INQUIRIES - GOODS PURCHASED FROM FARMERS**

Were 50 percent or more of the goods sold by this establishment in 2017 purchased directly from farmers?

- Yes
- No

**ITEM 28: SPECIAL INQUIRIES - GENERAL LINE GROCERIES**

Which ONE of the following is this establishment?

- Voluntary group wholesaler (An establishment affiliated with independent retailers engaged in joint sales promotions under a group name)
- Retail-cooperative wholesaler (An establishment owned and operated cooperatively by independent retailers buying collectively)
- Other grocery wholesaler



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
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**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  
\$ 2036 ,000.00

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

Report  Check if None

2017  
\$ ,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 State or Territory

ZIP Code

EIN

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

Did your company operate in more than one location in 2017?

- 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 and Street

City, town, village, etc.

State  
 Select State or Territory

ZIP Code

Describe kind of business at this location

Type of operation at this location (see Additional Information).

**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.**

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

2017
<input type="text"/>

What was the annual payroll?

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

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

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

What were the sales, shipments, receipts, or revenue?

2017
\$ <input type="text"/> ,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 State or Territory

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

**ITEM 5: SALES, SHIPMENTS, RECEIPTS, OR REVENUE**

**A.** What were the sales and operating receipts?

(Include the gross selling value of business conducted for others. Include shipping and handling charges. Exclude sales taxes and Hawaii's General Excise Tax.)

Check if None

2017  
\$  ,000.00

**B.** Did this establishment earn commissions for the sale of merchandise?

- Yes - Go to line C
- No - Go to line F

**C.** What was the gross selling value of goods sold on a commission basis?

(Include on line A.)

2017  
\$  ,000.00

**D.** What were the commissions, including selling or listing fees, received on transactions reported on line C?

2017  
\$  ,000.00

**E.** What was this establishment's average commission rate earned?

2017  
 %

**F.** Is this the only establishment of this firm?

- Yes - Go to line H
- No - Go to line G

**G.** What was the percent of products sold by this establishment manufactured or mined in the United States by **your company** or its subsidiaries?

Check if None

2017  
 %

**H.** Did e-commerce account for more than 50% of this establishment's sales and/or operating receipts as reported on line A?

- Yes
- No

**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)?

\$ <input style="width: 100px;" type="text"/> ,000.00
---

**ITEM 9: VALUE OF INVENTORIES**

Did this establishment own inventories, regardless of where held, at the end of 2017 and/or 2016?

- Yes
- No

**ITEM 9: VALUE OF INVENTORIES**

What were the inventories and Last-in, First-out (LIFO) adjustment, if any, for products owned by this establishment as of December 31?

	Check if None	End of 2017	Check if None	End of 2016
<b>1. Total inventories before LIFO adjustment</b> (if any)	<input type="checkbox"/>	\$ <input style="width: 80px;" type="text"/> ,000.00	<input type="checkbox"/>	\$ <input style="width: 80px;" type="text"/> ,000.00
<b>2. LIFO reserve</b> (if any)	<input type="checkbox"/>	\$ <input style="width: 80px;" type="text"/> ,000.00	<input type="checkbox"/>	\$ <input style="width: 80px;" type="text"/> ,000.00
<b>3. Total inventories after LIFO adjustment</b> (Line 1 minus line 2.)	<input type="checkbox"/>	\$ <input style="width: 80px;" type="text"/> ,000.00	<input type="checkbox"/>	\$ <input style="width: 80px;" type="text"/> ,000.00



**ITEM 10: INVENTORIES BY VALUATION METHOD**

How much of the inventory reported in **Item 9**, line 1, for 2017 is subject to the following valuation methods?

