Attachment D-18

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

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

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

Location Information

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 ZIP Code Select State or Territory ADDR_CITY 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 ZIP Code City, town, village, etc. State Select State or Territory PHYSLOC_ADDR_CITY PHYSLOC_A For Census Bureau Use Only CFN RECORD_CFN ELECTRONIC_B



Legal Boundary and Municipality

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 - Continued
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



Additional Reporting Guidelines

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

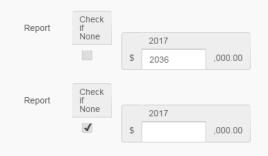
EXAMPLE: If a dollar figure is \$2,036,355.25

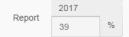
EXAMPLE: If a dollar figure is "0" (or less than \$500.00):

How to Report Percents:

Percents should be rounded to whole percents

EXAMPLE: If figure is 38.76% of total sales







Item 2A: Ownership or Control
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 - Voting Stock Validation



Item 2A: Ownership or Control - Management and Policy

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

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



Item 2B: Number of Establishments - More Than One Location

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

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

lame		
condary Name	Store/Plant Number	
imber and Street		
y, town, village, etc.	State Select States and Territories	ZIP Code
escribe kind of business at this loca	tion	
	than one location, report the employment and payroll data for employees	at the ONE location where they spent most
r employees that worked at more rking time. Number of Employees for Pay Perio		2017
rking time.		2017
rking time. lumber of Employees for Pay Perio		2017 Number



Item 2B: Number of Establishments - Consolidating Data Instructions

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

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 - Sold Operation Date and Information

non was this satablish	and as larged to another operation		
ien was this establishment s	sold or leased to another operator?		
IMDDYYYY			
	m		
at is the name, address, ar	nd 9-digit Employer Identification Numbe	er (EIN) of this establishment's new owner or operator?	,
ame of new owner/operator			
anic of new owner/operator			
failing Address (Number and	d Street, P.O. Box, etc.)		
lailing Address (Number and	d Street, P.O. Box, etc.)		
failing Address (Number and	d Street, P.O. Box, etc.)		
failing Address (Number and	d Street, P.O. Box, etc.)	State	ZIP Code
	d Street, P.O. Box, etc.)	State Select States and Territories	ZIP Code
	d Street, P.O. Box, etc.)		ZIP Code
	d Street, P.O. Box, etc.)		ZIP Code
ity, town, village, etc.	d Street, P.O. Box, etc.)		ZIP Code



ITEM 4: MONTHS IN OPERATION

Check if None

What was the number of months in operation during 2017?



ITEM 5: Sales, Shipments, Receipts, or Revenue

Check if None

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



Item 7: Employment and Payroll

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?

None 2017

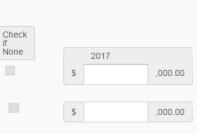
Check

B. Payroll before deductions

(Exclude employer's cost for fringe benefits.)

1. What was the annual payroll?

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





ITEM 17: PRINCIPAL BUSINESS OR ACTIVITY

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

arber, beautician,	and	nail care services
812112 001		Beauty shop or hair salon
812113 001		Nail salon
812112 002		Unisex hair shop, including combined beauty/barber shop
812112 004		Day spa, including hair services
812111 001		Barber shop
812199 007		Day spa, excluding hair services
812112 005		Skin care (i.e., esthetician) services
812112 003		Facial salon
611511 001		Cosmetology or beauty school and barber college or school
ther personal care	e and	d appearance services
812199 002		Tanning salon
621399 007		Massage therapist(s) - NCTMB (Nationally Certified in Therapeutic Massage and Bodywork)
812199 001		Massage salon
812199 006		Hair replacement services, excluding services performed by a physician
812199 005		Tattoo parlor
812199 004		Hair removal services, including electrolysis, laser removal, and waxing
812199 003		Sauna, steam bath, or Turkish bath
812191 001		Diet or weight reducing center, excluding physical fitness facilities
713940 905		Physical fitness, strength development, or weight training center
ther principal bus	ines	s or activity
773000 002		Other principal business or activity - Describe
		Describe



\$,000.00 of Sales, Shipments, Receipts, or Revenue reported in Item 5, what products and services were included? t ALL that apply.	
1. Hair care services More	70050250
a. Permanent hair texture modification	7005025
b. Hair coloring and tinting	7005025
c. Hair cut and styling services	7005025
d. Other hair care services	7005025
2. Nail care services	7005050
a. Manicure services	7005050
b. Pedicure services	7005050
c. Other nail care services	7005050
3. Skin care services	7005075
a. Facial services	7005075
b. Masks and body wrap services	7005075
c. Temporary makeup services	7005075
d. Permanent makeup services	7005075
e. Other skin care services	7005075
4. Hair removal services	7005100
a. Permanent hair removal services	7005100
b. Temporary hair removal services	7005100
5. Non-therapeutic massage services	7005125
Therapeutic massage services Include sports massage therapy.	7004925



