



2005 Survey of Service Industries: Motion Picture Theatres

If necessary, please correct pre-printed information below.



0001	Legal name		0004	Address (number and street)	
0002	Business name		0005	City	
0021	Title of contact		0006	Province/ Territory or State	
0008	First name of contact		0053	Country	0007 Postal code/ Zip code
0028	Last name of contact		0010	Language preference	1 <input type="checkbox"/> English 2 <input type="checkbox"/> French

This information is collected under the authority of the *Statistics Act, Revised Statutes of Canada, 1985, Chapter S19.*

COMPLETION OF THIS QUESTIONNAIRE IS A LEGAL REQUIREMENT UNDER THIS ACT.

A - Introduction

Survey Purpose

This survey collects the financial and operating data needed to develop national and regional economic policies and programs.

Data-sharing Agreements

In an effort to reduce reporting burden, Statistics Canada has entered into agreements with provincial and territorial statistical agencies for the sharing of data. The data are kept confidential and used for statistical purposes only. Please see the enclosed reporting guide for details of these agreements.

Confidentiality

The *Statistics Act* protects the confidentiality of information collected by Statistics Canada. Please see the enclosed reporting guide for more information.

Fax or Other Electronic Transmission Disclosure

Statistics Canada advises you that there could be a risk of disclosure during the facsimile or other electronic transmission. However, upon receipt, Statistics Canada will provide the guaranteed level of protection afforded all information collected under the authority of the *Statistics Act*.

Reporting Instructions

- Report for **all** operation(s) and/or location(s) pre-printed in the above address area. If it is not possible to report for the above business unit(s), please explain the reason(s) in the **Comments** section at the end of the questionnaire.
- When precise values are not available from your records, estimates are acceptable.
- For further information about this survey and definitions, please consult the enclosed reporting guide.

Please return the questionnaire within 30 days.

**Please mail the completed questionnaire in the enclosed envelope
or fax it to Statistics Canada at 1 888 883-7999.**

Lost the return envelope or need help? Call us at **1 888 881-3666** or mail to:
Statistics Canada, Operations and Integration Division, 120 Parkdale Avenue, Ottawa, Ontario K1A 0T6



B - Main Business Activity

1. Please describe the nature of your business.

0055

2. Please check the **one main activity** which most accurately represents your **principal** source of revenue.

0472 Motion picture theatre, indoor

0473 Motion picture theatre, drive-in

0474 Film festival, with or without facilities

0040 None of the above

If you checked, "None of the above", please call **1 888 881-3666** for further instructions.

C - Reporting Period Information

1. Please report information for your **fiscal year** (normal business year) ending between April 1, 2005 and March 31, 2006. Please indicate below the period covered by this questionnaire.

	YYYY	MM	DD		YYYY	MM	DD	
From	0011	<input type="text"/>	<input type="text"/>	<input type="text"/>	To	0012	<input type="text"/>	<input type="text"/>

2. If you **did not operate** this business unit for a **full year**, please check the reason(s) below:

0031 1 Seasonal operations 2 New business 3 Change of fiscal year 4 Change of ownership 5 Ceased operations 6 Temporarily inactive

**Please complete only the questions that are applicable to your business.
When precise values are not available from your records, estimates are acceptable.**

D - Revenue

		CAN\$
1. Sales (a detailed sales breakdown will be requested in Section F)	2299	
2. Grants and subsidies	2068	
3. Royalties, rights, licensing and franchise fees	2022	
4. Investment income (dividends and interest)	2097	
5. Other revenue (please specify): ²⁰⁰¹	2077	
6. Total revenue (sum of questions 1 to 5)	2098	

E - Expenses

		CAN\$
1.	Salaries and wages of employees who have been issued a T4 statement	3010
2.	Employer portion of employee benefits (include employer contributions to pension, medical/life insurance plans, employment insurance, etc.)	3040
3.	Commissions paid to non-employees	4466
4.	Professional and business service fees (e.g., legal, accounting)	4315
5.	Outsourcing (include work contracted out, freelancers, payments to personnel suppliers, etc.)	3060
6.	Payments for services provided by your head office	4555
7.	Cost of goods sold – if applicable (purchases plus opening inventory minus closing inventory)	5721
8.	Office supplies	3301
9.	Rental and leasing (include rental of premises, equipment, motor vehicles, etc.)	4115
10.	Repair and maintenance (include janitorial services, equipment, motor vehicles, etc.)	4178
11.	Insurance (include professional liability, motor vehicles, etc.)	4350
12.	Advertising, marketing and promotions (report charitable donations at question 22)	4365
13.	Travel, meals and entertainment	4370
14.	Utilities (include gas, heating, hydro, water)	4066
15.	Telephone and other telecommunication expenses	4101
16.	Property and business taxes, licences and permits	4410
17.	Royalties, rights, licensing and franchise fees	4440
18.	Delivery, warehousing, postage and courier	4179
19.	Financial services fees (e.g., bank and credit card charges)	4325
20.	Interest expenses	4630
21.	Amortization of tangible and intangible assets	4520
22.	Charitable donations	4521
23.	Bad debts	4542
24.	All other expenses ⁴⁵³¹ (please specify):	4569
25.	Total expenses (sum of questions 1 to 24)	4699
26.	Corporate taxes (if applicable)	4600
27.	Gains (losses) and other items (include write-offs, foreign exchange, share of partnership income, etc.)	4601
28.	Net profit/loss after tax and other items	2304

F - Industry Characteristics - Motion Picture Theatres

Please provide a breakdown of your sales.

