



SERVICE ANNUAL SURVEY
U.S. DEPARTMENT OF COMMERCE
Economics and Statistics Administration
U.S. CENSUS BUREAU

FORM

SA-72100A

(09-20-2018)

2018 ANNUAL SERVICES REPORT

Due Date

Need help or have questions?

Call 1-877-787-9860, option "1"
(8:00 a.m. - 5:00 p.m. ET, M-F)
or **Visit**

<https://www.census.gov/programs-surveys/sas/information.html>

YOUR RESPONSE IS REQUIRED BY LAW.

Title 13 United States Code (U.S.C.), Sections 131 and 182 authorizes this collection. Sections 224 and 225 require your response. 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 0607-0422 and appears at the upper right of this page. Without this approval, we could not conduct this survey.

INTERNET REPORTING - This survey should be completed online at:
<https://portal.census.gov>

Authentication Code:

To view Survey Results:

<https://www.census.gov/programs-surveys/sas/newsroom/updates/latest-sas.html>

GENERAL INSTRUCTIONS

- Any significant change in this firm's operations should be noted in **17**.
- For establishments sold or acquired in 2018, 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.
- Do not combine data for two or more detailed lines.
- Report data on an accrual basis, except for payroll.
- Figures should be rounded to the nearest dollar.
- If a figure is \$1,030,280,456 it should be reported as →

\$ Bil.	Mil.	Thou.	Dol.
1	0	3	0
2	8	0	4
5	6		

Include:

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

1 A. MAILING ADDRESS

Is this firm's name and mailing address the same as shown in the mailing address above?

☐ Yes

0035

☐ No - Enter corrections in the mailing address above

1 B. SURVEY COVERAGE**Did this firm provide the business activities described below?**0001 ☐ Yes☐ No - Specify this firm's business activity ↴

0002

2 Not Applicable.**3 ORGANIZATIONAL CHANGE****A. Did this firm experience any acquisitions, sales, mergers, and/or divestitures in 2018?**0016 ☐ Yes☐ No - Go to **4****B. Which of the following organizational changes occurred in 2018?**Check all that apply. If more than one organizational change occurred during the reporting period, explain in **17**.0091 ☐ Acquisition☐ Sale☐ Merger☐ Divestiture

Date of organizational change 0018

AND

Enter detailed information below ↴

Month	Day	Year

0017	Name of company	0019	EIN (9 digits)
			-
Address (Number and street, P.O. Box, etc.)			
City, town, village, etc.		State	ZIP Code
			-

4 REPORTING PERIOD

NOTE: Calendar year data are preferred. If they are unavailable, please report for the fiscal year that includes at least six months of data for the 2018 calendar year.

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

☐ Calendar year

0006

☐ Fiscal or partial year - Report beginning and ending dates 0007

2018		
Beginning Date		
Month	Day	Year
Ending Date		
Month	Day	Year

0008

5 NUMBER OF ESTABLISHMENTS

How many establishments (hotels) did this firm have in the following categories in 2018?

Mark "X"
if None

2018
Number

A. Owned or leased by THIS firm and managed by THIS firm 8011

☐

B. Owned by or leased by THIS firm, but managed by ANOTHER firm 8012

☐
1. What was the name and EIN of the management company for the hotels reported in 5B?

If more than one management company, continue in 17.

Name of Company	EIN (9 digits)
	-

6 SALES, RECEIPTS, OR REVENUE

What were the revenues for this firm in 2018?

Include:

- Report gross billings, **except** where noted on the form.
- Dues and assessments from members and affiliates.
- Amounts received for work subcontracted to others.
- For locations that were sold or acquired during a year, only report for the periods that this firm operated the locations.
- Revenue from services performed by domestic locations of foreign parent firms, subsidiaries, branches, etc.
- Commissions, fees, and revenue from admissions and the use of facilities.
- Receipts from guest rooms or unit rentals for all establishments owned by this firm.
- Receipts from rentals of public rooms such as ballrooms, conference rooms, etc.
- Sales of meals, alcoholic beverages, and other merchandise.
- Gaming operations.
- Site rental and equipment usage fees.
- Receipts from valet, laundry, parking, and other guest services provided by this firm.
- For casino hotels, report sales net of promotional allowances.
- Franchise or royalty fees.
- Management fees.
- Cost reimbursables from managed hotels.
- Revenues from electronic sources.

Exclude:

- Transfers made within the company.
- Taxes collected directly from customers or clients and paid directly to a local, state, or federal tax agency.
- Occupancy Taxes.
- Rents from and revenue of separately operated departments, concessions, etc., which are leased to others.
- 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).
- Revenue from casinos without accommodations.
- Revenue from timeshares or vacation ownership.

Mark "X"
if None

2018

\$ Bil.	Mil.	Thou.	Dol.

1. Hotels that this firm owns or leases (include room revenue, meals, beverages, gaming, retail, guest services, etc.) 8101

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CONTINUE WITH 6 ON PAGE 4

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6 SALES, RECEIPTS, OR REVENUE - ContinuedMark "X"
if None2. Franchise or royalty fees 8102 ☐3. Hotel management fees 8103 ☐4. Cost reimbursables from managed hotels 8104 ☐5. **All other operating revenue** - Revenue not reported in lines 1 through 4. If this item is greater than 20% of the total operating revenue, specify the primary source of the revenue below ↴**6. TOTAL OPERATING REVENUE**

Sum of lines 1 through 5 1800

2018			
\$ Bil.	Mil.	Thou.	Dol.