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





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

Description	Value	Pro Co
1. Hair care services More		
a. Permanent hair texture modification	\$,00	70050
b. Hair coloring and tinting	\$ 00,	70050
c. Hair cut and styling services	\$,00	70050
d. Other hair care services	\$,00	70050
Subtotal	\$,00	70050
2. Nail care services		
a. Manicure services	\$,00	70050
b. Pedicure services	\$,00	70050
c. Other nail care services	\$,00	70050
Subtotal	\$,00	70050
3. Skin care services		
a. Facial services	\$,00	70050
b. Masks and body wrap services	\$,00	70050
c. Temporary makeup services	\$,00	70050
d. Permanent makeup services	\$,00	70050
e. Other skin care services	\$,00	70050
Subtotal	\$ 000,	70050
4. Hair removal services		
a. Permanent hair removal services	\$ 00,	70051
b. Temporary hair removal services	\$ 00,	70051
Subtotal	\$ 000,	70051
5. Non-therapeutic massage services	\$ 00,	70051



The back and the b		
7. Tattoo, tanning and other body modification services More		
a. Tanning services	\$,000.00	70051
b. Tattoo services	\$,000.00	70051
c. Tattoo removal services	\$,000.00	70051
d. Piercing services	\$,000.00	70051
e. Other body modification services	\$,000.00	70051
Subtotal	\$,000.00	70051
8. Rental and leasing of commercial space		
a. Rental and leasing of retail space in shopping malls	\$,000.00	70063
b. Rental and leasing of food service space in shopping malls	\$,000.00	70063
c. Rental and leasing of retail space in free-standing locations	\$,000.00	70063
d. Rental and leasing of food service space in free-standing locations	\$,000.00	70063
e. Rental and leasing of booths and chairs in beauty and personal care establishments	\$,000.00	70063
f. Rental and leasing of other commercial space	\$,000.00	70063
Subtotal	\$,000.00	70063
Rental and leasing of nonresidential space in buildings or other facilities, except hosting of coin-operated self-service gambling machines	\$,000.00	70065
10. Weight loss services More		
a. Non-medical weight loss programs	\$,000.00	70051
b. Non-medical diet management services	\$,000.00	70051
Subtotal	\$,000.00	70051
11. Fitness evaluation and personal fitness training services	\$,000.00	70021
 Trade, career, technical and professional development training programs (such as seminars and courses on beauty and personal care) 	\$,000.00	70039
Leisure, recreational, and athletic instructional programs Include exercise instructional programs.	\$,000.00	70025
14. Retail sales of medicines, vitamins, minerals, and supplements	\$,000.00	50013
15. Retail sales of cosmetics and fragrances	\$,000.00	50014



16. Retail sales of personal	hygiene supplies	\$,000.00	500142500
makers; frypans; person	sehold appliances, including mixers; blenders; can openers; toasters; coffee al care appliances, such as hair dryers, curling irons, and shavers; tap water	\$,000.00	50007250
purifiers and filters; etc.			
18. Other personal services	including access to public saunas and Turkish baths	\$,000.00	70025600
19. All other products and se	ervices, not elsewhere classified		
a. All other products and	d services, not elsewhere classified - write-in #1		
Pick one	Describe	\$,000.00	90000000
b. All other products and	d services, not elsewhere classified - write-in #2		
Pick one	Describe	\$,000.00	90000000
c. All other products and	d services, not elsewhere classified - write-in #3		
Pick one	Describe	\$,000.00	90000000
Add Additional Prod	lucts		
	equal total Sales, Shipments, Receipts, or Revenue reported in Item 5		



Item 25: Franchise

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

ITEM 26: BUSINESS COOPERATIVE

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

Is this establishment a cooperative?

Yes

○ No



Remarks	
REMARKS	
(Please use this space for any explanations that may be essential in understanding your reported data.) Maximum length is 1,000 characters.	
	You have
	1000
	characters left.



Location Information

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 ZIP Code Select State or Territory ADDR_CITY 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 ZIP Code City, town, village, etc. State Select State or Territory PHYSLOC_ADDR_CITY PHYSLOC_A For Census Bureau Use Only CFN RECORD_CFN ELECTRONIC_B



Legal Boundary and Municipality

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 - Continued
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



Additional Reporting Guidelines

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

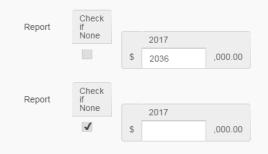
EXAMPLE: If a dollar figure is \$2,036,355.25

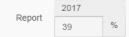
EXAMPLE: If a dollar figure is "0" (or less than \$500.00):

How to Report Percents:

Percents should be rounded to whole percents

EXAMPLE: If figure is 38.76% of total sales







Item 2A: Ownership or Control
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

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

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

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 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



Item 2B: Number of Establishments - More Than One Location

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.
- Do not consider branch locations of laundries and drycleaners (including industrial, linen, and diaper supply) that are only providing pick-up and distribution of finished work as separate establishments. Data for these locations should be included with the plant in which the work is actually done.



