



NSCA 2018 Cost of Doing Business Survey

Response deadline: April 13, 2018

ALL SURVEY QUESTIONS MUST BE ANSWERED IN FULL for you to qualify for the free custom report. Incomplete survey responses cannot be tabulated.

If your company is a division of another company, please provide financial information for the communications (low-voltage) portion of your business.

Remember, all financial information you provide is held in strict confidence, and will not be released to NSCA or others.

Company name:

Contact name:

Phone number:

Contact e-mail address:

*(This will be used **ONLY** if we have a question about your responses.)*

Please provide a mailing address where you would like your customized report sent.

Name:

Company:

Address:

City:

State:

Zip:

I. Company Background

1. Please indicate the month and year of your most recently CLOSED fiscal year: Month: Year:
2. In what state/province is your company headquarters located?
3. In what year was your company founded?
4. Please indicate the total number of full-time and part-time staff employed by your company as of your last fiscal year:
A. Total number of full-time staff =
B. Total number of part-time staff = *(If none, please enter a zero.)*

5. Please indicate the total number of SALES staff employed by your company as of your last fiscal year. Please include salespeople, sales managers, and any other staff whose primary responsibility is sales activity:

A. Total number of full-time SALES staff =

B. Total number of part-time SALES staff = *(If none, please enter a zero.)*

II. Market Areas and Activities

6. Which ONE of the following systems/technologies accounted for the largest share of your company's total revenue in your last fiscal year?

a. Audio/Sound Reinforcement

b. Building Automation/Control & Command

c. Collaboration/Unified Communications/
Digital Media

d. Data Communications/Networking/IT/Software

e. Digital Signage

f. Fire Alarm/Emergency Evacuation Systems

g. Low-Voltage Lighting and Control

h. Music/Entertainment

p. Other:

i. Nurse Call/Life Safety/RTLS

j. Paging/Intercom/Commercial Sound/Clocks/Sensors

k. Security/Access Control/Surveillance/
Video Management

l. Soundmasking/Acoustical/Speech Privacy/
Assistive Listening

m. Telephony/VoIP/Hosted & Cloud Voice Solutions

n. Videoconferencing/Hosted & Cloud VC Solutions

o. Video Display/AV Presentation & Control

7. Which ONE of the following vertical markets accounts for the largest share of your company's total revenue in your last fiscal year?

a. Corporate

b. Education

c. Government

d. Health care

e. Manufacturing

f. Houses of worship

g. Other:

8. What percentage of your company's total revenues for your last fiscal year were generated by:

A. Your largest single customer: % of total revenues

B. Your largest single project: % of total revenues

C. New customers: % of total revenues
(These are end-users or contractors of any type that your company did not do business with in the past 10 years.)

9. What percentage of your company's total revenues for your last fiscal year were generated from:

A. Competitive bid projects: % of total revenues

B. Negotiated/direct sales: % of total revenues

← Total must be 100

10. For what percentage of your company's total **projects** in its last fiscal year was it the prime contractor?

A. Percentage of projects where your company was the prime contractor: % *(If none, please enter a zero.)*

11. What is your company's current work backlog (e.g., unfinished work and sales orders yet to fulfill)?

Current work backlog is: \$
(Please express the backlog as a dollar amount. If there is no backlog, please enter a zero.)

12. Please indicate how you would characterize your company's overall financial health for the following time periods:

	Company's financial health for the PAST two years	Company's PRESENT financial health	Company's expected financial health for the NEXT two years
a. Outstanding			
b. Very good			
c. Good			
d. Fair			
e. Somewhat poor			
f. Very poor			
g. Critical			

13. Briefly describe what you anticipate will be the single most significant challenge your company will face in 2018:

III. Balance Sheet and Summary Information

14. Please provide the following balances as of your last fiscal year:

A. Accounts receivable	.....	\$
B. Inventory	.....	\$
C. Current assets	.....	\$
D. Total assets	.....	\$
E. Current liabilities	.....	\$
F. Equity, beginning of fiscal year	.....	\$
G. Equity, end of fiscal year	.....	\$
H. Cash on hand, beginning of fiscal year	.....	\$
I. Cash on hand, end of fiscal year	.....	\$
J. Total sales	.....	\$
K. Total cost of material sold	.....	\$
L. Pre-tax profit/(loss)	.....	\$

IV. Chart of Accounts Information

The following questions are essential for our research. We realize the information requested may be tracked different ways by different companies, so please read each line item carefully, and provide as accurate a response as possible for each line item.