	Check if None	End of 2017
<b>A.</b> LIFO valuation method before adjustment	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
<b>B.</b> First-in, First-out (FIFO)	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
<b>C.</b> Average cost	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
<b>D.</b> Standard cost	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
<b>E.</b> Other valuation method - Describe	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
Describe <input style="width: 300px;" type="text"/>	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00
<b>F. TOTAL</b> (Sum of lines A through E should equal <b>Item 9</b> , line 1.)	<input type="checkbox"/>	\$ <input style="width: 100px;" type="text"/> ,000.00

**ITEM 16: SELECTED EXPENSES**

<p><b>A.</b> What were the operating expenses? (Include payroll. Exclude cost of goods sold and interest expense.)</p>	<p>Check if None</p> <input type="checkbox"/>	<p>2017</p> <p>\$ <input type="text"/> ,000.00</p>
<p><b>B.</b> What were purchases of merchandise for resale, net of returns, allowances, and trade and cash discounts? (Include amounts allowed for trade-ins.)</p>	<input type="checkbox"/>	<p>\$ <input type="text"/> ,000.00</p>
<p><b>C.</b> For the value reported on line B, were any of these goods ordered over an Internet, Extranet, Electronic Data Interchange (EDI) network, electronic mail, or other online system?</p>		
<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> Do not know</p>		

**ITEM 17A: 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.**

- 425120 422 General-line drugs agents and brokers, including over the counter drugs and antibiotics
- 425120 423 Specialty-line drugs agents and brokers, including those which require special handling, injectables, short shelf life, experimental and nuclear
- 425120 424 Veterinarians' medicines agents and brokers
- 425120 425 Health and beauty accessories agents and brokers, including cosmetics, toiletries, vitamins, and first-aid supplies
- 425120 441 Grocery and related products agents and brokers
- 425120 491 Miscellaneous nondurable goods agents and brokers
- 425110 003 Business-to-business electronic markets
- 771000 001 Other principal business or activity - Describe

**ITEM 17B: TYPE OF OPERATION**

Which ONE of the following best describes this establishment's principal type of operation in 2017?

**Merchant wholesaler, buying and selling on own account**

12  Importer

13  Exporter

11  Merchant wholesale distributor or jobber

14  Own-brand importer and marketer

20  **Manufacturers' sales branch or office**

**Agent, broker, or commission merchant**

46  Manufacturers' representative or agent

41  Auction company

42  Broker, representing buyers and sellers

43  Commission merchant

44  Import agent

45  Export agent

49  **Electronic market - business-to-business marketplace that facilitates the sale of goods via the Internet or other electronic means, and operates on a commission or fee basis**

77  Other broker or agent - Describe

Describe

**ITEM 20: CLASS OF CUSTOMER**

**A.** As a general business practice, did this establishment sell to household consumers and individual users in 2017?

- Yes
- No

**B.** Were 75% or more of this establishment's sales to retailers/wholesalers/distributors for resale in 2017?

- Yes
- No

**C.** Did this establishment require proof of business or professional license from new customers?

- Yes
- No

**D.** What was the estimated percentage of this establishment's total sales by class of customer in 2017?

	2017
1. Household consumers and individuals	<input type="text"/> %
2. Export sales	<input type="text"/> %
3. Retailers for resale	<input type="text"/> %
4. Wholesalers/distributors for resale	<input type="text"/> %
5. Repair shops for use in repair work	<input type="text"/> %
6. Manufacturing and mining industrial users for use as input goods in production	<input type="text"/> %
7. Restaurants, hotels, food services, and contract feeding	<input type="text"/> %
8. Businesses for end use in their own operation, not for resale or production	<input type="text"/> %
9. Building contractors, heavy construction, and special trade contractors	<input type="text"/> %
10. Farmers for use in farm production	<input type="text"/> %
11. Governmental bodies (Federal, state, and local)	<input type="text"/> %
12. Other	<input type="text"/> %
<input type="text" value="Describe"/>	<input type="text"/> %
<b>13. TOTAL</b> (Sum of lines 1 through 12 should equal 100%.)	<input type="text"/> %

**ITEM 21: METHOD OF SELLING**

Which ONE of the following best describes this establishment's principal method of selling in 2017?