Item 2B: Number of Establishments - Establishment Information

lame		
econdary Name	Store/Plant Number	
umber and Street		
ity, town, village, etc.	State Select States and Territories	ZIP Code
escribe kind of business at this loca	tion	
	than one location, report the employment and payroll data for emplo	yees at the ONE location where they spent mos
	than one location, report the employment and payroll data for emplo	eyees at the ONE location where they spent mos
rking time.		2017
r employees that worked at more riking time. Number of Employees for Pay Perio First Quarter Payroll Jan - March 2017)		2017
Number of Employees for Pay Perio		2017 Number



Item 2B: Number of Establishments - Consolidating Data Instructions

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

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 - Sold Operation Date and Information

ITEM 3: OPERATIONAL STATUS - SOLD OPERATION DATE AND II	NFORMATION	
When was this establishment sold or leased to another operator?		
MMDDYYYY		
What is the name, address, and 9-digit Employer Identification Number	er (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	ZIP Code
	Select States and Territories	
EIN		



ITEM 4: MONTHS IN OPERATION

Check if None

What was the number of months in operation during 2017?



Item 5: Sales, Shipments, Receipts, or Revenue

ITEM 5: SALES, SHIPMENTS, RECEIPTS, OR REVENUE

Check if None

2017

What were the total operating receipts?



Item 7: Employment and Payroll

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?

None 2017

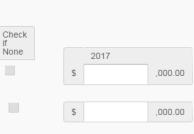
Check

B. Payroll before deductions

(Exclude employer's cost for fringe benefits.)

1. What was the annual payroll?

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





Item 17: Principal Business or Activity

ITEM 17: PRINCIPAL BUSINESS OR ACTIVITY

Which ONE of the following best describes this establishment's principal kind of business or activity in 2017?

If none of the provided selections seem appropriate, provide a specific description of the primary business activity.

Select only ONE.

Laundry and drycleaning services				
812310 201		Self-service laundry and/or drycleaning store		
812310 101		Coin-operated laundry washing machine route, including service provided in apartments, dormitories, etc.		
812320 201		Drycleaning services, excluding rug cleaning		
561740 001		Carpet, rug, and upholstery cleaning services		
812320 101		Commercial or family laundry services		
812331 001		Linen supply services on a rental or contract basis		
812332 001		Industrial laundry services on a rental or contract basis		
812320 301		Drop off/pick up site or garment pressing, including laundry or cleaning done by others		
812320 302		Retail agent for laundries and drycleaners (work done by others)		
812320 303		Wash and fold services		
812320 401		Leather and/or fur cleaning services		
Other clothing and	fabr	ic services		
811490 402		Garment alteration or repair services		
811430 001		Shoe and leather goods repair		
Other principal bus	ines	s or activity		
811192 001		Carwash		
773000 001		Other principal business or activity - Describe		
		Describe		



at apply.	
ss to laundry machines More	70001000
ccess to washing machines	7000100
ccess to drying machines	7000100
ccess to dry-cleaning machines	7000100
leaning services More	7000150
eneral dry-cleaning services	7000150
pecialty dry-cleaning services	7000150
mercial laundry services More	7017250
commercial laundry services	7000125
dry and dry-cleaning agency services More	7017275
aundry agency services	7017275
ry-cleaning agency services	7017275
rm rental and linen supply services	7017300
arments supply, including gowns, coats, aprons, etc.	7017300
latwork and full dry linens supply	7017300
dustrial garments supply, excluding 'clean room' garments	7017300
ndustrial 'clean room' garments supply	7017300
idustrial wiping cloths supply	7017300
dustrial mats supply, including launderable and unlaunderable	7017300
ndustrial mops, cloths, and miscellaneous dust control items supply	7017300



Seasonal apparel and textile storage services	700022500
Rental and leasing of nonresidential space in buildings or other facilities, except hosting of coin-operated self-service gambling machines	700657500
10. Maintenance, repair, and alteration services for apparel, footwear, watches, and jewelry More	700020000
a. Restoration and repair services for garments and textiles	700020000
b. Garment alteration services	700020000
c. Footwear maintenance and repair services	700020000
d. Watch and jewelry maintenance and repair services	700020001



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

Description	Value	Prod Cod
1. Access to laundry machines More		
a. Access to washing machines	\$ 00,	700010
b. Access to drying machines	\$,00	700010
c. Access to dry-cleaning machines	\$,00	700010
Subtotal	\$ 00,	700010
2. Dry-cleaning services More		
a. General dry-cleaning services	\$ 00,	700015
b. Specialty dry-cleaning services	\$,00	700015
Subtotal	\$,00	700015
3. Commercial laundry services More	\$,00	701725
4. Non-commercial laundry services	\$ 00,	700012
5. Laundry and dry-cleaning agency services More		
a. Laundry agency services	\$,00	701727
b. Dry-cleaning agency services	\$,00	701727
Subtotal	\$ 00,	701727
6. Uniform rental and linen supply services		
a. Garments supply, including gowns, coats, aprons, etc.	\$ 00,	701730
b. Flatwork and full dry linens supply	\$ 00,	701730
c. Industrial garments supply, excluding 'clean room' garments	\$,00	701730
d. Industrial 'clean room' garments supply	\$ 00,	701730
e. Industrial wiping cloths supply	\$,00	701730
f. Industrial mats supply, including launderable and unlaunderable	\$ 00,	701730
g. Industrial mops, cloths, and miscellaneous dust control items supply	\$,00	701730
Subtotal	\$,00	00.00 701730



