# **2006 Annual Services Report Service Annual Survey**

## **Theater Companies and Dinner Theaters**



**FORM** 

**SA-7111TE** 

140 SAS\_G

711110

**REPORT DUE** 

Any questions call **1–800–772–7851** M–F, 8:30 a.m. to 5:00 p.m. EST.

Please correct any error in the name, address, or ZIP Code.

## YOUR RESPONSE IS REQUIRED BY LAW

Title 13, U.S. Code, requires businesses and other organizations that receive this questionnaire to answer the questions and return the report to the Census Bureau.

## YOUR RESPONSE IS CONFIDENTIAL BY LAW

Title 13, U.S. Code, requires that your response may be seen only by persons sworn to uphold the confidentiality of Census Bureau information and may be used only for statistical purposes. The law also provides that copies retained in your files are **immune from legal process.** 

## YOUR RESPONSE IS IMPORTANT

The services industries account for nearly 70 percent of all economic activity. We conduct this survey to obtain timely, comprehensive and consistent measures needed by policy-makers, businesses, and the public to accurately assess domestic economic performance.

2006

## **Annual Services Report**

- This report should be completed and returned on or before the due date in the preaddressed envelope provided.
- If filing within the required time frame will cause an undue burden and you would like an extension, or if you have any questions, please write to:

U.S. CENSUS BUREAU 1201 East 10th Street Jeffersonville, IN 47132-0001

or call a Census Bureau Representative at 1-800-772-7851, weekdays from 8:30 a.m. to 5:00 p.m., eastern standard time.

## 1 Report Coverage

This report covers all domestic locations operated by your company and its subsidiaries primarily engaged in producing the following live theatrical presentations: musicals; operas; plays; and comedy, improvisational, mime, and puppet shows. This includes locations, commonly known as dinner theaters, engaged in producing live theatrical productions and in providing food and beverages for consumption on the premises. Theater groups or companies may or may not operate their own theater or other facility for staging their shows.

Does the above covera	age describe this firm's business activity?	
<sub>0001</sub> 1 Yes – <b>Go to 2</b>		
2 ☐ No – Specify the firm	's business activity and complete the report where applicable beginning with 🙎 .——	K
0002		

# 2 Report Periods

What periods of time will this data represent?

- Report data for the 2006 calendar year if possible.
- For locations that were sold or acquired during a year, only report for the periods that this firm operated the locations.

			Month	Day	Year
		0007			
0006 1	2006 calendar year – Go to 3	From			
2	P ☐ Other than calendar year – Enter the periods this report will cover				
	(e.g., fiscal years, periods with less than a full calendar	8000			
	year).	То			

3A Revenue				
Report the total revenue for this firm's locations defined in 1 for the followin	g categories.			
Enter "0" where applicable.				
Estimates are acceptable.  Exclude:				
Transfers made within the company.				
1. Admissions revenue (excluding admissions taxes) – Gross box office receipts	from	20	06 Revenue	
the sale of admissions tickets exclusive of any state or local admissions taxes (inc theater or facilities owners' share, if any). Include receipts from all home, hall or to	c <b>lude</b> our		Ail. Thou.	Dol.
subscriptions, and other concerts or performances for which paid attendance may	be 3002			
determined by ticket sales, including minimum guarantee and percentage arranger Dinner theaters should <b>include</b> all combined admission/dinner receipts on this line	nents. 9	5		
2. All other operating revenue - The sale of food, refreshments, and alcoholic bever	erages			
that are not included in the admissions price; contract fees from providing entertain revenue from royalties, licensing fees, and residual fees from literary works, musically	nment; al			
recordings, and compositions, filmed entertainment, or other cultural works; rental	fees 1799 T			
for the use of facilities. <b>Exclude</b> rental revenue and commissions from concession coin-operated machines operated by others, and sales and admissions taxes	<u>.</u>	\$		
	1800			
	9	\$		
3. TOTAL OPERATING REVENUE – Sum of lines 1–2	🖿			
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3B Tax Status			·	
3B Tax Status  Is this establishment operated on a not-for-profit basis?			·	
3B Tax Status  Is this establishment operated on a not-for-profit basis?  1 □ Yes - Complete lines 1-3			006 Revenue	
3B Tax Status  Is this establishment operated on a not-for-profit basis?	1741 [		<b>006 Revenue</b> Mil. Thou.	Dol.
Is this establishment operated on a not-for-profit basis?  1  Yes – Complete lines 1–3 2  No – Go to 5	1741	Bil. I		Dol.
3B Tax Status  Is this establishment operated on a not-for-profit basis?  1 □ Yes - Complete lines 1-3	1741			Dol.
Is this establishment operated on a not-for-profit basis?  1  Yes – Complete lines 1–3 2  No – Go to 5	1741	Bil. I		Dol.
Is this establishment operated on a not-for-profit basis?  1  Yes – Complete lines 1–3 2  No – Go to 5	1741 [	Bil. I		Dol.
Is this establishment operated on a not-for-profit basis?  1 Yes – Complete lines 1–3 2 No – Go to 5  1. Contributions, gifts, and grants received	1741	Bil.		Dol.
Is this establishment operated on a not-for-profit basis?  1 Yes - Complete lines 1-3 2 No - Go to 5  1. Contributions, gifts, and grants received  2. Investment and property income.	1741 <sub>[</sub> 	\$ \$		Dol.
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# Operating Expenses

Report operating expenses for this firm's locations as defined in 1 for the following categories.

