

SERVICE ANNUAL SURVEY U.S. DEPARTMENT OF COMMERCE Economics and Statistics Administration U.S. CENSUS BUREAU Worksheet

(DRAFT)

SA-51710A

Due Date

Need help or have questions?

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

or Visit

https://econhelp.census.gov/sas

OMB No. 0607-0422: Approval Expires 12/31/2018

2015 ANNUAL SERVICES REPORT

WORKSHEET

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/sas when you are ready to report online.

YOUR RESPONSE IS REQUIRED **BY LAW.** Title 13, United States Code, Sections 131 and 182 authorizes this collection. Sections 224 and 225 requires businesses and other organizations that receive this questionnaire to answer the questions and return the report to the U.S. Census Bureau. By Section 9 of 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.

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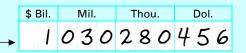
- Any significant change in this firm's operations should be noted in 10.
- For establishments sold or acquired in 2015, report data only for the period the establishments were operated by this firm.
- Estimates are acceptable if book figures are not available.
- Enter "0" where applicable.
- Do not combine data for two or more detailed lines.
- 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 Include:

- warehouses,

Const • Data f	ructi or a	Il Services establishments (excluding data for Retail, Wholesale, Manufacturing, Mining, and ion operations) as defined by the survey coverage in ① B. uxiliary facilities primarily engaged in supporting services to those establishment(s) such as central administrative offices, and repair services.
		G ADDRESS
is th	IS III	rm's name and mailing address the same as shown in the mailing address above?
0035		Yes
		No - Enter corrections in the mailing address above

(1



 Yes No - Go to No be the following organizational changes occurred in 2015? Check all that apply. If more than one organizational change occurred during the reporting period, explain in ①. 	Did this firm provide the business activities described below?
oct Yes No - Specify this firm's business activity 7 occc Not Applicable. ORGANIZATIONAL CHANGE A. Did this firm experience any acquisitions, sales, mergers, and/or divestitures in 2015? ord Yes No - Go to O B. Which of the following organizational changes occurred in 2015? Check all that apply. If more than one organizational change occurred during the reporting period, explain in O. Acquisition Sale Alto Bate of organizational change	Ves No - Specify this firm's business activity 7 0002 t Applicable. EXAMPLEATIONAL CHANGE Did this firm experience any acquisitions, sales, mergers, and/or divestitures in 2015? 016 I ves No - Go to Which of the following organizational changes occurred in 2015? Check all that apply. If more than one organizational change occurred during the reporting period, explain in O .
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Acquisition Sale Merger Divestiture 0017 Name of company 0017 Name of company 0018 EIN (9 digits) Address (Number and street, P.O. Box, etc.) City, town, village, etc.	Month Day Year
Acquisition Sale Merger Divestiture 0017 Name of company 0017 Name of company 0017 Name of company 0017 Name of company 017 Name of company 018 ElN (9 digits) City, town, village, etc. State ZIP Code	Month Day Year
0091 Sale 0091 Merger Divestiture Enter detailed information below 7 0017 Name of company 0017 Name of company 0017 Name of company 017 Name of company 018 EIN (9 digits) Address (Number and street, P.O. Box, etc.) City, town, village, etc. State ZIP Code	
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Address (Number and street, P.O. Box, etc.) City, town, village, etc. State ZIP Code	0017 Name of company 0019 EIN (9 digits)
City, town, village, etc. State ZIP Code	
	Address (Number and street, P.O. Box, etc.)
	City, town, village, etc. State ZIP Code

4	REP	OR	TING PERIOD			
	NOT year	E: C	alendar year data are preferred. If it is not available, please report for the fiscal t includes at least six months of data for the 2015 calendar year.			
	Wha	nt ti	me period is covered by the data provided in this report?		20	15
				В	eginni	ng Date
			Calendar year	Month	Day	Year
	0006					
			Fiscal or partial year - Report beginning and ending dates		1	
					Ending	g Date
				Month	Day	Year
			0008		1	
	NLat	A	P E.I.			
5	Not	Арр	licable.			
6	SAL	ES,	RECEIPTS, OR REVENUE			

What were the revenues for this firm in 2015?