7. Steam pressing and ironin	g services	\$,000.00	700017
3. Seasonal apparel and text	ile storage services	\$,000.00	700022
Rental and leasing of nonr self-service gambling mac	residential space in buildings or other facilities, except hosting of coin-operated hines	\$,000.00	700657
10. Maintenance, repair, and	alteration services for apparel, footwear, watches, and jewelry More		
a. Restoration and repair	services for garments and textiles	\$,000.00	700020
b. Garment alteration se	rvices	\$,000.00	700020
c. Footwear maintenance	e and repair services	\$,000.00	700020
d. Watch and jewelry ma	intenance and repair services	\$,000.00	700020
Subtotal		\$,000.00	700020
11. All other products and se	rvices, not elsewhere classified		
a. All other products and	services, not elsewhere classified - write-in #1		
Pick one	Describe	\$,000.00	900000
b. All other products and	services, not elsewhere classified - write-in #2		
Pick one	Describe	\$,000.00	900000
c. All other products and	services, not elsewhere classified - write-in #3		
c. All other products and	services, not elsewhere classified - write-in #3 Describe	\$,000.00	900000
	Describe	\$,000.00	900000



Item 25: Franchise

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

ITEM 26: BUSINESS COOPERATIVE

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

Is this establishment a cooperative?

Yes

○ No



ITEM 28: SPECIAL INQUIRIES - DRYCLEANING

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

Yes

No



ITEM 28: SPECIAL INQUIRIES - LAUNDRY WORK

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

Yes

No



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



Location Information

DEFINITION OF ESTABLISHMENT

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

DEFINITION OF AN ENTERPRISE

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

the power to direct or cause the direction of management and policies. DEFINITION OF AN ENTERPRISE SUPPORT ESTABLISHMENT An enterprise support establishment is an establishment that is primarily engaged in performing management, supervision, general administrative functions, and supporting services for other establishments of the same enterprise, rather than for the general public or other business firms. MAILING ADDRESS Please update the mailing address if needed. ATTN RECORD_ATTN_TXT Name 1 RECORD_NAME1 Store/Plant RECORD_STOR Name 2 RECORD_NAME2 Number and Street ADDR_STREET ZIP Code City, town, village, etc State Select State or Territory ADDR CITY 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. State ZIP Code Select State or Territory PHYSLOC_ADDR_CITY PHYSLOC A For Census Bureau Use Only CFN ELECTRONIC_B RECORD_CFN



Legal Boundary and Municipality

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					
● NO					



Item 1: Employer Identification Number - Continued			
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			



Additional Reporting Guidelines

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

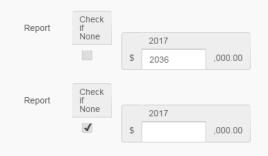
EXAMPLE: If a dollar figure is \$2,036,355.25

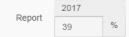
EXAMPLE: If a dollar figure is "0" (or less than \$500.00):

How to Report Percents:

Percents should be rounded to whole percents

EXAMPLE: If figure is 38.76% of total sales







Item 3: Operational Status

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 - Sold Operation Date and Information

EM 3: OPERATIONAL STATUS - SOLD OPERA	TION DATE AND INFORMATION	
EM 0. OFERATIONAL STATUS - SOLD OFERA	HON DATE AND INFORMATION	
hen was this establishment sold or leased to and	other operator?	
MMDDYYYY		
m		
hat is the name, address, and 9-digit Employer l	dentification Number (EIN) of this establishment's new owner or operator?	?
Name of new owner/operator		
Mailing Address (Number and Street, P.O. Box, et	(c.)	
City, town, village, etc.	State	ZIP Code
Sity, town, village, etc.	State Select States and Territories	ZIP Code
		ZIP Code
EIN		ZIP Code
		ZIP Code
		ZIP Code



ITEM 4: MONTHS IN OPERATION

Check if None

What was the number of months in operation during 2017?



Item 5: Sales, Shipments, Receipts, or Revenue

ITEM 5: SALES, SHIPMENTS, RECEIPTS, OR REVENUE

A. Sales, Receipts, or Revenue

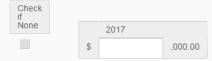
Include:

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

Exclude

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

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



B. Exported Services

NOTE: An exported service is a product (e.g., service performed, license agreement) that is sold or transferred to, or performed for a customer or client (individual, government, business establishment, etc.) located **outside** the United States (i.e., outside the 50 States, District of Columbia, U.S. Commonwealth Territories, or U.S. possessions).

Include:

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

Exclude:

• Products provided to domestic subsidiaries of foreign firms



2017	
\$,000.00

What were the receipts or revenue for exported services?

Item 7: Employment and Payroll

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?

None 2017

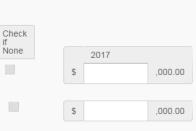
Check

B. Payroll before deductions

(Exclude employer's cost for fringe benefits.)