- Enter "0" where applicable.Estimates are acceptable.

### **Exclude:**

- Transfers made within the company
- Capitalized expenses
- Interest
- Bad debt
- Impairment

Personnel Costs				ting Expe	
1. Gross annual payroll – Total annual Medicare salaries and wages for all employees as reported on your firm's IRS Form 941, Employer's Quarterly Federal Tax Return, line 5(c) for the four quarters that correspond to the survey period	1821	Bil.	Mil.	Thou.	Dol.
2. Employer's cost for fringe benefits – Employer's cost for legally required programs and programs not required by law. Include insurance premiums for hospital plans, medical plans, and single service plans (e.g., dental, vision, prescription drugs); premium equivalents for self-insured plans and fees paid to third-party administrators (TPAs); defined benefit pension plans; defined contribution plans (e.g., profit sharing, 401K and stock option plans); and other fringe benefits (e.g., Social Security, workers' compensation insurance, unemployment tax, state disability insurance programs, life insurance benefits, Medicare). Exclude employee contributions.	1822	\$			
3. Temporary staff and leased employee expense – Total costs paid to Professional Employer Organizations (PEOs) and staffing agencies for personnel. Include all charges for payroll, benefits, and services.		\$			
Expensed Materials, Parts and Supplies (not for resale)					
<b>4. Expensed equipment</b> – Expensed computer hardware and other equipment (e.g., copiers, fax machines, telephones, shop and lab equipment, CPUs and monitors). Report packaged software in line <b>6.</b> Report leased and rented equipment in line <b>8.</b>	1824	\$			
5. Expensed purchases of other materials, parts, and supplies – Materials and supplies used in providing services to others; materials and parts used in repairs; office and janitorial supplies; small tools; containers and other packaging materials; and motor fuels	1825	\$			
Expensed Purchased Services					
6. Expensed purchases of software – Purchases of prepackaged, custom coded, or vendor customized software. Include software developed or customized by others, web-design services and purchases, licensing agreements, upgrades of software; and maintenance fees related to software upgrades and alterations.	1826	\$			
7. Purchased electricity and fuels (except motor fuels) – If the cost of electricity and heating fuels (e.g., natural gas, propane, oil, coal) are included in lease or rental payments, report in line 8	1827	\$			
8. Lease and rental payments – For land, buildings, offices, structures, machinery, equipment, and other tangible items. Include lease and rental of transportation equipment without operators; and penalties incurred for broken leases. Exclude capital and financing lease agreements and licensing/leasing of software.	1828	\$			

5	Operating	Expenses -	(Continued)
	Operating	Experience (	(Continuca)

Report operating expenses for this firm's locations as defined in 1 for the following categories.

- Enter "0" where applicable.Estimates are acceptable.

### Exclude:

- Transfers made within the companyCapitalized expenses
- Interest
- Bad debt
- Impairment
- Income tax

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9.	Purchased repair and maintenance – Include expensed repair and maintenance to		2006	6 Operati	ng Expe	nses
	buildings and integral building components (e.g., elevators, heating and cooling systems),		Bil.	Mil.	Thou.	Dol.
	structures, offices, machinery, vehicles, equipment, and computer hardware. <b>Exclude</b> materials, parts, and supplies used for repair and maintenance performed by this firm's	1829				
	employees. Report janitorial and grounds maintenance services in line 13		\$			
	grounds maintenance of the maintenance of the second of th					
		1830				
10.	Purchased advertising and promotional services – Include marketing and public relations services.		\$			
<b></b>						
Otr	ner Operating Expenses					
11.	Depreciation and amortization charges – Include depreciation charges taken against					
	tangible assets owned and used by your firm, tangible assets and improvements owned by	1831				
	your firm within leaseholds, tangible assets obtained through capital lease agreements, and amortization charges against intangible assets (e.g., patents, copyrights). <b>Exclude</b> impairment.		\$			
	amortization charged against mangiole accord (e.g., paterno, copyrighte). Excitate impairment.					
12.	Governmental taxes and license fees – Payments to government agencies for taxes and	1832				
	licenses. Include business and property taxes. Exclude income taxes, and sales and excise		φ			
	taxes collected from customers		\$			
10	All other exercises expenses. Depart all other exercises expenses not reported above	1899		1	1 1	
13.	All other operating expenses – Report all other operating expenses not reported above, unless specifically excluded in the general instructions at the top of the page. <b>Exclude</b>	1033				
	purchases of merchandise for resale and non-operating expenses		\$			
		1900				
14.	TOTAL OPERATING EXPENSES – Sum of lines 1–13		\$			

# Interest Expense

Report interest expense for all this firm's locations as defined in 1 for the following category.

