# **2007 Annual Services Report Service Annual Survey**

## **Sound Recording Studios**



**FORM** 

SA-51224

138 SAS\_I

512240

**REPORT DUE** 

Any questions call **1–800–772–7851** M–F, 8:30 a.m. to 5:00 p.m. EST.

Visit our web site: www.census.gov/econhelp/sas

Please correct any error in the name, address, or ZIP Code.

### YOUR RESPONSE IS REQUIRED BY LAW

Title 13, U.S. Code, requires businesses and other organizations that receive this questionnaire to answer the questions and return the report to the Census Bureau.

### YOUR RESPONSE IS CONFIDENTIAL BY LAW

Title 13, U.S. Code, requires that your response may be seen only by persons sworn to uphold the confidentiality of Census Bureau information and may be used only for statistical purposes. The law also provides that copies retained in your files are **immune from legal process.** 

### YOUR RESPONSE IS IMPORTANT

The services industries account for nearly 70 percent of all economic activity. We conduct this survey to obtain timely, comprehensive and consistent measures needed by policy-makers, businesses, and the public to accurately assess domestic economic performance.

2007

### **Annual Services Report**

- This report should be completed and returned on or before the due date in the preaddressed envelope provided.
- If filing within the required time frame will cause an undue burden and you would like an extension, or if you have any questions, please write to:

U.S. CENSUS BUREAU 1201 East 10th Street Jeffersonville, IN 47132-0001

or call a Census Bureau Representative at 1-800-772-7851, weekdays from 8:30 a.m. to 5:00 p.m., Eastern Standard Time.

## 1 Report Coverage

This report covers all domestic locations operated by your company and its subsidiaries primarily engaged in providing the facilities and technical expertise for sound recording in a studio. Locations may provide audio production or postproduction services for producing master recordings, and may provide audio services for film, television, and video productions.

	es the above coverage describe this firm's business activity?
0001	es – Go to 2
2	o – Specify the firm's business activity and complete the report where applicable beginning with 2.
	0002

## 2 Report Periods

What periods of time will this data represent?

- Report data for the 2007 calendar year if possible.
- For locations that were sold or acquired during the year, only report for the periods that this firm operated the locations.

			Month	Day	Year
		0007			
0006	1 ☐ 2007 calendar year – Go to 3	From			
	2 Other than calendar year – Enter the periods this report will cover				
	(e.g., fiscal years, periods with less than a full calendar	8000			
	year).	То			

3	Operating R	evenue
_	<b>Opo.a</b>	0.0

Report the total operating revenue for this firm's locations defined in 1 for the following categories.

- Enter "0" where applicable.Estimates are acceptable.

· Allowances for cash or other discounts.

• Transfers made within the company.

			2007	' Operati	ng Rever	iue
1.	<b>Studio recording</b> – Services rendered in the process of converting sounds, words, and music to a permanent physical format using the specialized technical equipment of a sound	6241	Bil.	Mil.	Thou.	Dol.
	recording studio. <b>Exclude</b> all live recordings done outside a studio (e.g., concert hall, stadium, outdoor stage, or conference center)		\$			
2.	<b>Sound recording studio rental and leasing</b> – Permitting others to use a sound recording	6242			1 1	
	studio, without provision of primary technicians. The studio supervises the client's operation of the sound recording equipment.		\$			
2	All other energing revenue. Powerus not reported in line 1 and 2. If this item is greate					
	All other operating revenue – Revenue not reported in line 1 and 2. If this item is greate than 20% of the total operating revenue, specify the primary source of the revenue here $\mathbf{z}$	•				
1560		1799				
			\$			
		1800	¢			
4.	TOTAL OPERATING REVENUE – Sum of lines 1–3.		φ			

Not Applicable

## **Operating Expenses**

Report operating expenses for this firm's locations as defined in 1 for the following categories.

- Enter "0" where applicable.
  Estimates are acceptable.
  Do not combine data of two or more detail lines.