1. What was the annual payroll?

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





Item 8: Support Services

ITEM 8	· SUPP	ORT SE	RVICES

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

Yes

⊚ No



ITEM 8: SUPPORT SERVICES

PRINCIPAL BUSINESS OR ACTIVITY OF THE OPERATING ESTABLISHMENTS SERVICED

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

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

Describe



ITEM 16: SELECTED EXPENSES Report the payment of selected expenses allocated by category • Report payments for expenses directly incurred by this establishment in column 1. • Report payments made by this establishment for expenses incurred by other establishments of your enterprise in column 2 (where applicable). . Transfers made within the company Capitalized expenses Impairment Interest Bad debt Income tax • Taxes collected from customers (e.g., sales and excise) . Cost of merchandise for resale Personnel costs, except payroll 2017 Expenses of Check 1. Employer's cost for employer paid establishment ONLY None insurance premiums, pension plans, payroll taxes, and other employee \$,000.00 benefits More 2. Temporary staff and leased \$,000.00 employee expense More Expensed equipment and materials 3. Expensed computer hardware and \$,000.00 other equipment More 4. Expensed purchases of other materials, parts, and \$,000.00 supplies More Expensed purchased services 5. Expensed purchases of \$,000.00 software More \$,000.00 6. Purchased electricity More 7. Purchased fuels (Exclude motor \$,000.00 fuels.) More 2017 Payments made by this establishment on behalf of other establishments Check of your enterprise None 8. Data processing and other purchased computer \$,000.00 \$,000.00 services More 9. Purchased communication \$ \$,000.00 ,000.00 services More 10. Purchased repairs and



maintenance to machinery,

Purchased repairs and maintenance to buildings,

vehicles, and equipment More

structures, and offices More

12. Water, sewer, refuse removal, and

other utility payments More

,000.00

,000.00

,000.00

\$

\$

\$

\$

\$

\$

,000.00

,000.00

,000.00

40 Development of the division and				
Purchased advertising and promotional services More	\$,000.00	\$,000.00
14. Purchased professional and technical services More	\$,000.00	\$,000.00
her selected expenses				
15. Lease and rental payments for machinery, equipment, and other tangible items More	\$,000.00	\$,000.00
16. Lease and rental payments for land, buildings, structures, store	\$,000.00	\$,000.00
spaces, and offices More		,555.55		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
17. Governmental taxes and license fees (Exclude sales, excise, and income taxes.) More	\$,000.00	\$,000.00
18. Depreciation and amortization charges More	\$,000.00		
19. All other selected expenses (Describe - If more than 50% of TOTAL reported on line 20.) More	\$,000.000		
Describe				
20. TOTAL SELECTED EXPENSES of this establishment ONLY, excluding payroll (Add lines 1				
through 19.)	\$,000.00		



Item 17: Principal Business or Activity

ITEM 17: PRINCIPAL BUSINESS OR ACTIVITY Which ONE of the following best describes this establishment's principal kind of business or activity in 2017? If none of the provided selections seem appropriate, provide a specific description of the primary business activity. Select only ONE. Automobile parking 812930 003 O Parking structure and lot at same location 812930 002 O Parking structure 812930 004 O Parking garage, underground 812930 005 O Valet parking services 812930 008 Other parking services - Describe Describe Other principal business or activity 773000 001 Other principal business or activity - Describe Describe



Item 20: Class of Customer

ITEM 20: CLASS OF CUSTOMER		
Estimate the percentage of receipts (reported in Item 5) from services provided to clients outside your enterprise by class of customer	r.	
	2017	
1. Business firms and farms	%	
2. Not-for-profit organizations (Include religious organizations.)	%	
3. Federal government	%	
4. State and local governments	%	
5. Household consumers and individuals	%	
6. TOTAL (Sum of lines 1 through 5 should equal 100%.)	%	



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

ne \$,000.00 of Sales, Shipments, Receipts, or Revenue reported in Item 5, what products and services were included? ect ALL that apply.	
1. Parking services	700275000
a. Off-street parking services, hourly or daily	700275000
b. Off-street parking services, weekly or monthly, in buildings	700275000
c. Off-street parking services, weekly or monthly, on lots	700275000
d. On-street parking services	700275001
e. Valet parking services	700275001
Rental and leasing of nonresidential space in buildings or other facilities, except hosting of coin-operated self-service gambling machines	700657500



