

WORKSHEET

The 2014-2015 NPOA FINANCIAL BENCHMARKING SURVEY

By completing this survey by **March 31, 2014 Deadline**, you will be entitled to a FREE copy of one of the industry's most valuable studies. However, you must follow the instructions carefully to be eligible to receive your free copy. This PDF is intended to be used solely as a *worksheet*.

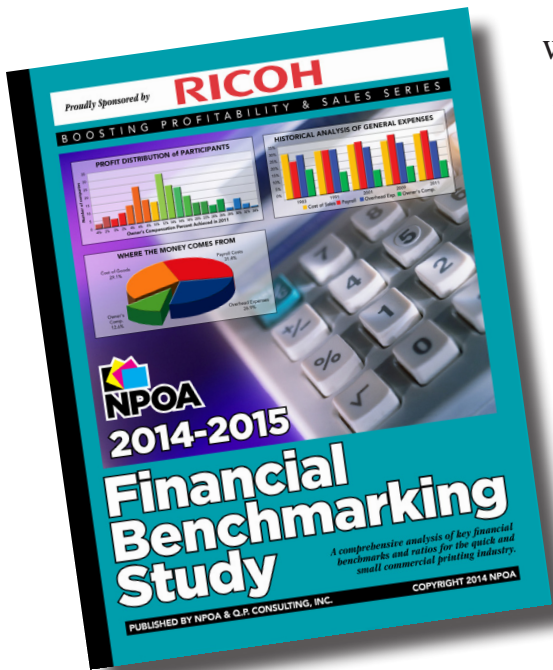
When completed, you can either return to the web page from where you downloaded this PDF, or to the following address:

www.surveyadvantage.com/2014NPOAbenchmarksurvey.

Transferring the data from this worksheet to our electronic survey form should take no more than 12-15 minutes –

We promise! Remember, the deadline is **March 31, 2014**.

Please retain this worksheet for your records.



IT IS IMPERATIVE that you report and use accurate data for this survey. Please report figures for your latest completed fiscal year. For most firms, this would

be year-end 2013 data. Report whole U.S. dollars. **DO NOT** leave fields blank. Enter a “0” if you do not incur that expense or cost. Q.P. Consulting, Inc. and NPOA guarantee absolute confidentiality of all data received. All electronic forms are destroyed immediately upon completion of data entry.

PART I - Basic Company Data:

1-6. Basic Company Data - Please provide the following information for sorting and other statistical purposes. Confidentiality of all information is absolutely guaranteed by Q.P. Consulting, Inc. (Enter # of FT equivalent employees, including owner; EXAMPLE: (3) 20-hr employees = 1.5 FT)

2013 Gross Sales (all locations)? (#1) (See Part II, #1 to Enter This Data)	State (#2)	# of Locations (#3)	# of Sq. Ft. (#4)	Firm Age? (#5)	# of Employees (#6)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

7. Market Size - Population of your immediate market area:

Rural (Less than 25,000)
 Small (25-100 M)
 Medium (100-300 M)
 Large (300-1 million)
 Major (1 Million +)

8. Annual Sales: Please enter your total annual sales (whole \$\$\$), for all locations listed in question #3:

2009 Sales	<input type="text"/>
2010 Sales	<input type="text"/>
2011 Sales	<input type="text"/>
2012 Sales	<input type="text"/>

9. On Account Sales: Please provide your best estimate as to the percent of total Charge Sales (on account) vs. Cash Sales.

Charge Sales	Cash Sales	Total
<input type="text"/>	<input type="text"/>	<input type="text"/>

10. Outside Sales Reps: Please indicate the number of full-time equivalent outside sales representatives (excluding owners) employed in all locations indicated in question #3 for the year 2013:

of Sales Reps.

11. Sales Generated: Please estimate as accurately as possible, the total amount of sales generated in 2013 by the outside sales reps. listed in question #10 above:

2013 Sales by Sales Reps.

12. Association Affiliation: (Please check all that apply.)

NPOA Member
 Printowners List Serv
 NAPL/NAQP Member
 PIA Member
 Craftsman Club
 Other

13. Are you an:

Independent
 Franchise

14. If a Franchise, which one?

- Allegra
- AlphaGraphics
- CPRINT
- Franklins
- Inkwell
- Signal Graphics
- Kwik Kopy
- Minuteman
- PIP
- Sir Speedy
- Other

15. Peer Groups: Whether independent or a franchise, are you also a member of a *performance, peer, or board group* as well?