7 Not Applicable.**8 REVENUES FROM ELECTRONIC SOURCES****A. Did this firm have any revenues from customers entering orders directly on the firm's websites or mobile applications in 2018?**0040 ☐ Yes☐ No**B. Did this firm have any revenues from customers entering orders directly on third-party websites or mobile applications in 2018?**0041 ☐ Yes☐ No**C. Did this firm have any revenues from customers entering orders via any other electronic systems (such as private networks, dedicated lines, etc.) in 2018?**0042 ☐ Yes☐ No**D. Of the total 2018 revenues reported in 6, what was the dollar amount (or percentage) that was from the revenues identified in A-C above? Please provide an estimate if exact figures are not available. 2500**

2018			
\$ Bil.	Mil.	Thou.	Dol.

OR

2501

2018	
Percent	%

9-13 Not Applicable.

72101041

14 OPERATING EXPENSES**What were the operating expenses for this firm in 2018?****Exclude:**

- Transfers made within the company.
- Capitalized expenses.
- Interest.
- Bad debt.
- Impairment.
- Income tax.
- Purchases of goods for resale or cost of goods sold.
- Expenses 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).

Gross annual payroll

Include salaries and wages, commissions, dismissal pay, bonuses, employee contributions to Social Security, income tax withholding, union dues, group insurance premiums, savings bonds, cash equivalent in-kind, allowances, holiday pay, vacation pay, sick leave, stock purchase plans, and employee contributions to pension plans.

Exclude the cost of leased employees, employer's cost for fringe benefits, and temporary staff obtained from temporary help services. For unincorporated businesses, **exclude** profit or other compensation of proprietors or partners.

All other operating expenses

Include travel and entertainment; postage, shipping or delivery services; warehousing and storage services; royalties; security services; janitorial and grounds maintenance services; purchased transportation with operators; and other expenses not reported elsewhere.

Mark "X"
if None

2018

\$ Bil.	Mil.	Thou.	Dol.
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1. Personnel Costs

a. Gross annual payroll - Total annual Medicare salaries and wages for all employees as reported on this firm's IRS Form 941, Employer's Quarterly Federal Tax Return, line 5(c) for the four quarters that correspond to the survey period or IRS Form 944 Employer's Annual Federal Tax Return, line 4(c). **Include** the spread on stock options that are taxable to employees as wages . 1821

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b. Employer's cost for fringe benefits - Employer's cost for legally required programs and programs not required by law. **Include** insurance premiums for hospital plans, medical plans, and single service plans (e.g., dental, vision, prescription drugs); premium equivalents for self-insured plans and fees paid to third-party administrators (TPAs); defined benefit pension plans; defined contribution plans (e.g., profit sharing, 401K, stock option plans); and other fringe benefits (e.g., Social Security, workers' compensation insurance, unemployment tax, state disability insurance programs, life insurance benefits, Medicare). **Exclude** employee contributions. 1822

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c. Temporary staff and leased employee expense - Total costs paid to Professional Employer Organizations (PEOs) and staffing agencies for personnel. **Include** all charges for payroll, benefits, and services 1823

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2. Expensed equipment, materials, parts, and supplies (not for resale) - **Include** expensed computer hardware and other equipment (e.g., copiers, fax machines, telephones, shop and lab equipment, CPUs, monitors). **Include** 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. Report packaged software in line 3 and leased and rented equipment in line 4b. 1860

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3. Expensed purchases of software - Purchases of prepackaged, custom coded, or vendor customized software. **Include** 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 1826

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14 OPERATING EXPENSES - ContinuedMark "X"
if None**2018**

\$ Bil.	Mil.	Thou.	Dol.

4. Other Operating Expenses

a. Depreciation and amortization charges - Include depreciation charges taken against tangible assets owned and used by this firm, tangible assets and improvements owned by this firm within leaseholds, tangible assets obtained through capital lease agreements, and amortization charges against intangible assets (e.g., patents, copyrights). **Exclude** impairment 1831

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b. All other operating expenses - All other operating expenses not reported above, unless specifically excluded in the general instructions. **Include** office postage paid and package delivery. **Exclude** purchases of merchandise for resale and non-operating expenses. **If this item is greater than 20% of the total operating expenses, specify the primary source of the expenses below** 7

1879

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5. TOTAL OPERATING EXPENSESSum of lines **1a through 4b** 1900

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15 HOTEL MANAGEMENT

A hotel management company is a firm that both manages and provides the operating staff for short-stay accommodation establishments (e.g., hotels and motels) on a contractual basis.

A. Did this firm manage any hotels for another firm (a third party) in 2018?
☐ Yes

☐ No - Go to **17**
2018**Number**

B. How many of the hotels managed by this firm were owned or leased by ANOTHER firm (a third party) in 2018? 8013

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C. What was the total value of the following for the hotels reported in 15B in 2018?

1. Revenue
Refer to includes and excludes in **6**. 8201

2. Revenues from electronic sources
Include rooms booked online as described in **8A**, **8B**, and **8C**. 8203

3. Operating expenses
Refer to includes and excludes in **14**. 8204

2018			
\$ Bil.	Mil.	Thou.	Dol.

16 Not Applicable.

72101066



- 17 REMARKS** - Please use this space to explain any significant year-to-year changes, to clarify responses, or indicate where data were estimated.

18 CONTACT INFORMATION

Name of person to contact regarding this report <i>(Please print)</i>					Title				
Telephone	Area code	Number		Extension	Fax	Area code	Number		
			-					-	
E-mail address					Website address				

THANK YOU for completing your 2018 ANNUAL SERVICES REPORT.
We suggest you keep a copy for your records.

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