OMB No. 0607-0907: Approval Expires: 07/31/2021

U.S. DEPARTMENT OF COMMERCE
U.S. CENSUS BUREAU

FORM
**QSS-5A** (03-04-2021)

# QUARTERLY SERVICES SURVEY

**Due Date**

**Need help or have questions?**
**Call** 1-800-772-7851
(8:30 a.m. - 5:00 p.m. ET, M-F)
or **Visit**
https://www.census.gov/services/qss/respondent-information.html

Title 13 United States Code (U.S.C.), Sections 131 and 182, authorizes the Census Bureau to conduct this collection. The U.S. Census Bureau is required by Section 9 of the same law to keep your information confidential and can use your responses only to produce statistics. The Census Bureau is not permitted to publicly release your responses in a way that could identify your business, organization, or institution. Per the Federal Cybersecurity Enhancement Act of 2015, your data are protected from cybersecurity risks through screening of the systems that transmit your data.

This collection has been approved by the Office of Management and Budget (OMB). The eight-digit OMB approval number is 0607-0907 and appears at the upper right of this page. Without this approval, we could not conduct this survey.

*(Please correct any errors in name, address, and ZIP Code.)*

**INTERNET REPORTING OPTION AVAILABLE - We encourage you to complete this survey online at: https://portal.census.gov**

**Authentication Code:**

**To view Survey Results:**
https://www.census.gov/services

## GENERAL INSTRUCTIONS

- Any significant change in this firm's operations should be noted in 8
- For establishments sold or acquired during the quarter(s), 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
- Report data on an accrual basis
- Dollars should be rounded to the nearest dollar
- If a figure is $1,030,280,456 it should be reported as →

| Bil. | Mil. | Thou. | Dol. |
|---|---|---|---|
| | | | |

***Include:***

- Data for all Services establishments (excluding data for Retail, Wholesale, Manufacturing, Mining, and Construction operations) as defined by the survey coverage in 1
- Data for auxiliary facilities primarily engaged in supporting services to this firm's establishment(s) such as warehouses, garages, central administrative offices, and repair services

We estimate this survey will take an average of 15 minutes to complete. More information about this estimate and an address where you may write with comments is on the back of this form.

***CONTINUE ON PAGE 2***

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## 1 SURVEY COVERAGE

**Did this firm provide the business activities described below?**

☐ Yes

☐ No - *Specify this firm's business activity*

## 2 Not Applicable.

## 3 ORGANIZATIONAL CHANGE

**A. Did this firm experience any acquisitions, mergers, sales, and/or divestitures in the**

☐ Yes

☐ No - *Go to* 4

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

*Check all that apply. If more than one organizational change occurred during the reporting period, explain in* 8.

☐ Acquisition

☐ Merger

☐ Sale

☐ Divestiture

*Date of organizational change* . . . . . .

| Month | Day | Year |
|---|---|---|
| | | |

*AND*

*Enter detailed information below*

| Name of company | EIN (9 digits) |
|---|---|
| | - |

| Address (Number and street, P.O. Box, etc.) |
|---|
| |

| City, town, village, etc. | State | ZIP Code |
|---|---|---|
| | | - |

## 4 REPORTING PERIOD

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

☐ Calendar quarter

☐ Other - *Report beginning and ending dates* . . . . . .

| Beginning Date | | |
|---|---|---|
| Month | Day | Year |
| | | |

| End Date | | |
|---|---|---|
| Month | Day | Year |
| | | |

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## 5 SALES, RECEIPTS, OR REVENUE

Firms operating on a commission basis should report commissions, fees, and other operating revenue income, not gross billings or sales.

### Taxable Firms

***Include:***

- Total value of service contracts
- Amounts received for work subcontracted to others
- Revenue from services performed by domestic locations for foreign parent firms, subsidiaries, branches, etc.
- Market value of compensation in lieu of cash
- Franchise sales, fees, and royalties
- Sale or licensing of rights to intellectual property protected by copyright or as industrial property (e.g., patents, trademarks)
- Gross billing, with the exception of racetracks

***Exclude:***

- Taxes (sales, amusement, occupancy, use, or other) collected directly from customers or clients and paid directly to a local, state, or Federal tax agency
- Revenue from a domestic parent organization, or from franchise locations owned by others
- Rents from and revenue of separately operated departments, concessions, etc., which are leased to others
- Revenue from customers for carrying or other credit charges
- 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)
- Nonoperating revenue such as income from investments, sales of company-owned real estate (land and building), or other assets (except inventory held for resale), securities, gifts, loans, contributions, or grants
- Revenue from the sale of used equipment
- Installment payments from leasing under capital, finance, or full-payout leases
- Intracompany transfers
- Interest income
- Gross contributions, gifts, and grants (whether or not restricted for use in operations)

### Tax-exempt Firms

***Include:***

- Program service revenue
- Gross sales of merchandise, minus returns and allowances
- Income from interest, dividends, gross rents (including display space rentals and share of receipts from departments operated by other companies), royalties, and other investments
- Net gains (losses) from the sale of real estate (land and buildings), investments, or other assets (except inventory held for resale)
- Gross contributions, gifts, and grants (whether or not restricted for use in operations)
- Dues and assessments from members and affiliates
- Commissions earned from the sale of merchandise owned by others (including commissions from vending machine operators)
- Gross receipts from fundraising activities

***Exclude:***

- Taxes (sales, amusement, occupancy, use, or other) collected directly from customers or clients and paid directly to a local, State, or Federal tax agency
- Gross receipts of departments or concessions operated by other companies
- Amounts transferred to operating funds from capital or reserve funds

**What was this firm's revenue in the** . . . . . .

| $ Bil. | Mil. | Thou. | Dol. |
|---|---|---|---|
| | | | |

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## 6 SOURCE OF REVENUE

**Admissions** - *Gross receipts from the sale of general or specific event admissions tickets exclusive of any state or local admissions taxes (include theater or facilities owners' share, if any). Include receipts from all home, hall or tour subscriptions, and other minimum guarantee and percentage arrangements. Dinner theatres should include all combined admission/dinner receipts. Professional athletic clubs should report total receipts form admissions to their home games, including visiting teams' share (both league and nonleague). Exclude admissions taxes.*

**How much of the revenue reported in 5 was received from the following sources of revenue in the**

| | Percent |
|---|---|
| **A. Admissions revenue** | % |
| **B. All other operating revenue** + | % |
| | 100 % |

## 7 Not Applicable.

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

## 9 CONTACT INFORMATION

| Name of person to contact regarding this report *(Please print)* | Title |
|---|---|
| | |

| Telephone | Area code | Number | Extension | Fax | Area code | Number |
|---|---|---|---|---|---|---|
| | | - | | | | - |

Website

**THANK YOU**
**for completing your QUARTERLY SERVICES SURVEY.**
We suggest you keep a copy for your records.

We estimate this survey will take an average of 15 minutes to complete, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this voluntary collection of information, including suggestions for reducing this burden, to: EID Survey Comments 0607-0907, U.S. Census Bureau, 4600 Silver Hill Road, Room EID-8K175, Washington, DC 20233. You may email comments to sssd.qss@census.gov. Be sure to use "EID Survey Comments 0607-0907" as the subject.

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