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

Description		Value		Produc Code
Parking services				
a. Off-street parking se	ervices, hourly or daily	\$,000.00	70027500
b. Off-street parking se	ervices, weekly or monthly, in buildings	\$,000.00	7002750
c. Off-street parking se	ervices, weekly or monthly, on lots	\$,000.00	7002750
d. On-street parking se	ervices	\$,000.00	7002750
e. Valet parking service	es	\$,000.00	7002750
Subtotal		\$,000.00	7002750
	onresidential space in buildings or other facilities, except hosting of coin-operated achines	\$,000.00	
Rental and leasing of no self-service gambling ma				
Rental and leasing of no self-service gambling ma All other products and se	achines			7002750
Rental and leasing of no self-service gambling ma All other products and se	ervices, not elsewhere classified			
2. Rental and leasing of no self-service gambling ma 3. All other products and se a. All other products and Pick one	ervices, not elsewhere classified nd services, not elsewhere classified - write-in #1	\$,000.00	7006575
2. Rental and leasing of no self-service gambling ma 3. All other products and se a. All other products and Pick one	ervices, not elsewhere classified nd services, not elsewhere classified - write-in #1 Describe	\$,000.00	7006575
2. Rental and leasing of no self-service gambling ma 3. All other products and se a. All other products and Pick one b. All other products ar	achines ervices, not elsewhere classified nd services, not elsewhere classified - write-in #1 Describe nd services, not elsewhere classified - write-in #2	\$,000.00	7006575
2. Rental and leasing of no self-service gambling ma 3. All other products and se a. All other products and Pick one b. All other products ar	ervices, not elsewhere classified Indicate services, not elsewhere classified - write-in #1 Describe Indicate services, not elsewhere classified - write-in #2 Describe	\$,000.00	7006575
2. Rental and leasing of no self-service gambling mass. 3. All other products and sea. All other products and Pick one. b. All other products are Pick one. c. All other products are Pick one.	ervices, not elsewhere classified Indicate services, not elsewhere classified - write-in #1 Describe Indicate services, not elsewhere classified - write-in #2 Describe Indicate services, not elsewhere classified - write-in #3 Describe Describe	\$ \$,000.00	7006575 9000000 9000000



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
	characters left.



Location Information

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 ZIP Code Select State or Territory ADDR_CITY 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 ZIP Code City, town, village, etc. State Select State or Territory PHYSLOC_ADDR_CITY PHYSLOC_A For Census Bureau Use Only CFN RECORD_CFN ELECTRONIC_B



Legal Boundary and Municipality

LEGAL BOUNDARY AND MUNICIPALITY
Is this establishment physically located inside the legal boundaries of the city, town, village, etc.?
○ 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 - Continued
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



Additional Reporting Guidelines

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

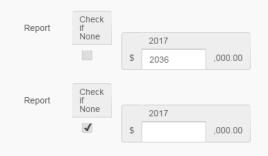
EXAMPLE: If a dollar figure is \$2,036,355.25

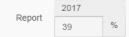
EXAMPLE: If a dollar figure is "0" (or less than \$500.00):

How to Report Percents:

Percents should be rounded to whole percents

EXAMPLE: If figure is 38.76% of total sales







Item 2A: Ownership or Control
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 - Voting Stock Validation



Item 2A: Ownership or Control - Management and Policy

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

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



Item 2B: Number of Establishments - More Than One Location

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

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

lame		
condary Name	Store/Plant Number	
imber and Street		
y, town, village, etc.	State Select States and Territories	ZIP Code
escribe kind of business at this loca	tion	
	than one location, report the employment and payroll data for employees	at the ONE location where they spent most
r employees that worked at more rking time. Number of Employees for Pay Perio		2017
rking time.		2017
rking time. lumber of Employees for Pay Perio		2017 Number



Item 2B: Number of Establishments - Consolidating Data Instructions

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

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 - Sold Operation Date and Information

ITEM 3: OPERATIONAL STATUS - SOLD OPERATION DATE A	ND INFORMATION	
When was this establishment sold or leased to another operator	?	
MMDDYYYY		
m		
What is the name, address, and 9-digit Employer Identification N	lumber (EIN) of this establishment's new owner or operator?	
	tamber (Env) 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	ZIP Code
	Select States and Territories	
EIN		



ITEM 4: MONTHS IN OPERATION

Check if None

What was the number of months in operation during 2017?



ITEM 5: SALES, SHIPMENTS, RECEIPTS, OR REVENUE

Tax Status

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

Yes

No



Item 5: Sales, Shipments, Receipts, or Revenue - Continued

ITEM 5: SALES, SHIPMENTS, RECEIPTS, OR REVENUE

Check if None

2017

What were the total operating receipts of this taxable establishment?



Item 5: Sales, Shipments, Receipts, or Revenue - Continued

ITEM 5: SALES, SHIPMENTS, RECEIPTS, OR REVENUE

Revenue and expenses of this tax-exempt establishment

Check if None

1. What was the total revenue?

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

\$ 000.00



Item 7: Employment and Payroll

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?

None 2017

Check

B. Payroll before deductions

(Exclude employer's cost for fringe benefits.)

