



# 2014 ANNUAL ACCOMMODATION REPORT HOTELS & CASINO HOTELS

## DUE DATE

## WORKSHEET

### Need help or have questions?

Call 1-877-787-9860 (option 2)  
(8:00 a.m. - 5:00 p.m. ET, M-F)  
or Visit

<https://econhelp.census.gov/arts>

**YOUR RESPONSE IS REQUIRED BY LAW.** Title 13, United States Code, requires businesses and other organizations that receive this questionnaire to answer the questions and return the report to the U.S. Census Bureau. By the same law, **YOUR CENSUS REPORT IS CONFIDENTIAL.** It may be seen only by persons sworn to uphold the confidentiality of Census Bureau information and may be used only for statistical purposes. Under the same law, information that you report cannot be used for taxation, regulation, or investigation and are exempt from release under the Freedom of Information Act. Further, copies of your response retained in your files are immune from legal process.

DO NOT use this worksheet to respond to the survey, it is intended to assist you with gathering and preparing your data prior to reporting online.

Please view the online report for specific instructions that may apply to your EIN or firm.

Return to <https://econhelp.census.gov/arts> when you are ready to report online.

## GENERAL INSTRUCTIONS

- Any significant change in this Employer Identification Number's (EIN's) operations should be noted in 14.
- For establishments sold or acquired in 2014, report data only for the period the establishments were operated by this EIN.
- Estimates are acceptable if book figures are not available.
- Enter "0" where applicable.

### INCLUDE

- All accommodation establishments located in the U.S. (including the District of Columbia) reporting payroll on its latest Employer's Federal Tax Return (Treasury Form 941 or 944), **under the EIN shown in 1.**
- Data for auxiliary facilities primarily engaged in supporting services to this EIN's establishment(s) such as warehouses, garages, central administrative offices, and repair services.

### EXCLUDE

- Data for franchised establishments not owned or managed by this EIN.
- Departments and concessions operated by other firms in this EIN's establishment(s).
- Data for establishments located in U.S. Territories (such as Puerto Rico, American Samoa, Guam, U.S. Virgin Islands and Northern Mariana Islands).

## ANNOUNCEMENTS AND SPECIAL INSTRUCTIONS

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**1 FEDERAL EMPLOYER IDENTIFICATION NUMBER (EIN)**

**Does this firm report payroll under EIN**

- Yes
- No - Enter current 9-digit EIN **AND** date payroll was first reported for this EIN . . . . .

EIN (9 digits)		
-		
Month	Day	Year

**2 ORGANIZATIONAL CHANGE**

**A. Did this EIN experience any acquisitions, sales, mergers, and/or divestitures in 2014?**

- Yes
- No - Go to **3**

**B. Which of the following organizational changes occurred in 2014?**

Check all that apply. If more than one organizational change occurred during the reporting period, explain in **14**.

- Acquisition
- Sale
- Merger
- Divestiture

Date of organizational change . . . . .

AND

Enter detailed information below ↴

Month	Day	Year

Name of company	EIN (9 digits)	
	-	
Address (Number and street, P.O. Box, etc.)		
City	State	ZIP Code
		-

**3 REPORTING PERIOD**

NOTE: Calendar-year data are preferred. If this is not available, please report for the fiscal year that includes **at least six months** of data for the 2014 calendar year.

**What time period is covered by the data provided in this report?**

- Calendar year
- Fiscal or partial year - Report beginning and ending dates. . . . .

2014		
Beginning Date		
Month	Day	Year
Ending Date		
Month	Day	Year

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**4 NUMBER OF ESTABLISHMENTS**

2014
Number

**How many establishments (hotels) did this EIN have in the following categories in 2014?**

- A. Owned or leased by THIS EIN and managed by THIS EIN . . . . .
- B. Owned or leased by THIS EIN, but managed by ANOTHER EIN . . . . .

**1. What was the name and EIN of the management company for the hotels reported in 4B?**

If more than one management company, continue in 12 or on a separate paper.