- Electronic commerce (selling goods or facilitating the sale of goods via the Internet or other electronic means)
- Warehouse or office (including telephone/fax orders or outside sales representatives)
- Store or display showroom (selling from a fixed or permanent location with physical displays of priced merchandise and/or from a counter)
- Mail order
- Home shopping via television
- Direct selling (selling in a face-to-face manner away from a fixed location, such as house-to-house, party plan, or temporary kiosk sales)
- Vending machines
- Other

Describe

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

1. Wholesale sales of prescription drugs and antibiotics	<input type="checkbox"/>	4001425000
2. Wholesale sales of nonprescription drugs and over-the-counter medications	<input type="checkbox"/>	4001450000
3. Wholesale sales of vitamins and nutritional and herbal supplements	<input type="checkbox"/>	4001475000
4. Wholesale sales of cosmetics, beauty supplies, perfumes and colognes, including hair preparations and hair brushes	<input type="checkbox"/>	4001575000
a. Wholesale sales of cosmetics and beauty supplies, including lotions and creams	<input type="checkbox"/>	4001575003
b. Wholesale sales of beauty and barber supplies, including combs, curlers, and shampoos	<input type="checkbox"/>	4001575006
c. Wholesale sales of perfumes and colognes	<input type="checkbox"/>	4001575009
5. Wholesale sales of health aids and first aid supplies	<input type="checkbox"/>	4001550000
a. Wholesale sales of first aid kits, including nonsurgical bandages and gauze	<input type="checkbox"/>	4001550003
b. Wholesale sales of sunblock and insect repellent	<input type="checkbox"/>	4001550006
c. Wholesale sales of other health aids and first aid supplies	<input type="checkbox"/>	4001550009
6. Wholesale sales of specialty pharmaceuticals, including vaccines, laboratory diagnostic reagents, and similar	<input type="checkbox"/>	4005125000
a. Wholesale sales of vaccines	<input type="checkbox"/>	4005125003
b. Wholesale sales of diagnostic reagents, in-vivo and in-vitro products	<input type="checkbox"/>	4005125006
c. Wholesale sales of biologicals and allied products	<input type="checkbox"/>	4005125009
d. Wholesale sales of blood derivatives and plasma	<input type="checkbox"/>	4005125012
e. Wholesale sales of antitoxins	<input type="checkbox"/>	4005125015
f. Wholesale sales of radiopharmaceuticals	<input type="checkbox"/>	4005125018
g. Wholesale sales of radioactive pharmaceutical isotopes	<input type="checkbox"/>	4005125021
h. Wholesale sales of patent medicines	<input type="checkbox"/>	4005125024
i. Wholesale sales of other specialty line pharmaceuticals	<input type="checkbox"/>	4005125027

7. Wholesale sales of veterinary and pet medicines	<input type="checkbox"/>	4005150000
8. Wholesale sales of bath, facial, and hand soaps, including shampoos	<input type="checkbox"/>	4001600000
9. Wholesale sales of other personal care supplies, including toothbrushes (except electric), razor blades, and razors (except electric)	<input type="checkbox"/>	4001650000
10. Wholesale sales of wigs and hairpieces	<input type="checkbox"/>	4005498000
11. Wholesale sales of medical, dental, and veterinary equipment	<input type="checkbox"/>	4002525000
a. Wholesale sales of surgical, medical, and hospital instruments and equipment	<input type="checkbox"/>	4002525003
b. Wholesale sales of dental equipment, including chairs, x-ray machines, and cabinets	<input type="checkbox"/>	4002525006
c. Wholesale sales of veterinarians' equipment	<input type="checkbox"/>	4002525009
d. Wholesale sales of optometric equipment	<input type="checkbox"/>	4002525012
12. Wholesale sales of medical, dental, and veterinary instruments and supplies	<input type="checkbox"/>	4005175000
13. Wholesale sales of orthopedic and prosthetic appliances and supplies, including wheelchairs, walkers, crutches, canes, and hearing aids	<input type="checkbox"/>	4001525000
14. Wholesale sales of household pets, pet foods, and pet supplies	<input type="checkbox"/>	4001300000
15. Wholesale sales of confectionery and snack food, including chips	<input type="checkbox"/>	4000100000
16. Wholesale sales of grocery specialties	<input type="checkbox"/>	4000275000
17. Wholesale sales of coffee, tea, and powdered drink mixes	<input type="checkbox"/>	4000300000
18. Wholesale sales of men's and boys' clothing	<input type="checkbox"/>	4000500000
19. Wholesale sales of novelty T-shirts and other unisex clothing	<input type="checkbox"/>	4000525000
20. Wholesale sales of toys, games, and hobby goods	<input type="checkbox"/>	4001200000
21. Wholesale sales of disposable paper and plastic products	<input type="checkbox"/>	4005275000
22. Wholesale sales of cleaning chemicals	<input type="checkbox"/>	4005230000
23. Wholesale sales of chemicals, except explosives and automotive, drillers, and sanitation chemicals	<input type="checkbox"/>	4003375000
24. Wholesale sales of laundry and dry-cleaning supplies	<input type="checkbox"/>	4005310000
25. Maintenance and repair services for other industrial, commercial, and service industry machinery and equipment, not elsewhere classified	<input type="checkbox"/>	7009500000
26. Rental of commercial and service industry machinery and equipment, without operator	<input type="checkbox"/>	7009125000