		CAN\$
1.	Admission receipts for exhibition of Canadian films (please see definition in reporting guide)	2560
2.	Admission receipts for exhibition of foreign films	2561
3.	Total admission receipts (sum of questions 1 and 2)	2562
4.	Advertising revenue	2327
5.	Rental of facilities (for events, meetings, etc.)	2005
6.	Amusement arcade revenue (e.g., coin operated games)	2563
7.	Sales of food and beverages	2498
8.	Other sales (please specify): 2559	2558
9.	Total sales (sum of questions 3 to 8)	2305

Expenses

Please provide the following expense amounts.

		CAN\$
10.	Film rental and royalty payments	4439
11.	Franchise fees (concessions)	4441

Amusement taxes

		CAN\$
12.	Amusement taxes collected	4443

Theatre operations

		Number
13.	Number of paid admissions (attendance)	0489
14.	Number of screens	0490
15.	Number of screens equipped with a digital projector for the screening of movies	0491
16.	Number of seats	0492
17.	Number of vehicle parking spaces (drive-in theatres only)	0493
18.	Usual number of performances per screen per week	0494
19.	Number of weeks the theatre operated during the reporting period	0495

F - Industry Characteristics - Motion Picture Theatres (continued)

Language of performance

Please provide a percentage breakdown of performances by language of screening.

		%
20. English	0496	
21. French	0497	
22. Other	0498	
Total		100%

23. Location of theatre – physical location of this indoor or drive-in theatre, or festival

a) Street	0844		
b) City	0845		
c) Province/ Territory	0846	d) Postal code	0870

G - Personnel

		Number
1. Number of non-salaried partners and proprietors (if salaried, report only at question 2 below)	6321	
2. Number of paid employees (based on year-end T4 payroll summaries)	6339	

3. Percentage of paid employees who worked full-time	6328	%
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		Number
4. Number of contract workers (for whom you did not issue a T4 such as freelancers and casual workers)	6320	
5. Number of volunteers (including unpaid interns and co-op students) during the reporting period	6014	

		Number of hours
6. Total number of hours worked by volunteers during the reporting period	6026	

H - I - J - Not applicable

K - Provincial/Territorial Distribution

1. Please report the number of permanent business units/locations operating in Canada during the reporting period. Business unit is defined as the lowest level of the firm for which separate records are kept for such details as revenue, expenses and employment.

Number
5001

2. Do you have permanent business units/locations in more than one province or territory?

⁹⁹⁶⁶ 1 Yes – Please complete question 3

³ No – Please go to Section L

3. Please report the following data for the provinces or territories in which you have business units.

Please indicate if you are reporting in **either** Canadian dollars **or** percentages.

⁹⁹⁶⁷ 1 \$ OR 2 %

Province/ Territory	Number of business units (locations)	Total revenue minus investment income	Salaries, wages and employee benefits	Amortization of tangible and intangible assets	Total expenses
1. Newfoundland and Labrador	5002	4824	4826	4827	4927
2. Prince Edward Island	5003	4829	4831	4832	4932
3. Nova Scotia	5004	4834	4836	4837	4937
4. New Brunswick	5005	4839	4841	4842	4942
5. Quebec	5006	4844	4846	4847	4947
6. Ontario	5007	4849	4851	4852	4952
7. Manitoba	5008	4854	4856	4857	4957
8. Saskatchewan	5009	4859	4861	4862	4962
9. Alberta	5010	4864	4866	4867	4967
10. British Columbia	5011	4869	4871	4872	4972
11. Yukon	5014	4874	4876	4877	4977
12. Northwest Territories	5013	4879	4881	4882	4982
13. Nunavut	5012	4884	4886	4887	4987
14. Total	5015	4889	4891	4892	4992

L - Certification

I certify that the information contained herein is complete and correct to the best of my knowledge.

Signature of authorized person	Title 0014	0015	Date
		YYYY	MM DD
		<input type="text"/>	<input type="text"/> <input type="text"/>

Name of person to contact for further information: 0026	0013	First name <input type="text"/>
1 <input type="checkbox"/> Mr. 2 <input type="checkbox"/> Mrs. 3 <input type="checkbox"/> Miss 4 <input type="checkbox"/> Ms	0054	Last name <input type="text"/>

E-mail address 0018	Web site address 0020
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Telephone number 0017	Extension number 0027	Fax number 0016
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How long did you spend collecting the data and completing this questionnaire?	9910	Hour(s) <input type="text"/>	9909	Minutes <input type="text"/>
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M - Comments

We invite your comments below. Please be assured that we review all comments with the intent to improve the survey.

9920 _____

9913 _____

9914 _____

9915 _____

9916 _____

FOR
INFORMATION
ONLY

Thank you for completing this questionnaire. Please retain a copy for your records.

Statistics Canada's publications are available for use in all major libraries.
As well, please visit our Web site at www.statcan.ca.

If you need help, please contact us at **1 888 881-3666**.