Name of Company	EIN (9 digits)
	-

**5 SALES, RECEIPTS, OR REVENUE**

**INCLUDE**

- Receipts from guest rooms or unit rentals for all establishments owned by this EIN
- Receipts from rentals of public rooms such as ballrooms, conference rooms, etc.
- Sales of meals, alcoholic beverages, and other merchandise
- Gaming operations
- Site rental and equipment usage fees
- Receipts from valet, laundry, parking, and other guest services provided by this EIN
- For casino hotels, report sales net of promotional allowances
- Credit and cash net sales of merchandise
- Franchise or royalty fees
- Management fees
- Cost reimbursables from managed hotels

**EXCLUDE**

- Revenue from casinos without accommodations
- Revenue from timeshares or vacation ownership
- Occupancy taxes
- Sales from auxiliary establishments
- Carrying or other finance 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 this EIN's accommodation establishment(s)

**DEDUCT**

- The actual value of rebates and discounts granted to the purchaser, even if granted as an increase in trade-in allowances

**A. What was this EIN's total revenue in 2014?** . . . . .

**B. How much of the revenue reported in 5A was received from the following categories?**

*Sum of 5B1 through 5B5 should equal 5A.*

- 1. Hotels that this EIN owns or leases (include room revenue, meals, beverages, gaming, retail, guest services, etc.) . . . . .
- 2. Franchise or royalty fees . . . . .
- 3. Hotel management fees . . . . .
- 4. Cost reimbursables from managed hotels . . . . .

5. Other - *Specify* ↴

	<input type="checkbox"/>
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**C. Did this EIN collect any sales taxes in 2014?**

- Yes
- No - Go to 6

**D. What were the total sales taxes collected in 2014?**

*Exclude excise and occupancy taxes.* . . . . .

Mark "X" if None

2014			
\$ Bil.	Mil.	Thou.	Dol.

2014			
\$ Bil.	Mil.	Thou.	Dol.

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**6 E-COMMERCE**

*E-commerce is the sale of goods and services where the buyer places an order, or the price and terms of the sale are negotiated, over an Internet, mobile device (M-Commerce), extranet, EDI network, electronic mail, or other comparable online system. Payment may or may not be made online.*

**A. Did this EIN have any e-commerce revenue (including rooms booked online) in 2014?**

- Yes
- No - Go to **12**

2014			
\$ Bil.	Mil.	Thou.	Dol.

**B. What was the total e-commerce revenue in 2014?**

*Include rooms booked online. . . . .*

**7-11 Not Applicable.**

**12 OPERATING EXPENSES**

**INCLUDE**

- Expenses arising from the normal course of business
- Payroll
- Depreciation and amortization

**EXCLUDE**

- Bad debt
- Purchases of goods, including food, for resale or cost of goods sold
- Income taxes
- 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

Mark "X" if None

**What were the total operating expenses for this EIN in 2014?**

If operating expenses are greater than sales, explain in **14**. . . . .

2014			
\$ Bil.	Mil.	Thou.	Dol.

**13 HOTEL MANAGEMENT**

*A hotel management company is a firm that both manages and provides the operating staff for short-stay accommodation establishments (e.g., hotels and motels) on a contractual basis.*

**A. Did this EIN manage any hotels for another firm (a third party) in 2014?**

- Yes
- No - Go to **14**

**B. How many of the hotels managed by this EIN were owned or leased by ANOTHER firm (a third party) in 2014? . . . . .**

2014 Number

**C. What was the total value of the following for the hotels reported in **13B** in 2014?**

1. Revenue  
*Refer to includes and excludes in **5**. . . . .*
2. Sales taxes  
*Exclude excise and occupancy taxes. . . . .*
3. E-Commerce  
*Include rooms booked online. Refer to the definition in **6**. . . . .*
4. Operating expenses  
*Refer to includes and excludes in **12**. . . . .*

2014			
\$ Bil.	Mil.	Thou.	Dol.

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**14 REMARKS** - Please use this space to explain any significant year-to-year changes, to clarify responses, or indicate where data were estimated.

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**15 CONTACT INFORMATION**

Name of person to contact regarding this report <i>(Please print)</i>					Title			
Telephone	Area code	Number		Extension	Fax	Area code	Number	
		-					-	
E-mail address					Website address			
					www.			

**Report Online - Do Not Return**

**THANK YOU**  
**for completing your 2014 ANNUAL ACCOMMODATION REPORT.**  
 We suggest you keep a copy for your records.

Public reporting burden for this collection of information is estimated to average 17 minutes per response, including the time for assembling data from existing records and completing the form. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Paperwork Project 0607-0013, U.S. Census Bureau, 4600 Silver Hill Road, PCO-8H028, Washington, DC 20233. You may e-mail comments to [Paperwork@census.gov](mailto:Paperwork@census.gov); use "Paperwork Project 0607-0013" as the subject. Respondents are not required to respond to any information collection unless it displays a valid approval number from the Office of Management and Budget (OMB). This 8-digit number appears in the top right corner of the form.