1. What was the annual payroll?

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





ITEM 17: PRINCIPAL BUSINESS OR ACTIVITY

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

vic, social, and re	ecrea	tional associations
813990 405	0	Property owners' association, including home owners', condominium owners', and cooperative owners' associations (Not strictly providing property management.)
777813 026		Lessors of real estate - Describe type of real estate. Describe
813410 406		Civic, social, or fraternal association, including alumni associations, community membership clubs, historical clubs, etc. (Exclude scouting a related youth development organizations.)
813410 405		Veterans membership organization
813410 303		Scouting membership organization
813410 304	0	Youth development membership organization developing life, leadership, or business skills, excluding scouting membership organizations
713990 80B	0	Youth day camp (Exclude instructional camps.)
611620 003		Youth or adult sports instructional day camp
721214 006		Adult or family sporting or recreation overnight camp, including fishing and hunting camps and camps operated by membership organization
624120 001		Adult activity or day care center
713990 80A		Recreational sports club, program, or team for youth and adults
713940 906		Fitness or recreational sports center, membership or non-membership
813410 407		Fraternal or social membership organization
813410 404		Bar or restaurant operated by social or fraternal organization for members
722410 005		Drinking place, including tavern, bar, nightclub, etc. (Open to the public.)
777813 902		Restaurant serving the public - Describe type of service and food provided Describe
624410 00D		Childcare services including day care and after school care.
777813 027	0	Social assistance provider - Describe type of services (e.g., counseling, mentoring, day care) and primary clientele (e.g., general, children, elderly, the disabled)
		Describe
usiness and profe	essio	nal membership associations
813910 003		Business association - organized to promote the business interests of its members (Include trade associations, farm bureaus, chambers or commerce, boards of realtors, etc.)
813920 003		Professional membership organization - organized to advance the professional interests of their members and the profession as a whole (Include bar associations, accountants' associations, physicians' associations, sports players' associations, etc.)
abor, political, and	d reli	gious organizations
813930 001	0	Labor union or similar labor organization
813940 001	0	Political organization
813110 001		Religious organization for worship, religious training or study, or administration of an organized religion
ther membership	orga	nizations
813990 902		Sports governing body (Include professional leagues, collegiate sports conferences, athletic regulatory associations, etc.)
813410 402	0	Automobile enthusiast club



561599 801		Automobile club providing road and travel services
813410 403		Art council
561990 301	0	Economic/industrial development organization
777813 022		Other membership organization - Describe Describe
Grantmaking, givin	g, an	d advocacy
813211 004		Charitable trust or foundation - making grants but not directly providing services
777813 023		Grantmaking or giving organization not directly providing social services - Describe Describe
777813 024		Advocacy group - Describe cause or belief promoted Describe
Other principal bus	ines	s or activity
773000 00A		Other principal business or activity - Describe Describe



\$,000.00 of Sales, Shipments, Receipts, or Revenue reported in Item 5, what products and services were included? t ALL that apply.	
Membership services of performing arts societies and cultural institutions More	70016500
Civic and social organization membership services	70050230
3. Business and professional association membership services More	70171500
4. Other membership services More	7005024
a. Condominium and homeowners' association membership services More	7005024
b. Other membership services, except condominium and homeowners' associations, civic and social organizations, and business and professional associations	7005024
5. Trade, career, technical and professional development conventions, seminars, and training programs including testing, workshops, trade shows and special events More	7003950
6. Meals, snacks, other food items, and nonalcoholic beverages, prepared and served or dispensed for immediate consumption	7000025
7. Alcoholic beverages, prepared and served or dispensed for immediate consumption	70000500
8. Meals, snacks, other food items, and beverages prepared for catered events	70000600
Charitable gaming (Include net charitable gaming income.) More	70024500
10. Directories, professional and technical periodicals, and periodicals of general interest More	70145050
11. Advertising space, time and similar services More	70124250
12. Rental and leasing of nonresidential space in buildings or other facilities, except hosting of coin-operated self-service gambling machines More	70065750
13. Home, apartment, rooming house, and other residential space rental and leasing	70002750
14. Room or unit accommodation for travelers	70038250



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

Description	Value	Pro
Membership services of performing arts societies and cultural institutions More	\$,000.00	7001
Civic and social organization membership services	\$,000.00	7005
Business and professional association membership services	\$,000.00	7017
4. Other membership services More		
a. Condominium and homeowners' association membership services	\$,000.00	7005
b. Other membership services, except condominium and homeowners' associations, civic and social organizations, and business and professional associations	,000.00	7005
Subtotal	\$,000.00	7005
 Trade, career, technical and professional development conventions, seminars, and training programs including testing, workshops, trade shows and special events More 	,000.00	70039
Meals, snacks, other food items, and nonalcoholic beverages, prepared and served or dispensed for immediate consumption	,000.00	7000
7. Alcoholic beverages, prepared and served or dispensed for immediate consumption	\$,000.00	7000
8. Meals, snacks, other food items, and beverages prepared for catered events	\$,000.00	7000
Charitable gaming (Include net charitable gaming income.) More	\$,000.00	7002
10. Directories, professional and technical periodicals, and periodicals of general interest More	\$,000.00	7014
11. Advertising space, time and similar services More	,000.00	7012
 Rental and leasing of nonresidential space in buildings or other facilities, except hosting of coin-operated self-service gambling machines	\$,000.00	70068
13. Home, apartment, rooming house, and other residential space rental and leasing	,000.00	7000
14. Room or unit accommodation for travelers	\$,000.00	7003
15. 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	90000
b. All other products and services, not elsewhere classified - write-in #2		



c. All other products and services, r	oot elsewhere classified - write-in #3		
Pick one	Describe	\$,000.00	900000009
Add Additional Products			
TOTAL - Sum of lines should equal tota	Il Sales, Shipments, Receipts, or Revenue reported in Item 5	\$,000.00	9900000000