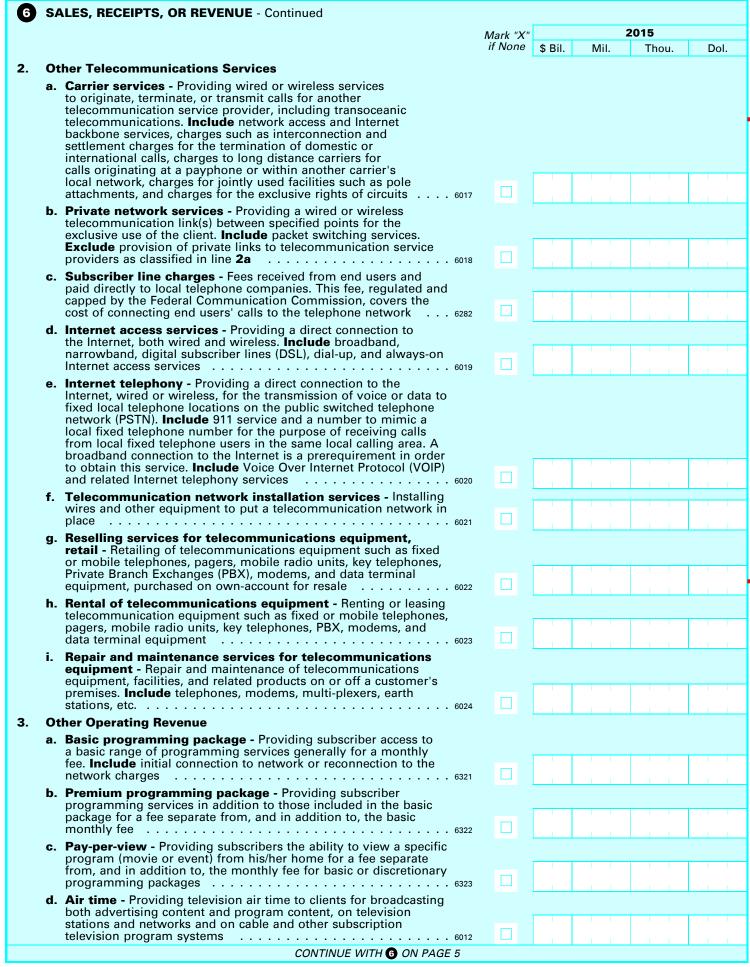
Include:

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

Exclude:

- Transfers made within the company.
- Taxes collected directly from customers or clients and paid directly to a local, state, or federal tax agency.
- 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).

							Re
		Mark "X"			σ		
		if None	\$ Bil.	Mil.	Thou.	Dol.	0
1.	Fixed Services						7
	a. Fixed local telephony - Providing access to the public switched telephone network (PSTN) for the transmission and switching of voice, data, and video within and between local calling areas, where the call is made from a fixed location. Include basic service connection fees; revenue from extended areas; local private lines; public telephone services provided with the basic						Online
	service area; and fixed local calling features such as directory assistance, caller identification, call forwarding, and call waiting . 6015						Ф I
	b. Fixed long-distance telephony - Providing outbound or inbound calls made from a fixed customer location where the call is paid for by the caller or the recipient and the call transmits beyond the basic service area. Include international call originating in the United States, any charges for operator assistance or special billings directly related to these calls 6016						Do Not
	c. Fixed all distance telephony (no distinction between local or long distance) - Transmission and switching of voice, data, and video over the public switched telephone network (PSTN), where the call is made from a fixed customer location and where the charges are not distance sensitive						t Retu
	CONTINUE WITH G ON PAGE 4						3



