If necessary, please make address label corrections in the boxes below.


This information is collected under the authority of the Statistics Act, Revised Statutes of Canada, 1985, Chapter S-19.
COMPLETION OF THIS QUESTION VAI II , S A LEG.' 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 and other government departments 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 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
$\qquad$
$\qquad$
$\qquad$
2. Please check the one main activity which most accurately represents your main source of revenue.
Other performing arts company
(include multidisciplinary, circus, ice skating show, variety show, magic show, etc.)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, 2007 and March 31, 2008. Please indicate below the period covered by this questionnaire.
yyyy

dd

yyyy

mm

dd
$\square$
2. If the reporting period does not cover a full year, please check the reason(s) below:
00311 seasonal operations
$2 \square$ new business
${ }^{3} \square$ change of fiscal year
$4 \square$ change of ownership
$5 \square$ ceased operations

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.

1. Sales of goods and services (e.g., rental and lea no ac on ( ommis ions, fees, admissions, services revenue)
Report net of returns and allowances.
2. Grants, subsidies, donations and fundraising
3. Royalties, rights, licensing and franchise fees
4. Investment income (dividends and interest)
5. Other revenue (please specify):
6. Total revenue (sum of questions 1 to 5 )

## E-Expenses

|  |  | CAN\$ |  |
| :---: | :---: | :---: | :---: |
|  | Salaries and wages of employees who have been issued a T4 statement 3010 |  |  |
|  | Employer portion of employee benefits medical/life insurance plans, employm | 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 |  |  |  |
| Cost of goods sold, if applicable (purchases plus opening inventory minus closing inventory) |  |  |  |
|  | Office supplies ${ }^{3301}$ |  |  |
|  | 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 charital euo atic is al uestion 22) |  |  |  |
|  | Travel, meals and entertainment ${ }^{\text {t }}$ |  |  |
|  |  |  |  |
| 15. Property and business taxes, licences and permits ${ }^{4410}$ |  |  |  |
| 16. | Royalties, rights, licensing and franchise fees 4440 |  |  |
| 17. Delivery, warehousing, postage and courier |  |  |  |
| 18. | Financial services fees 4325 |  |  |
| 19. Interest expenses ${ }^{4630}$ |  |  |  |
| 20. | Amortization and depreciation of tangible and intangible assets 4520 |  |  |
| 21. Bad debts ${ }^{4542}$ |  |  |  |
|  | All other expenses 4531 <br> (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 |  |  |  |
|  | G, H, I, J and K - Not applic |  |  |

## L - Contact information

Name of person to contact about this questionnaire:
$0026{ }^{1} \square \mathrm{Mr}$.
${ }^{2} \square$ Mrs.
${ }^{3} \square$ Miss
${ }^{4}$
$\square \mathrm{Ms}$

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

Date completed:

mm
dd
$\square$

How long did you spend collecting the data and completing the questionnaire?


## M - Comments



We invite your comments below. Please be assured that we review all comments with the intent to improve the survey.
 ONLY
9913
$\qquad$

9914

$\qquad$

9915 $\square$
$\qquad$

9916 $\qquad$
$\qquad$

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

Visit our website at www.statcan.ca