\$,000.00 of Sales, Shipments, Receipts, or Revenue reported in Item 5, what products and services were included?	
t ALL that apply. 1. Membership services of performing arts societies and cultural institutions More	
1. Membership services of performing arts societies and cultural institutions More	7001650
Civic and social organization membership services	7005023
3. Business and professional association membership services More	7017150
4. Other membership services	7005024
a. Condominium and homeowners' association membership services	7005024
 Other membership services, except condominium and homeowners' associations, civic and social organizations, and business and professional associations 	7005024
5. Trade, career, technical and professional development conventions, seminars, and training programs including testing, workshops, trade shows and special events More	7003950
6. Meals, snacks, other food items, and nonalcoholic beverages, prepared and served or dispensed for immediate consumption	7000025
7. Alcoholic beverages, prepared and served or dispensed for immediate consumption	7000050
8. Meals, snacks, other food items, and beverages prepared for catered events	7000060
Charitable gaming (Include net charitable gaming income.) More	7002450
10. Directories, professional and technical periodicals, and periodicals of general interest More	7014505
11. Advertising space, time and similar services	7012425
More	
12. Rental and leasing of nonresidential space in buildings or other facilities, except hosting of coin-operated self-service gambling machines More	7006575
13. Home, apartment, rooming house, and other residential space rental and leasing	7000275
14. Room or unit accommodation for travelers	7003825
16. Private contributions, gifts, and grants More	8000050
17. Government contributions, gifts, and grants More	8000025
18. Program service revenue More	8000200
19. Investment income including interest and dividends, trading securities, and commodity contracts on own account More	8000150
20. Gains (losses) from non-financial assets sold More	8000175
	5505170



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

\$,000.00 of Sales, Shipments, Receipts, or Revenue reported in Item 5, what was the value for each product Description	or service?	Prod
		Co
Membership services of performing arts societies and cultural institutions More	\$,000.00	700168
2. Civic and social organization membership services More	\$,000.00	700502
Business and professional association membership services	\$,000.00	701715
4. Other membership services		
a. Condominium and homeowners' association membership services More	,000.00	700502
b. Other membership services, except condominium and homeowners' associations, civic and social organizations, and business and professional associations	,000.00	700502
Subtotal	\$,000.00	700502
 Trade, career, technical and professional development conventions, seminars, and training programs including testing, workshops, trade shows and special events More 	\$,000.00	700398
6. Meals, snacks, other food items, and nonalcoholic beverages, prepared and served or dispensed for immediate consumption	\$,000.00	700002
7. Alcoholic beverages, prepared and served or dispensed for immediate consumption	,000.00	700005
8. Meals, snacks, other food items, and beverages prepared for catered events	\$,000.00	700006
Charitable gaming (Include net charitable gaming income.) More	\$,000.00	700245
10. Directories, professional and technical periodicals, and periodicals of general interest More	\$,000.00	701450
11. Advertising space, time and similar services More	\$,000.00	701242
 Rental and leasing of nonresidential space in buildings or other facilities, except hosting of coin-operated self-service gambling machines More 	\$,000.00	700657
13. Home, apartment, rooming house, and other residential space rental and leasing	,000.00	700027
14. Room or unit accommodation for travelers	,000.00	700382
15. 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	900000
b. All other products and services, not elsewhere classified - write-in #2		
	\$,000.00	900000



Pick one	Describe	\$,,	9000
Add Additional Produ	icts		
16. Private contributions, gifts	s, and grants More	\$,00	00.00
17. Government contribution	s, gifts, and grants More	\$,00	00.00
18. Program service revenue	More	\$,00	00.00
19. Investment income include account More	ling interest and dividends, trading securities, and commodity contr	acts on own \$,00	00.00 8000
20. Gains (losses) from non-	financial assets sold More	\$,00	00.00
21. All other nonoperating or	tax-exempt revenue		
a. All other nonoperating	or tax-exempt revenue - write-in #1		
Describe		\$,,	000.00 80002
b. All other nonoperating	or tax-exempt revenue - write-in #2		
Describe		\$,,	80002
	equal total Revenue reported in Item 5		



Item 26: Business Cooperative

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?

○ No



Item 28: Special Inquiries - Grants and Contributions

ITEM 28: SPECIAL INQUIRIES - GRANTS AND CONTRIBUTIONS

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

- Award grants
- Make gifts or contributions
- \bullet Make payments to, or on behalf of, specific individuals
- \bullet Pay assessments (dues) to the parent or other chapters of the same organization
- Transfer funds raised by this establishment to charities or other organizations for charitable purposes?
- Yes
- No



Item 28: Special Inquiries - Grants and Contributions - Continued

ITEM 28: SPECIAL INQUIRIES - GRANTS AND CONTRIBUTIONS

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



ITEM 28: SPECIAL INQUIRIES - SOCIAL ASSISTANCE

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

1. Government payers

2. Private payers

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



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.

