2006 Survey of Service Industries: **Heritage Institutions**

This document is confidential when completed.

Si vous préférez recevoir ce questionnaire en français, veuillez nous téléphoner au numéro sans frais suivant : 1 888 881-3666.

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If necessary please make address label corrections in the hoxes below

	iccessai y, picas	se make address label corrections in the boxes below.						
0001	Legal name			Address (number and street)				
	Business name		0005	City				
	Title of contact	ГО		Province/ Territory or State				
	First name of contact	FU	0053	Country		0007	Postal code/ Zip code	
	Last name of contact	INFORM		Language preference	1 English	ı	2	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. For more information on this survey, please access www.statcan.ca/english/survey/index.htm.

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.

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

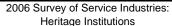


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Canada

Statistics Statistique Canada

2006-09-15 STC/UES-425-75176





B - Main Business Activity				
1. Indicate the organization/park's primary heritage activity.				
Check one only.				
712119 0702 Museum (except art museum and gallery)				
712120 0703 Historic site, building, park or community				
712111 0704 Art museum and gallery, non-commercial				
712190 0705 Nature park or conservation area				
519122 ⁰⁷⁰⁶ Archives				
712119 0707 Exhibition centre				
712119 0708 Planetarium Skip to qu	question 3			
712119 ⁰⁷⁰⁹ Observatory				
712130 ⁰⁷¹⁰ Aquarium				
712130 ⁰⁷¹¹ Zoo				
712130 ⁰⁷¹² Botanical garden, arboretum, or conservatory				
712190 0713 Other heritage activity 0714				
(please specify):				
None of the above – Please call 1 888 881-3666 for further instructions.				
C. Indicate the transfer of accessing and biotopic site, building grade an accessible.				
Indicate the type of museum, or historic site, building, park or community.Check one only.				
0399 1 Community (local interest)				
Community (local interest)				
Fort or military Maritime or marine				
4 Human history, archaeology, anthropology, or ethnology				
5 Science and technology				
Golerice and technology				
7 On ant an half of farms				
_ Sport of Hall of Valle				
9 Multidisciplinary 10 Other (please specify): 0400				
- Cutor (ploade speelily):				
3. Indicate if the organization/park has additional or secondary heritage activities. If this organization/park h	has			
more than one heritage activity or site location, include all activities in all further questions.				
Check all that apply.				
⁰⁷¹⁶ No secondary activity				
^{0702a1} Museum (except art museum and gallery)				
0704a1 Art museum and gallery, non-commercial				
O705a1 Nature park or conservation area				
O703a1 Historic site, building, park, or community				
0706a1 Archives				
Other (please specify):				
4. Indicate the governing authority of the organization/park. This question does not refer to the major source	of			
funding but to whom the organization/park reports.				
Check one only.				
0404 1 Not applicable				
² Federal government				
³ Provincial or territorial government				
⁴ Municipal government (include region/county government)				
⁵ Educational organization (include all elementary, secondary and post-secondary level				
institutions)	institutions)			
6 Religious organization				
 For profit institution or business Other 				

В	B - Main Business Activity (Continued)				
5.	5. Organization structure				
	a) Is this establishment a not-for-profit organization?				
	0528 1 Yes				
	³ No				
	b) Type of organization				
	Unincorporated				
	 Incorporated Other 				
	c) Please check as applicable				
	one of the organization (files a charitable organization tax return)				
	² Government agency or quasi-governmental organization				
C.	- Reporting Period Information				
1.					
	March 31, 2007. Please indicate below the period covered by this questionnaire. YYYY MM DD YYYY MM DD				
	From 0011 0012 To				
2.	If you did not operate this business unit for a full year, please check the reason(s) below:				
	0031 1 Seasonal 2 New 3 Change of 4 Change of 5 Ceased 6 Tempora	arily			
	operations business fiscal year ownership operations inactive				
Re	eporting Instructions:				
	ONLY				
-	 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 only. Dollar amounts and percentages should be rounded to whole numbers. 				
-	 Consult the enclosed Reporting Guide for further information. 				
D.	D - Revenue				
1.	3				
	admissions, services revenue) Report net of returns and allowances. A detailed breakdown will be requested in				
	Section F. {if applicable}				
2.	Grants, subsidies, donations and fundraising				
3.	Royalties, rights, licensing and franchise fees				
4.	Investment income (dividends and interest)				
5.	Other revenue 2001 2077				
	(please specify):				
6.	Total revenue (sum of questions 1 to 5)				

E-	E - Expenses			
		3010	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.)			
3.	Commissions paid to non-employees	4466		
4.	Professional and business service fees (e.g., legal, accounting)	4315		
5.	Outsourcing (include work contracted out such as payments to freelancers, personnel suppliers, artists, etc.)	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 (include gas, heating, hydro, water)	4066		
15.	Telephone, Internet 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 and depreciation of tangible and intangible assets	4520		
22.	Charitable donations 4521			
23.	Bad debts	4542		
24.	All other expenses (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 (see Reporting Guide)	4601		
28.	Net profit/loss after tax and other items (see Reporting Guide)			

F - G - H - I - J - K - Not applicable			
L - Contact Information			
0015	Date completed	Name of person to contact about this questionnaire:	
YYYY	MM DD		
		0026 1 Mr. 2 Mrs. 3 Miss 4 Ms	
		First name	
		0013	
		Last name	
		0054	
		Title 0014	
E-mail		Website	
address 0018		address 0020	
Telephone number	()	Extension Fax number number ()	
0017	()	0027 Humber ()	
		Hour(s) Minutes	
How long did yo	ou spend collecting the data and	completing the questionnaire?	
M - Comme	ents	FOR	
		ured that we review all comments with the intent to improve the survey.	
9920	comments below. Flease be ass	ured that we review all confinents with the litterit to improve the survey.	
	1111	OKIMATION	
		ONLY	
		ONLI	
9913			
9914			
9915			
9916			
Thank	you for completing this	s questionnaire. Please retain a copy for your records.	
•		Visit our website at www.statcan.ca	
		ou	