SALES, RECEIPTS, OR REVENUE - Continued						
		Mark "X"			2015	
		if None	\$ Bil.	Mil.	Thou.	Dol.
Other Operating Revenue - Continued						
e. Rental and reselling services for program di	etribution					
equipment - Renting and retailing equipment ne						
receive programming packages via a program di	stribution		'			
network						
f. Installation services for connections to proc						
distribution networks - Installing cable on the premises and/or installing outlets to connect to t	customer					
distribution network						
g. Website hosting services - Providing the infras						
customer's website and related files						
h. All other operating revenue - Revenue not rep	ported in lines					
1a through 3g. If this item is greater than 2	0% of the					
total operating revenue, specify the primary	y source of the					
revenue below 7						
	1799					
TOTAL OPERATING REVENUE	1735	_				
Sum of lines 1a through 3h	1900					
Not Applicable.						
E-COMMERCE						
E-commerce is the sale of goods and services where are negotiated, over an Internet, mobile device (M-C	e the buyer places an or	der, or tl	ne price	and terr	ns of the s	ale
comparable online system. Payment may or may no	ot be made online.	netwon	, electr		, or other	
A. Did this firm have any e-commerce revenue	in 2015?					
Voc						
0011 Yes						
0011						
0011					2015	
0011			\$ Bil.	Mil.	2015 Thou.	Dol.
0011	20152	0000	\$ Bil.			Dol.
0011	2015?	2000	\$ Bil.			Dol.
 0011 No - Go to ① B. What was the total e-commerce revenue in 2 	2015?	2000	\$ Bil.			Dol.
 No - Go to ① B. What was the total e-commerce revenue in 2 	2015?	2000	\$ Bil.			Dol.
 No - Go to ① B. What was the total e-commerce revenue in 2 	2015?	2000	\$ Bil.			Dol.
 No - Go to ① B. What was the total e-commerce revenue in 2 	2015?	2000	\$ Bil.			Dol.
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 No - Go to ① B. What was the total e-commerce revenue in 2 	2015?	2000	\$ Bil.			Dol.
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 No - Go to ① B. What was the total e-commerce revenue in 2 	2015?	2000	\$ Bil.			Dol.
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 0011 No - Go to ① B. What was the total e-commerce revenue in 2 	2015?	2000	\$ Bil.			Dol.
0011 No - <i>Go to</i> 1	2015?	2000	\$ Bil.			Dol.
 0011 No - Go to ① B. What was the total e-commerce revenue in 2 	2015?	2000	\$ Bil.			Dol.
0011 No - <i>Go to</i> ① B. What was the total e-commerce revenue in 2	2015?	2000	\$ Bil.			Dol.
0011 No - <i>Go to</i> ① B. What was the total e-commerce revenue in 2	2015?	2000	\$ Bil.			Dol.

SA-51710A	(DRAFT)
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	SA-51710A (draft)			Page	6
1	CLASS OF CUSTOMER				
Ū	Total Revenue				
	A. What percentage of sales, receipts, or revenue reported in 6 was received from the		20'		_
	following classes of customers in 2015?	<u> </u>	Perc		_
	1. Household consumers and individual users			%	δ 🞵
	2. Business firms, not-for-profit organizations, and Government (Federal, state, and			%	
	local)				
		1	0	0 %	6
	Final Local Talasham				0
	Fixed Local Telephony		20 ⁻	15	Š
	B. What percentage of fixed local telephony revenue reported in G, line 1a, was received from the following categories?		Perc		=
	1 Household concurrence and individual wave			%	6
	 Household consumers and individual users Business firms, not-for-profit organizations, and Government (Federal, state, and 	\vdash		-	-
				%	⁶ 🛡
		1	0	0%	6
		-		•	Z
	Fixed Long-distance Telephony				P
	C. What percentage of fixed long-distance telephony revenue reported in G , line 1b, was	<u> </u>	20 ' Perc	-	
	received from the following categories?		Perc	-	%
	1. Household consumers and individual users		<u> </u>	%	° 🔁
	2. Business firms, not-for-profit organizations, and Government (Federal, state, and local)			%	6 📑
	iocaly			•	_
		Ι	0	0 %	6
	Subscriber Line Charges				
	D. What percentage of subscriber line charges revenue reported in 6 , line 2c, was received		20 ⁻	15	
	from the following categories?		Perc	ent	
	1. Household consumers and individual users			%	6
	2. Business firms, not-for-profit organizations, and Government (Federal, state, and			%	, ,
	local)		⊢ →	7	
		Τ	0	0 %	6 ŏ
					2

14 OPERATING EXPENSES

What were the operating expenses for this firm in 2015?

Exclude:

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

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, and 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.

Mark "X" if None

1841

\$ Bil.