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. Wholesale sales of prescription drugs and antibiotics	\$ <input type="text"/> ,000.00	4001425000
2. Wholesale sales of nonprescription drugs and over-the-counter medications	\$ <input type="text"/> ,000.00	4001450000
3. Wholesale sales of vitamins and nutritional and herbal supplements	\$ <input type="text"/> ,000.00	4001475000
4. Wholesale sales of cosmetics, beauty supplies, perfumes and colognes, including hair preparations and hair brushes		
a. Wholesale sales of cosmetics and beauty supplies, including lotions and creams	\$ <input type="text"/> ,000.00	4001575003
b. Wholesale sales of beauty and barber supplies, including combs, curlers, and shampoos	\$ <input type="text"/> ,000.00	4001575006
c. Wholesale sales of perfumes and colognes	\$ <input type="text"/> ,000.00	4001575009
<b>Subtotal</b>	\$ <input type="text"/> ,000.00	4001575000
5. Wholesale sales of health aids and first aid supplies		
a. Wholesale sales of first aid kits, including nonsurgical bandages and gauze	\$ <input type="text"/> ,000.00	4001550003
b. Wholesale sales of sunblock and insect repellent	\$ <input type="text"/> ,000.00	4001550006
c. Wholesale sales of other health aids and first aid supplies	\$ <input type="text"/> ,000.00	4001550009
<b>Subtotal</b>	\$ <input type="text"/> ,000.00	4001550000
6. Wholesale sales of specialty pharmaceuticals, including vaccines, laboratory diagnostic reagents, and similar		
a. Wholesale sales of vaccines	\$ <input type="text"/> ,000.00	4005125003
b. Wholesale sales of diagnostic reagents, in-vivo and in-vitro products	\$ <input type="text"/> ,000.00	4005125006
c. Wholesale sales of biologicals and allied products	\$ <input type="text"/> ,000.00	4005125009
d. Wholesale sales of blood derivatives and plasma	\$ <input type="text"/> ,000.00	4005125012
e. Wholesale sales of antitoxins	\$ <input type="text"/> ,000.00	4005125015
f. Wholesale sales of radiopharmaceuticals	\$ <input type="text"/> ,000.00	4005125018
g. Wholesale sales of radioactive pharmaceutical isotopes	\$ <input type="text"/> ,000.00	4005125021
h. Wholesale sales of patent medicines	\$ <input type="text"/> ,000.00	4005125024