- Enter "0" where applicable.Estimates are acceptable.

### **Exclude:**

- Transfers made within the companyCapitalized interest

	200	o inter	cot Exper	130	
	Bil.	Mil.	Thou.	Dol.	
1856	\$				

E-Commerce Revenue  E-commerce includes sales and receipts from any transaction completed over an Internet, extranet, EDI network, electronic mail or other online system. Transactions are agreements between buyers and sellers to transfer owners of, or rights to use, goods or services. Payment for these goods and services may or may not be made onlines of or rights to use, goods or services. Payment for these goods and services may or may not be made onlines.  Did the revenue reported in it include any e-commerce revenue?  1	Thou. D	Mil.	Bil.	
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1 □ Yes – What was this firm's revenue from exports?	Thou.			0400 =
2 No – Go to 🔟			\$	L

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1 V	Yes – Enter the new EIN	0015	FIN -
<u> </u>	No – Continue		
Wa	s there a change in ownership	or control?	Month Year
1 🗆 V	/as - Provide the date of the ch	ange and the	e firm's information
· ·	(for multiple mergers, providence of the critical state of the cri	de each firm's	information as an attachment to this report)
2 🗆 N	No – <b>Go to <u>12</u></b>	0017	Name of company acquired or merged with
	_		
			Street address
			City, State, ZIP Code
			Oily, State, Zir Goue
		(	0019
			EIN
,	Specify the nature of this change h	ere ———	
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Silver Hill Road, Stop 1500, Washington, DC 20233-1500. You may e-mail comments to Paperwork@census.gov; use "Paperwork Project 0607-0422" as the subject. Please include form name and number in all correspondence. Respondents are not required to respond to any information collection unless it displays a valid approval number from the Office of Management and Budget. This 8-digit number appears in the top right corner on the front of this form.

or fax to: 1-800-447-4613

To see aggregate industry results of previous Service Annual Surveys, go to the following website: www.census.gov/econ/www/servmenu.html

## 2006 Annual Services Report

U.S. DEPARTMENT OF COMMERCE Economics and Statistics Administration U.S. CENSUS BUREAU

## **General Instructions**

- · Report data on an accrual basis, except for payroll.
- Dollars should be rounded to the nearest dollar.

If a figure is \$1,030,280,456 it should be reported as → 1

## Item Specific Instructions - All Firms

Item 3 - Operating Revenue

#### Include:

- Report gross billings, except where noted elsewhere on the form.
- Dues and assessments from members and affiliates.

### Exclude from operating revenue:

Taxes collected directly from customers or clients and paid directly to a local, state, or federal tax agency.

## **Instructions for Taxable Firms**

Item 3 - Operating Revenue

#### Include:

- Amounts received for work subcontracted to others.
- For locations that were sold or acquired during a year, only report for the periods that this firm operated the locations.
- Revenue from services performed by domestic locations of foreign parent firms, subsidiaries, branches, etc.

### **Exclude:**

- Rents from and revenue of separately operated departments, concessions, etc., which are leased to others.
- Commissions from vending machine operators.
- Revenue of foreign subsidiaries (those located outside the U.S., i.e., outside the 50 states, District of Columbia, U.S. Commonwealth Territories, or U.S. Possessions).

## **Instructions for Tax-Exempt Firms**

Item 3 - Operating Revenue

### Include:

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Dol.

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- Program service revenue for services provided in 2006, whether or not payment was received in 2006.
- Gross sales of merchandise minus returns and allowances.
- Income from interest, dividends, gross rents (including display space rentals and share of receipts from departments operated by other companies), royalties, and other investments.
- Gross contributions, gifts, and grants (whether or not restricted for use in operations).
- Commissions earned from the sale of merchandise owned by others (including commissions from vending machine operators).
- Gross receipts from fundraising activities.

#### Exclude:

- Gross receipts of departments or concessions operated by other companies
- Amounts transferred to operating funds from capital or reserve funds.

# **Item Specific Instructions – All Firms**

Item 5 - Operating Expenses

### Line 1 - Gross annual payroll

**Include** salaries and wages, commissions, dismissal pay, bonuses, employee contributions to Social Security, income tax withholding, union dues, group insurance premiums, savings bonds, cash equivalent in-kind, allowances, holiday pay, vacation pay, sick leave, stock purchase plans, and employee contributions to pension plans. **Exclude** the cost of leased employees, employer's cost for fringe benefits, temporary staff obtained from temporary help services. For unincorporated businesses, **exclude** profit or other compensation of proprietors or partners.

#### All other operating expenses

**Include** travel and entertainment; postage, shipping or delivery services, warehousing, and storage services; royalties; security services; janitorial and grounds maintenance services; purchased transportation with operators; and other expenses not reported elsewhere.