- Yes No

16. Projected 2014 Sales?: Please estimate as best as you can your projected sales for 2014:

2014 Projected Sales

17. Included in Pre-Press or Graphics?: On the next page, you are asked to provide "Pre-Press or Graphics Sales." Please check below those services or categories that you would normally credit to this department (*Check all that apply*).

- Stripping/plateburning RIP Fees - Color & BW copies Large Format Prints CTP
 Web-to-Print Other

18. Rating Industry Growth: Please rate the following sales categories as to their relative potential for growth and profits within the next 12-18 months using a scale of 1-9. (1=very poor with low/negative profits; 5=average profitability & growth; 9=excellent growth & profit potential).

DTP & Graphic Services	<input type="text"/>
Offset Printing, 1-4 Colors	<input type="text"/>
BW Copying Services	<input type="text"/>
Color Copying Services	<input type="text"/>
Bindery/Finishing Services	<input type="text"/>
Mailing Services	<input type="text"/>
Brokered Services	<input type="text"/>
Sign-Making/Large Format	<input type="text"/>
Other Services	<input type="text"/>

Part II -- 2013 Year-End Profit and Loss Statement:

1. TOTAL GROSS SALES: excluding sales tax

Pre-Press & DTP Services (See Part I, question #17, to clarify what you are including in these sales)	
Printing Sales	
B&W Digital Printing/Copying Sales - (Include sales from all B&W high-speed and convenience copiers)	
Color Digital Printing/Copying Sales	
Bindery & Finishing Sales	
Mailing Services Sales (all), excluding postage income	
Sign-Making/Large Format	
Brokered Sales (Misc. products, fulfillment services, etc)	
Other Sales (Fulfillment, etc.)	
Total	

2. COST OF GOODS: (*Copier Service Costs: this expense category reflects a change from prior Operating Ratio Studies in that basic maintenance and meter clicks are now included in Cost of Goods rather than in Overhead Expenses. If your supply and toner costs are included in your maintenance fee they can remain under this heading; otherwise, report them separately under "Other Materials."*)

Paper	
Copier Service Costs - Include all basic maintenance (service) costs here, including all meter click charges	
Other Materials - Including ink, toner, plates, film, etc.	
Outside Services - Outside composition, artwork, bindery, service bureau output, etc.	
Outside Purchases - Brokered copying & printing, business cards and wedding invitations, etc.	
Total	

3. TOTAL PAYROLL COSTS: (*Total Payroll Costs: As a further clarification, if there is more than one working owner, then just one working owner with his/her salary & fringes is excluded from total payroll entry. The other owner or owners (if not already expensed elsewhere) is calculated at a comparable net value of their job and added to the entry for total payroll costs.*)

TOTAL PAYROLL COSTS (Excluding one working owner) - including all health insurance, payroll taxes, FICA, workers' comp., etc.	
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4. OVERHEAD EXPENSES: *(Building Rent - If you personally own the building and lease/rent it to the business, enter that amount here.)*

Accounting and Legal Fees	<input type="text"/>
Advertising - All print, TV and radio advertising expenses here, excluding franchise advertising fees	<input type="text"/>
Advertising (Franchises Only) - Contributions, if any, to national franchise advertising funds or programs	<input type="text"/>
Amortization Expenses - Amortization of "goodwill" and initial franchise fees in the case of a franchise	<input type="text"/>
Auto Lease and/or Depreciation Payments	<input type="text"/>
Auto Operating Expenses - fuel, repairs & insurance	<input type="text"/>
Building Rent - If you personally own the building, please enter the fair market value rent; otherwise the rent amount paid to landlord	<input type="text"/>
Depreciation - equipment only - do not include vehicle depreciation here	<input type="text"/>
Franchise Fees - total annual payments, excluding national advertising fees (Place those under advertising-Franchises only)	<input type="text"/>
Interest	<input type="text"/>
Lease & Rental Expenses - Copiers - Do not include maint. or meter clicks here. See "Cost of Goods," Part II, question #2	<input type="text"/>
Lease & Rental Expenses - Other Equipment - Include computers, presses, bindery equipment, etc.	<input type="text"/>
Office Supplies	<input type="text"/>
Repairs and Maintenance - Includes all repair and maintenance costs for both building and equipment	<input type="text"/>
Travel and Entertainment	<input type="text"/>
Utilities	<input type="text"/>
All Other Overhead Expenses not specifically listed above	<input type="text"/>
Total	<input type="text"/>

5. TOTAL EXPENSES

(Add lines 2+3+4)

