

Item 1B – NUMBER OF ESTABLISHMENTS**Number as of
December 31, 2006**

How many establishments, including departments and concessions, were covered by this report as of December 31, 2006? _____

110

Item 2A – TOTAL SALES► **NOTE:** Do not include cents. Always round to the nearest dollar.

1. What were the total sales and receipts of merchandise and other operating receipts for 2006?
INCLUDE e-commerce sales and excise taxes on gasoline, liquor, and tobacco. EXCLUDE all sales taxes.
See below for detailed directions. _____

2006
Dollars

100

\$

2. Did your firm collect any sales taxes during 2006?

120 1 ☐ YES – What were the total sales taxes collected?

EXCLUDE excise taxes reported in Item 2A1. _____

102

\$

2 ☐ NO – **Go to Item 2B**

103

3. What were the total sales of merchandise and other operating receipts including sales taxes for 2006?
(Sum of Items 2A1 and 2A2) _____

\$

INCLUDE

- Credit and cash sales of merchandise
- E-commerce sales
- Excise taxes
- Wholesale sales made by retail establishments covered by this report
- Receipts from rentals of public rooms such as ballrooms, conference rooms, etc.
- Sales of meals, alcoholic beverages, and other merchandise
- Receipts from valet, laundry, parking, and other guest services provided by this firm
- Sales by departments and concessions operated by your firm in establishment(s) of other firms

EXCLUDE

- Carrying or other credit charges
- Commissions (such as vending machine operators, government lottery tickets, or other stores)
- Non-operating receipts (such as interest income, income from investments, and receipts from the rental or sale of real estate)
- Sales made by departments and concessions operated by other firms in your firm's retail establishment(s)
- Refunds and allowances for returned goods
- Value of rebates and discounts offered by your firm that are granted to the purchaser, even if granted as an increase in trade-in allowance
- Exclude franchise fees and royalties

SPECIAL INSTRUCTIONS**Contract feeding**

If terms of contract are –

Include as sales –

- Management fee basis Management fees plus reimbursement for the cost of food, labor, and other operating expenses
- Profit-loss basis All sales to customers
- Cost-plus basis Sales to customers plus fees or supplements from clients

Item 2B – E-COMMERCE SALES

E-commerce sales and other operating receipts are sales of goods and services where an order is placed by the buyer; or price and terms of the sale are negotiated over an Internet, extranet, EDI network, electronic mail, or other online system. Payment may or may not be made online.

Did your firm have any e-commerce sales during 2006?

130 1 ☐ YES – What were the total e-commerce sales?

EXCLUDE all sales taxes. _____

2006

Dollars

113

\$

2 ☐ NO – **Go to Item 2C****Item 2C – SALES REPORT PERIOD**

Do the reported data in Items 2A and 2B represent the calendar year (January 1 through December 31) for 2006?

121 1 ☐ YES – **Go to Item 9**2 ☐ NO – **What were your beginning and ending dates for 2006?** _____**Beginning****Ending****2006**

Month	Day	Year
104		
105		

► **NOTE:** *Items 3 through 8 do not apply to this form.*

Item 9 – TOTAL OPERATING EXPENSES

2006
Dollars
844
\$

What were the total operating expenses during 2006 for establishments reported in Item 1B? →

INCLUDE

Expenses arising from the normal course of business.

EXCLUDE

- Bad debt
- Purchases of goods for resale or cost of goods sold
- Income taxes
- Sales and other taxes collected directly from customers and paid directly to a local, State, or Federal government agency
- Interest expenses
- Impairment (reduction in value of long-lived assets due to reappraisal)
- Capitalized expenses (except payroll and fringe benefits)
- Transfers made within the company

REMEMBER, YOU CAN FILL THIS REPORT OUT ONLINE BY GOING TO www.census.gov/econhelp/arts AND USING THE USERNAME AND PASSWORD ON PAGE 1 OF THIS FORM.

REMARKS

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CENSUS USE

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Item 10 – CERTIFICATION – This report is substantially accurate and has been prepared to the best of my ability in accordance with instructions.

Name of person to contact regarding this report (Please print) 950	Address — Number and street, city, State, ZIP Code 951	954 Telephone		
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		Area code	Number	
Signature of authorized person	Title 952	Date 953		