### Exclude:

- Transfers made within the companyCapitalized expenses

- InterestBad debt

•	Income tax Impairment					
Doro	sonnel Costs		200	7 Operati	na Expei	nses
reis	Soffiler Costs		Bil.	Mil.	Thou.	Dol.
1.	<b>Gross annual payroll</b> – Total annual Medicare salaries and wages for all employees as reported on your firm's IRS Form 941, Employer's Quarterly Federal Tax Return, line 5(c) for the four quarters that correspond to the survey period.	1821	\$	IVIII.	mou.	DOI.
2.	Employer's cost for fringe benefits – Employer's cost for legally required programs and programs not required by law:					
	a. Health insurance – Insurance premiums on hospital plans, medical plans, and single service plans such as dental, vision, prescription drugs plan. Include premium equivalents for self-insured plans and fees paid to third-party administrators (TPAs). Exclude employee contributions.	1841	\$			
	b. Pension plans:					
	<ol> <li>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</li> </ol>	1842				
	employee's compensation and years of service and are not allocated to specific accounts maintained for employees.		\$			
	<ol> <li>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</li> </ol>	1843				
	contributed and the results of the account's activity. Examples include profits sharing plans, money purchase (e.g., 401k, 403b) and stock bonus plans (e.g., ESOPs)		\$			
	c. Other – Other fringe benefits (e.g., Social Security, workers' compensation insurance, unemployment tax, state disability insurance programs, life insurance benefits, Medicare).	1844	\$			
3.	<b>Temporary staff and leased employee expense</b> – Total costs paid to Professional Employer Organizations (PEOs) and staffing agencies for personnel. <b>Include</b> all charges for payroll, benefits and services.	1823	\$			
Ехр	ensed Materials, Parts and Supplies (not for resale)					
1	Expensed equipment – Expensed computer hardware and other equipment (e.g., copiers,	1824				
٦.	fax machines, telephones, shop and lab equipment, CPUs, and monitors). Report packaged software in line <b>6.</b> Report leased and rented equipment in line <b>14.</b>		\$			
5.	Expensed purchases of other materials, parts, and supplies – Materials and supplies used in providing services to others; materials and parts used in repairs; office and janitorial supplies; small tools; containers and other packaging materials; and motor fuels	1825	\$			
	ensed Purchased Services					
6.	<b>Expensed purchases of software</b> – Purchases of prepackaged, custom coded, or vendor	1826				
	customized software. <b>Include</b> software developed or customized by others, web-design services and purchases, licensing agreements, upgrades of software; and maintenance fees related to software upgrades and alterations.		\$			

## Operating Expenses – (Continued)

Report operating expenses for this firm's locations as defined in 1 for the following categories.

- Enter "0" where applicable.
  Estimates are acceptable.
  Do not combine data of two or more detail lines.

- · Transfers made within the company
- Capitalized expensesImpairment
- Interest
- Bad debt
- Income tax