NET OWNER'S COMPENSATION *(Net Owner's Compensation is defined as that money which is left over after covering all expenses of the business, but before paying the owner a salary or giving the owner any fringe benefits.)*

(Subtract Line 5 from line 1)

Part III - 2013 Year-End Balance Sheet Data

Assets

CURRENT ASSETS:	
1. Cash	<input style="width: 95%;" type="text"/>
2. Accounts Receivable	<input style="width: 95%;" type="text"/>
3. Inventory	<input style="width: 95%;" type="text"/>
4. Other Current Assets	<input style="width: 95%;" type="text"/>
5. TOTAL CURRENT	<input style="width: 95%;" type="text"/>
NON-CURRENT ASSETS	
6. Equipment, Furniture, Vehicles, Etc.	<input style="width: 95%;" type="text"/>
7. Less Accumulated Depreciation of: (enter \$0 or leave blank if no depreciation. Otherwise, please enter as a negative number. i.e. -10,000.)	<input style="width: 95%;" type="text"/>
8. Net Equipment, Furniture, Vehicles (Line 6 minus Line 7)	<input style="width: 95%;" type="text"/>
9. Real Estate	<input style="width: 95%;" type="text"/>
10. Less Accumulated Depreciation of: (enter \$0 or leave blank if no depreciation. Otherwise, enter as a negative number. i.e. -10,000)	<input style="width: 95%;" type="text"/>
11. Net Real Estate (Line 9 minus Line 10)	<input style="width: 95%;" type="text"/>
12. All Other Non-current Assets (Loans due from stockholders, cash-value life insurance, deposits, etc.)	<input style="width: 95%;" type="text"/>
13. TOTAL NON - CURRENT ASSETS (Lines 8+11+12)	
	<input style="width: 95%;" type="text"/>
14. TOTAL ASSETS (Lines 5+13)	
	<input style="width: 95%;" type="text"/>
Do you personally own the Real Estate out of which you operate this business?	
<input type="radio"/> Yes <input type="radio"/> No	
If yes, Total square feet of this real estate?	
	<input style="width: 95%;" type="text"/>
Fair Market Rent Charged to business?	
	<input style="width: 95%;" type="text"/>

Liabilities & Owner Equity

CURRENT LIABILITIES

1. Accounts Payable	<input style="width: 95%;" type="text"/>
2. Notes Payable (within 12 Months)	<input style="width: 95%;" type="text"/>
3. Other Current Liabilities	<input style="width: 95%;" type="text"/>
4. Total	<input style="width: 95%;" type="text"/>

LONG-TERM LIABILITIES

5. Notes Payable (After One year)	<input style="width: 95%;" type="text"/>
6. Other Long-Term Liabilities	<input style="width: 95%;" type="text"/>
7. TOTAL LONG-TERM LIABILITIES (Lines 5+6)	<input style="width: 95%;" type="text"/>
8. TOTAL LIABILITIES (Lines 4+7)	<input style="width: 95%;" type="text"/>
9. Total Owner's Equity (<i>Total Assets less Total Liabilities</i> (Line 14 [from Assets page] minus Line 8 [Liabilities Page])	<input style="width: 95%;" type="text"/>

SPECIAL QUESTION ON HEALTHCARE COSTS - Recognizing that healthcare benefits provided by employers represent a growing and significant expense for employers, NPOA is requesting the following information: Please enter the total amount your company spends on healthcare coverage on behalf of your employees. This figure would include all insurance premiums and other contributions or expenses paid by the company on behalf of its employees, **less portions paid by the employees themselves**. Please exclude any payments, premiums or expenses incurred or paid for or on behalf of the owner.

Total Healthcare Expenditures made in 2013 on behalf of all employees, excluding owner

Do you expect your healthcare costs to:

	Increase	Decrease	Percent Change
Estimated costs will	<input type="radio"/>	<input type="radio"/>	<input style="width: 100px;" type="text"/>

Number of Employees Covered - Since some employees may be covered under a spouse's or partner's plan, please provide the exact number of employees covered by the above expenditure?

Number of Employees Covered:

Last Step!

In order to receive your free copy, we will need your complete contact information to be entered on the electronic submission form at:
www.surveyadvantage.com/2014NPOAbenchmarksurvey

Your Name:	<input type="text"/>
Company Name:	<input type="text"/>
Email Address:	<input type="text"/>
Phone Number:	<input type="text"/>
Street Address:	<input type="text"/>
City:	<input type="text"/>
State:	<input type="text"/>
Zip Code:	<input type="text"/>