i. Wholesale sales of other specialty line pharmaceuticals	\$		,000.00	4005125027
<b>Subtotal</b>	\$		,000.00	4005125000
7. Wholesale sales of veterinary and pet medicines	\$		,000.00	4005150000
8. Wholesale sales of bath, facial, and hand soaps, including shampoos	\$		,000.00	4001600000
9. Wholesale sales of other personal care supplies, including toothbrushes (except electric), razor blades, and razors (except electric)	\$		,000.00	4001650000
10. Wholesale sales of wigs and hairpieces	\$		,000.00	4005498000
11. Wholesale sales of medical, dental, and veterinary equipment				
a. Wholesale sales of surgical, medical, and hospital instruments and equipment	\$		,000.00	4002525003
b. Wholesale sales of dental equipment, including chairs, x-ray machines, and cabinets	\$		,000.00	4002525006
c. Wholesale sales of veterinarians' equipment	\$		,000.00	4002525009
d. Wholesale sales of optometric equipment	\$		,000.00	4002525012
<b>Subtotal</b>	\$		,000.00	4002525000
12. Wholesale sales of medical, dental, and veterinary instruments and supplies	\$		,000.00	4005175000
13. Wholesale sales of orthopedic and prosthetic appliances and supplies, including wheelchairs, walkers, crutches, canes, and hearing aids	\$		,000.00	4001525000
14. Wholesale sales of household pets, pet foods, and pet supplies	\$		,000.00	4001300000
15. Wholesale sales of confectionery and snack food, including chips	\$		,000.00	4000100000
16. Wholesale sales of grocery specialties	\$		,000.00	4000275000
17. Wholesale sales of coffee, tea, and powdered drink mixes	\$		,000.00	4000300000
18. Wholesale sales of men's and boys' clothing	\$		,000.00	4000500000
19. Wholesale sales of novelty T-shirts and other unisex clothing	\$		,000.00	4000525000
20. Wholesale sales of toys, games, and hobby goods	\$		,000.00	4001200000
21. Wholesale sales of disposable paper and plastic products	\$		,000.00	4005275000
22. Wholesale sales of cleaning chemicals	\$		,000.00	4005230000
23. Wholesale sales of chemicals, except explosives and automotive, drillers, and sanitation chemicals	\$		,000.00	4003375000
24. Wholesale sales of laundry and dry-cleaning supplies	\$		,000.00	4005310000
25. Maintenance and repair services for other industrial, commercial, and service industry machinery and equipment, not elsewhere classified	\$		,000.00	7009500000
26. Rental of commercial and service industry machinery and equipment, without operator	\$		,000.00	7009125000

27. Wholesale sales of other goods, not elsewhere classified

a. Wholesale sales of other goods, not elsewhere classified - write-in #1

Describe	\$ <input style="width: 80px;" type="text"/> ,000.00	4005500003
----------	--	------------

b. Wholesale sales of other goods, not elsewhere classified - write-in #2

Describe	\$ <input style="width: 80px;" type="text"/> ,000.00	4005500006
----------	--	------------

c. Wholesale sales of other goods, not elsewhere classified - write-in #3

Describe	\$ <input style="width: 80px;" type="text"/> ,000.00	4005500009
----------	--	------------

d. Wholesale sales of other goods, not elsewhere classified - write-in #4

Describe	\$ <input style="width: 80px;" type="text"/> ,000.00	4005500012
----------	--	------------

e. Wholesale sales of other goods, not elsewhere classified - write-in #5

Describe	\$ <input style="width: 80px;" type="text"/> ,000.00	4005500015
----------	--	------------

f. Wholesale sales of other goods, not elsewhere classified - write-in #6

Describe	\$ <input style="width: 80px;" type="text"/> ,000.00	4005500018
----------	--	------------

28. All other products and services, not elsewhere classified

a. All other products and services, not elsewhere classified - write-in #1

Pick one	Describe	\$ <input style="width: 80px;" type="text"/> ,000.00	9000000003
----------	----------	--	------------

b. All other products and services, not elsewhere classified - write-in #2

Pick one	Describe	\$ <input style="width: 80px;" type="text"/> ,000.00	9000000006
----------	----------	--	------------

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

Pick one	Describe	\$ <input style="width: 80px;" type="text"/> ,000.00	9000000009
----------	----------	--	------------

Add Additional Products

<b>TOTAL - Sum of lines should equal total Sales, Shipments, Receipts, or Revenue reported in Item 5</b>	\$ <input style="width: 80px;" type="text"/> ,000.00	9900000000
--	--	------------

**ITEM 24: SHIPPING AND HANDLING**

Did this establishment have any receipts from customers for shipping and handling of merchandise in 2017?