## **Expensed Purchased Services (Continued)**

7.	Data processing and other purchased computer services – Include web hosting, computer facilities management services, computer input preparation, data storage,		2007	' Operati	ng Exper	nses
	computer time rental, optical scanning services, and other computer-related advice		Bil.	Mil.	Thou.	Dol.
	and services, including training. <b>Exclude</b> expensed integrated systems, repair and	1845				
	maintenance of computer equipment, payroll processing and credit card transaction fees, and expenses for telecommunication services (e.g., Internet, connectivity, telephone)		\$			
	ices, and expenses for telecommunication services (e.g., internet, connectivity, telephone)			J		
Ω	Purchased communication services – Telephone, cellular, and fax services; computer-	1846		1		
0.	related communications (e.g., Internet, connectivity, online), and other wired and wireless	1040				
	communication services		\$			
9.	Purchased repairs and maintenance to machinery and equipment – Expensed repair and	1040		1	1 1	
	maintenance services to machinery, vehicles, equipment, and computer hardware. <b>Exclude</b> materials, parts, and supplies used for repairs and maintenance performed by this	1848				
	firm's employees.		\$			
10.	Purchased repairs and maintenance to buildings, structures, and offices – Include					
	repair and maintenance to integral parts of buildings (e.g., elevators, heating systems). <b>Exclude</b> materials, parts, and supplies used for repairs and maintenance performed by	1849				
	this firm's employees. Report janitorial and grounds maintenance services in line 20		\$			
		1850		1		
11	Purchased electricity - If the cost of electricity is included in lease or rental payments,	1000				
• • • •	report in line 15.		\$			
12.	Purchased fuels (except motor fuels) – Fuel for heating, power or generating electricity	1851				
	(e.g., natural gas, propane, oil, coal). If the costs are included in lease or rental payments,		\$			
	report in line 15		Ψ			
13.	Water, sewer, refuse removal, and other utility payments – Include the cost of hazardous waste removal. If the costs of these utilities are included in a lease or rental payment, report	1852				
	in line 15.		\$			
14.	Lease and rental payments for machinery, equipment, and other tangible items –					
	<b>Include</b> lease and rental of transportation equipment without operators; and penalties	1853				
	incurred for broken leases. Exclude capital and financing lease agreements and		\$			
	licensing/leasing of software		Ψ	<u> </u>	]]	
15	Lease and rental payments for land, buildings, structures, store spaces, and offices –	1854				
15.	Include penalties incurred for broken leases		\$			
		1830			1	
16.	Purchased advertising and promotional services – Include marketing and public relations					
	services.		\$			
47	Dividence dispersional and technical comices all policide management and the	1855		-		
17.	Purchased professional and technical services – Include management consulting, accounting, auditing, bookkeeping, legal, actuarial, payroll processing, architectural, engineering,	1000				
	and other professional services. <b>Exclude</b> salaries paid to your own employees for these services		\$			
	,					

5	Operating	Expenses -	(Continued)
O .	Operating	Expenses -	(Continued)

Report operating expenses for this firm's locations as defined in 1 for the following categories.

- Enter "0" where applicable.
  Estimates are acceptable.
  Do not combine data of two or more detail lines.

### Exclude:

- Transfers made within the company
- Capitalized expenses Impairment Interest

- Bad debt
- Income tax

Other Operating Expens
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			2007	Operati	ng <b>∟</b> xper	ises
18.	Depreciation and amortization charges - Include depreciation charges taken against tangible		Bil.	Mil.	Thou.	Dol.
	assets owned and used by your firm, tangible assets and improvements owned by your firm	1831				
	within leaseholds, tangible assets obtained through capital lease agreements, and amortization charges against intangible assets (e.g., patents, copyrights). <b>Exclude</b> impairment		\$			
	charges against intangible assets (e.g., paterils, copyrights). <b>Exclude</b> impairment	• •	Ţ		,	
10	Governmental taxes and license fees – Payments to government agencies for taxes and	1832				
19.	licenses. <b>Include</b> business and property taxes. <b>Exclude</b> income taxes, and sales and excise	.002				
	taxes collected from customers.		\$			
20.	All other operating expenses – All other operating expenses not reported above,	4050				
	unless specifically excluded in the general instructions at the top of the page. <b>Include</b> office postage and package delivery. <b>Exclude</b> purchases of merchandise for resale	1859				
	and non-operating expenses		\$			
		1900				
		1900				
21.	TOTAL OPERATING EXPENSES – Sum of lines 1–20		\$			