Some items will be automatically computed for you. You cannot override this. If the computed number is not as you want it, please adjust the associated line items.

1) Non-reoccurring sales	\$	(A)
2) Reoccurring sales		
2a) Service	\$	
2b) Contracted maintenance agreements	\$	
2c) Monitoring	\$	
2d) Leasing/rental	\$	
2e) Other recurring fees	\$	
Total recurring sales (sum of 2a through 2e)		(B)
TOTAL SALES (Line A plus Line B)		(C)

NOTE: Line C **MUST** be the same as your answer to question 14J which was:

3) Cost of sales		
3a) Materials <i>(Materials used for the installation of a job and in service work.)</i>	\$	
3b) Direct labor <i>(Labor costs in connection with installation and service plus the supervision of that labor. Include holiday, vacation and overtime pay.)</i>	\$	
3c) Subcontract labor <i>(Work that has been subcontracted to other contractors for job installation or service.)</i>	\$	
3d) Freight <i>(Freight costs on all materials used for a job.)</i>	\$	
3e) Job supplies and miscellaneous job costs <i>(Supplies that are consumed in the installation and service of materials, and all other job related costs not separately identified above including items such as permits, performance bonds, job travel, per diem, etc.)</i>	\$	
Total cost of sales (sum of 3a through 3e)		(D)
GROSS PROFIT (Line C minus Line D)		(E)

Question continued on following page

4) Operating, selling, and administrative expenses

4a) Salaries <i>(All compensation not included in 3b. Direct labor, including salaries, bonuses, and commissions. Include officers' compensation, if applicable.)</i>	\$
4b) Payroll taxes <i>(Payroll taxes on salaries including FICA, federal & state unemployment taxes.)</i>	\$
4c) Employee benefits <i>(All other employee benefit costs including health/life insurance, employee welfare, etc.)</i>	\$
4d) Insurance <i>(General liability, casualty, worker's comp, vehicle and other insurance costs.)</i>	\$
4e) Operating supplies <i>(Small tools, warehouse supplies, etc.)</i>	\$
4f) Rent <i>(Rentals paid for facilities and equipment.)</i>	\$
4g) Utilities and communications <i>(Heat, light, power, water/sewer, telecommunications, etc.)</i>	\$
4h) Depreciation <i>(Depreciation for equipment, buildings, computers, etc.)</i>	\$
4i) Repairs and maintenance <i>(Repair and maintenance and building facilities and equipment.)</i>	\$
4j) Vehicle expenses <i>(Vehicle operating costs including gas, oil, repairs, licenses, etc.)</i>	\$
4k) Outside services <i>(The cost of services provided by an outside organization such as accounting, legal, computer services, subcontracted estimating work, etc.)</i>	\$
4l) Office expenses <i>(All costs related to the general operation of the office such as stationary, printing, copying, forms, postage, etc.)</i>	\$
4m) Marketing/promotion <i>(All costs related to marketing, promotion, and advertising)</i>	\$
4n) Training and education <i>(Cost of conventions, seminars, training, etc. Include all travel related costs.)</i>	\$
4o) All other expenses <i>(The cost of any expenses not identified in items 4a-4o.)</i>	\$

Total operating, selling and administrative expenses
(sum of items 4a through 4o) **(F)**

OPERATING INCOME (Line E minus Line F) **(G)**

5) Net interest expense **(H)**
(Interest on company debts less any interest or dividend income earned.)

PRE-TAX PROFIT (LOSS) (Line G minus Line H) **(I)**

NOTE: Line I **should** be the same as your answer to question 14L which was:

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Thank you! Please return your survey by ONE of the following means:

1. Print and mail to: AWP Research
ATTN: NSCA
898 Broad Oaks
Herndon, VA 20170-3600
2. Attach your completed survey to an email and send it to: NSCA@awpresearch.com

IMPORTANT: If you submit your file via email, please do the following:

- 1) Save your file using your COMPANY NAME as the file name.
- 2) Please check the file after saving to ensure all your responses have been saved.
- 3) Please PRINT your response and retain a copy in case there are problems with your emailed file.

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