



2008 Survey of Service Industries: Motion Picture Theatres

This document is confidential when completed.
Si vous préférez recevoir ce questionnaire en français,
veuillez nous appeler au numéro sans frais suivant :
1-888-881-3666.

If necessary, please make address label corrections in the boxes 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 S-19.

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. For more information on this survey, please access www.statcan.ca/english/survey/index.htm.

Data-sharing agreements

To reduce respondent burden, Statistics Canada has entered into agreements with provincial and territorial statistical agencies and other government departments for the sharing of data. The data will be kept confidential and used for statistical purposes only by these organizations. For further details on any data-sharing agreement for this survey, please consult the enclosed reporting guide.

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 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*.

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, 150 Tunney's Pasture Driveway, Ottawa, Ontario K1A 0T6

Visit our website at www.statcan.ca

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 **main** source of revenue.

0472 Motion picture theatre, indoor

0473 Drive-in

0474 Film festival, with or without facilities

0040 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, 2008 and March 31, 2009. Please indicate below the period covered by this questionnaire.

from ⁰⁰¹¹ ^{yyyy} ^{mm} ^{dd} to ⁰⁰¹² ^{yyyy} ^{mm} ^{dd}

2. If the reporting period does not cover 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

Reporting instructions

- Report for business unit(s) specified on the label on the front page.
- Complete only the questions that apply to your business.
- When precise figures are not available, please provide your best estimate.
- Report in Canadian dollars. Dollar amounts and percentages should be rounded to whole numbers.
- Consult the enclosed reporting guide for further information.

D - Revenue

A detailed breakdown may be requested in other sections.

		CAN\$
1. Sales of goods and services (e.g., rental and leasing income, commissions, fees, admissions, services revenue) Report net of returns and allowances.	2299	
2. Grants, subsidies, donations and fundraising	2068	
3. Royalties, rights, licensing and franchise fees	2022	
4. Investment income (dividends and interest)	2097	
5. Other revenue ²⁰⁰¹ (please specify):	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 services fees (e.g., legal, accounting)	4315
5.	Subcontract expenses (include contract labour, contract work and custom work)	3060
6.	Charges 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 (e.g., property, equipment, vehicles)	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 and telecommunications expenses (include gas, heating, hydro, water, telephone and Internet expenses)	4084
15.	Property and business taxes, licences and permits	4410
16.	Royalties, rights, licensing and franchise fees (include film rental)	4440
17.	Delivery, warehousing, postage and courier	4179
18.	Financial services fees	4325
19.	Interest expenses	4630
20.	Amortization and depreciation of tangible and intangible assets	4520
21.	Bad debts	4542
22.	All other expenses 4531 (please specify):	4569
23.	Total expenses (sum of questions 1 to 22)	4699
24.	Corporate taxes, if applicable	4600
25.	Gains (losses) and other items (see reporting guide)	4601
26.	Net profit/loss after tax and other items (see reporting guide)	2304

F - Industry characteristics

Please provide a breakdown of your sales from your indoor theatres (including film festivals) or drive-in theatres.

		Indoor theatres (CAN\$)	Drive-in theatres (CAN\$)
1. Total admission receipts	0963	0979	
2. Advertising revenue	0964	0980	
3. Rental of facilities (for events, meetings, etc.)	0965	0981	
4. Amusement arcade revenue (e.g., coin-operated games)	0966	0982	
5. Sales of food and beverages	0967	0983	
6. a) Other indoor theatre sales (please specify):	0996	0968	
b) Other drive-in theatre sales (please specify):	0994		0995
7. Total sales (sum of questions 1 to 6)	0969	0984	

Expenses

Please provide the following expense amounts.

		Indoor theatres (CAN\$)	Drive-in theatres (CAN\$)
8. Film rental and royalty payments	0970	0985	
9. Franchise fees (concessions)	0971	0986	

Amusement taxes

		Indoor theatres (CAN\$)	Drive-in theatres (CAN\$)
10. Amusement taxes collected	0972	0987	

Theatre operations

		Indoor theatres (number)	Drive-in theatres (number)
11. Number of paid admissions (attendance)	0988	0973	
12. Number of screens	0989	0974	
13. Number of screens equipped with a digital projector for the screening of movies	0990	0975	
14. Number of seats	0492		
15. Number of automobile parking spaces (drive-ins only)	0992	0493	
16. Usual number of performances per screen per week	0992	0977	
17. Number of weeks theatre operated during reporting period	0993	0978	
18. Number of theatres reported on this questionnaire that are located in your province or territory	0627	0628	

F - Industry characteristics (continued)

Language of screening

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

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

G - Personnel

1. Number of partners and proprietors, non-salaried (if salaried, report at question 2 below)	6321	number
2. Paid employees		
a) average number of paid employees during the reporting period (see reporting guide)	6339	
b) percentage of paid employees (from question 2a) who worked full time	6328	%
3. Number of contract workers for whom you did not issue a T4, such as freelancers and casual workers (estimates are acceptable)	6320	number
4. Number of volunteers during the reporting period (estimates are acceptable)	6014	
5. Number of hours worked by all volunteers during the reporting period (estimates are acceptable)	6026	number of hours

H, I, J and K - Not applicable

L - Contact information

Name of person to contact about this questionnaire:

0026 1 Mr. 2 Mrs. 3 Miss 4 Ms

0054	Last name		0017	Telephone number	
0013	First name		0027	Extension number	
0014	Title		0016	Fax number	
0018	E-mail address		0020	Website address	

Date completed: 0015

 yyyy mm dd

How long did you spend collecting the data and completing the questionnaire? 9910 hour(s) 9909 minutes

M - Comments

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

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

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