Not Applicable

8	E-Commerce Revenue					
	E-commerce includes sales, receipts, and contributions from any transaction completed over network, electronic mail or other online system. Transactions are agreements between buy ownership of, or rights to use, goods or services. Payment for these goods and services in online.	ers.	and sell	ers to t	ransfer	)I
	Did the revenue reported in 2 include any e-commerce				erce Rev	
	Did the revenue reported in si include any e-commerce revenue?	2000	Bil.	Mil.	Thou.	Dol.
00	11 ☐ Yes – <b>What was this firm's e-commerce revenue?</b>		\$			
	2 No – Go to 19					
9	Export Revenue					
	An exported service is a service performed for a customer or client (individual, governmer etc.) located outside the United States (i.e., outside the 50 States, District of Columbia, U. Territories, or U.S. possessions).	nt, bu S. C	usiness ommon	establis wealth	shment,	
	Include:					
	<ul> <li>Revenue from the sale of personal, business, or mainframe computer software to client located outside the United States.</li> <li>Services performed for unaffiliated and affiliated foreign firms (i.e., foreign parent firms,</li> </ul>				hes, etc	:.).
	Exclude:					
	Services provided to domestic subsidiaries of foreign firms.					
	Did the revenue reported in include any revenue		<b>20</b> Bil.	07 Expo Mil.	rt Reveni	u <b>e</b> Dol.
	from exports?	2100	DII.	IVIII.	Thou.	DOI.
000	1 ☐ Yes – <b>What was this firm's revenue from exports?</b>		\$			
10	Inventories at End of Year					
	Report inventories at end of year at cost or market value using generally accepted accour	nting	principl	es.		
				2007 Inv	entories	
		1751	Bil.	Mil.	Thou.	Dol.
			\$			
1.	Finished goods.	 1752	Ψ			
			_			
2.	Work-in-process		\$			
		1753				
3.	Materials, supplies, fuel, etc		\$			
		1754				
4.	TOTAL BOOK VALUE – Sum of lines 1–3		\$			
	Of the total inventories reported in line 4, were any stored or in route OUTSIDE the 50 U.S. States and the District of Columbia?	6042	Bil.	Mil.	Thou.	Dol.
	Yes – <b>What was the total value of those inventories?</b> (Do not report inventory held in Foreign Trade Zones or in bond warehouses in the U.S.)	6042	\$			
604	2 No – Go to iii					

7 Not Applicable

Did you have an Employer Identification Number (EIN) change in 2007?    Ves - Enter the new EIN.   EIN	
Was there a change in ownership or control?    Ves - Provide the date of the change and the firm's information. (for multiple mergers, provide each firm's information as an attachment to this report)   Name of company acquired or merged with	
Was there a change in ownership or control?    Was there a change in ownership or control?	
Was there a change in ownership or control?    Ves - Provide the date of the change and the firm's information   Control of the firm's information as an attachment to this report)   No - Go to   2   No - Go to   2	
Specify the nature of this change here   Specify the nature of c	
Yes - Provide the date of the change and the firm's information.   (for multiple mergers, provide each firm's information as an attachment to this report)   Name of company acquired or merged with	Year
(for multiple mergers, provide each firm's information as an attachment to this report)  0017  Name of company acquired or merged with  Street address  City, State, ZIP Code  0019  EIN  Specify the nature of this change here  Specify the nature of this change here  For any separate correspondence pertaining to this report, please include the identification nur address label area at the top of the first page.  3 Certification — This report is substantially accurate and has been prepared in accordance with the instruction Name of person completing this report — Please print  Name of person completing this report — Please print  O024  Address (Street address, City, State, ZIP Code)  0022 Telephone number  0023 Fax number  0026 E-mail address	
Name of company acquired or merged with    Street address	
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curn Completed form to: Public reporting burden for this collection of information is estimated to average 5.5 hours per response, inc	tions.

Jeffersonville, IN 47132-0001

Silver Hill Road, AMSD-3K138, Washington, DC 20233. You may e-mail comments to Paperwork @census.gov; use "Paperwork Project 0607-0422" as the subject. Please include form name and number in all correspondence. Respondents are not required to respond to any information collection unless it displays a valid approval number from the Office of Management and Budget. This 8-digit number appears in the top right corner on the front of this form.

or fax to: 1-800-447-4613

To see aggregate industry results of previous Service Annual Surveys, go to the following website: www.census.gov/econ/www/servmenu.html