- Yes
- No

**ITEM 24: SHIPPING AND HANDLING**

What were the total receipts of this establishment from customers for shipping and handling of merchandise?

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

Are receipts for shipping and handling included in sales and receipts (reported in **Item 5**)?

- Yes
- No

**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 27: Manufacturing Activities - Manufacturing at This Location

**ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING AT THIS LOCATION**

In 2017, did this establishment manufacture any products or produce any goods at this location?

- Yes
- No

Item 27: Manufacturing Activities - Manufacturing by Other Company Locations Inside the U.S.

**ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING BY OTHER COMPANY LOCATIONS INSIDE THE U.S.**

In 2017, did this establishment have any manufacturing done on its behalf by any other locations of your company **inside the U.S.**?

- Yes
- No



**ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING BY AFFILIATED COMPANIES INSIDE THE U.S.**

In 2017, did this establishment have any manufacturing done on its behalf by any **affiliated** companies **inside the U.S.**?

- Yes
- No

**ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING BY UNAFFILIATED COMPANIES INSIDE THE U.S.**

In 2017, did this establishment have any manufacturing done on its behalf by any **unaffiliated** companies **inside the U.S.**?

- Yes
- No

**ITEM 27: MANUFACTURING ACTIVITIES - MANUFACTURING DONE OUTSIDE THE U.S.**

In 2017, did this establishment have any manufacturing done on its behalf **outside the U.S.**?

*Include manufacturing done outside the U.S. by both affiliated and unaffiliated companies.*

- Yes
- No

**ITEM 27: MANUFACTURING ACTIVITIES - DESIGN OR SPECIFICATION FOR PRODUCTS MANUFACTURED ON ITS BEHALF**

In 2017, did this establishment determine the design or specifications for any of the products that were manufactured on its behalf?

*"Design or specifications" refers to the function of the product, not just the appearance or its packaging.*

- Yes
- No

**ITEM 27: MANUFACTURING ACTIVITIES - PERCENTAGE OF REVENUE FOR PRODUCTS MANUFACTURED ON ITS BEHALF**

What percentage of this establishment's total revenue in 2017 was from the sale of products that were manufactured on its behalf, per this establishment's design or specifications?

*Estimates are acceptable.*

- 0%
- 1-25%
- 26-50%
- 51-75%
- 76-99%
- 100%

**ITEM 27: MANUFACTURING ACTIVITIES - U.S. COMPANY AS A WHOLE - MANUFACTURING DONE OUTSIDE THE U.S.**

In 2017, was your **U.S. company as a whole** responsible for the design of any products that were manufactured outside the U.S.?

- Yes
- No

**ITEM 28: SPECIAL INQUIRIES - EMPLOYMENT BY PRIMARY FUNCTION**

List the number of employees reported in **Item 7**, line A, by the employee's primary function.

	2017 Paid Employees
1. Selling	<input type="text"/>
2. Sales support - including office, clerical, warehousing, customer service, maintenance employees, and drivers	<input type="text"/>
3. General support of other establishments in your company - including central administrative, accounting, research, and other support employees	<input type="text"/>
4. Packaging	<input type="text"/>
5. Production - including employees who manufacture products from raw materials or semi-finished products (Report 'knockdown' assembly employees on line 6 below.)	<input type="text"/>
6. 'Knockdown' assembly - assembling prefabricated components designed for a single application or reassembly of completed products	<input type="text"/>
7. Other	<input type="text"/>
<input type="text" value="Describe"/>	<input type="text"/>
<b>8. TOTAL</b> (Sum of lines 1 through 7 should equal <b>Item 7</b> , line A.)	<input type="text"/>

**ITEM 28: SPECIAL INQUIRIES - PERCENT OF DROP SHIPPED SALES**

What was the percentage of sales that were drop shipped and did not enter this establishment?

2017  
 %



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.