1. Personnel Costs

- a. Gross annual payroll Total annual Medicare salaries and wages for all employees as reported on this firm's IRS Form 941, Employer's Quarterly Federal Tax Return, line 5(c) for the four quarters that correspond to the survey period or IRS Form 944 Employer's Annual Federal Tax Return, line 4(c). Include the spread on stock options that are taxable to employees as wages . 1821
- **b.** Employer's cost for fringe benefits Employer's cost for legally required programs and programs not required by law:
 - Health insurance Insurance premiums for hospital plans, medical plans, and single service plans (e.g., dental, vision, prescription drugs). Include premium equivalents for selfinsured plans and fees paid to third-party administrators (TPAs). Exclude employee contributions

2. Pension plans:

- a. Defined benefit pension plans Costs for both qualified and unqualified defined pension plans. Pension plans that specify the benefit to be paid to employees upon retirement, generally either a specific amount or a percentage of compensation. Employer contributions are based on actuarial computations that include the employee's compensation and years of service and are not allocated to specific accounts maintained for employees . . 1842
- b. Defined contribution plans Costs under defined contribution plans. Pension plans that define the employer contributions to a separate account provided for each employee. The employee "benefit" at retirement depends on the amount contributed and the results of the account's activity. Examples include profit sharing plans, money purchase (e.g., 401k, 403b) and stock bonus plans (e.g., ESOPs)

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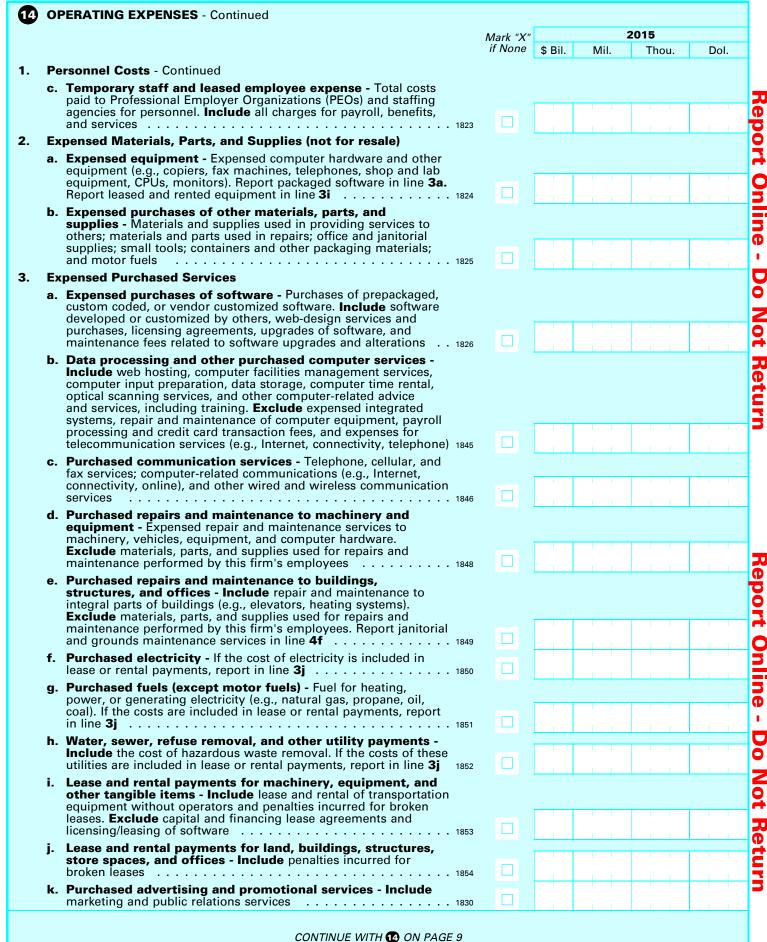
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REMARKS - Please use this space to explain any significant year-to-year changes, to clarify responses, or indicate where data were estimated.

18	CONTACT IN	IFORMATI	ON								
	Name of person to contact regarding this report (<i>Please print</i>) Title										
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information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: ECON Survey Comments 0607-0422, U.S. Census Bureau, 4600 Silver Hill Road, Room EMD-8K122, Washington, DC 20233. You may e-mail comments to ECON.Survey.Comments@census.gov . Be sure to use ECON Survey Comments 0607-0422 as the subject. You are not required to respond to this collection of information if it does not display a valid approval number from the Office of Management and Budget (OMB). The eight-digit OMB number is 0607-0422 and appears in the upper right corner of the electronic instrument screen.