

Film Production Tax Credit Program Final Production and Economic Impact Report

Provide this form to your CPA when the production company commissions the Cost Verification Report for the project. Submit the Cost Verification Report and Final Production and Economic Report to DEED by email at FilmInMN.DEED@state.mn.us within 30 days of the cost verification report completion date. Tax Credit Certificates will not be issued until all reporting requirements have been fulfilled.

Section I. Business name and identifying information

| Production company legal name ("Applicant"): | | | | | |
|--|------------------------|------------------------|------------------------|--|--|
| DBA/Trade name/Previous name (if any): | | | | | |
| Federal Tax ID number: | | | | | |
| Minnesota Tax ID number: | | | | | |
| | | | | | |
| Section II. Corporate officer | certifying this report | | | | |
| An officer of the corporation report is to the best of the officer that will sign the ce | r knowledge true, cor | | | | |
| First name: | Last name: | Title: | | | |
| Phone:E | mail address: | | | | |
| | | | | | |
| Section III. Project informat | ion | | | | |
| Title of project: | | | | | |
| Type of project (check one |): | | | | |
| ☐ Feature Film | □Documentary | ☐National Television/I | nternet | | |
| ☐ TV/internet Pilot | □TV/Internet Comme | rcial | ☐ Post-production only | | |

| | Where in | Minnesota | was the | production | office | located? |
|--|----------|-----------|---------|------------|--------|----------|
|--|----------|-----------|---------|------------|--------|----------|

| Where in Minnesota d | id principal photography | take place (list | specific key | locations)? |
|----------------------|--------------------------|------------------|--------------|-------------|
| | | | | |

| Did post-production | n occur in | Minnesota? |
|---------------------|------------|------------|
|---------------------|------------|------------|

| NI. | |
|--------|--------------|
| NΟ | u res |

Complete the table with the actual production schedule that occurred.

| | Minnesota only | | | All other locations | | |
|---------------------|----------------------------|--------------------------|-------------------|----------------------------|--------------------------|-------------------|
| | Start date (mm/dd/yyyy) | End date (mm/dd/yyyy) | Number of days | Start date (mm/dd/yyyy) | End date (mm/dd/yyyy) | Number of days |
| Pre- production | | | | | | |
| Production | | | | | | |
| Post- production | | | | | | |
| Totals | | | | | | |



Section IV. Financial information

Use the Cost Verification Report to complete the table below. Sales and use tax paid reported in the second column is inclusive of qualified and non-qualified spend that occurred in Minnesota. You will be asked to report non-Minnesota spend after the table; the sum of qualified Minnesota spend, non-qualified Minnesota spend, and non-Minnesota spend should balance with the total project costs*.

| Category | Sales and use tax paid | Total qualified amount spent in Minnesota including taxes | Total non-qualified amount spent in Minnesota including taxes |
|--|------------------------------|---|---|
| Lodging | | | |
| Transportation | | | |
| Air Fare | | | |
| Per Diem and Housing Allowance | | | |
| Personnel | | | |
| Talent | | | |
| Sets, Props, and Wardrobe | | | |
| Production Office Rental | | | |
| Studio Rental | | | |
| Digital Media, Film, Tape, and Processing | | | |

| Category | Sales and use tax paid | Total qualified amount spent in Minnesota including taxes | Total non-qualified amount spent in Minnesota including taxes |
|-------------------|------------------------------|---|---|
| Food and Catering | | | |
| Location Expense | | | |
| Post Production | | | |
| Other | | | |

| ☐No (if no, skip to the next question) ☐Yes | (if yes, provide detail below) |
|--|--------------------------------|
| Provide a description and dollar amount (rounder You may consolidate multiple invoices from the | • |
| | |
| | |
| | |
| | |
| What was the amount of non-Minnesota spend? | \$ |
| What was the total project cost*? \$ | |
| How many room nights of lodging occurred in Mi | nnesota? |
| Were any fees paid to municipal entities in Minn | esota? |
| □No □Yes (if yes, how much? \$ |) |
| | |



Section IV. Employment information

Complete the table below for all payroll related expenses that occurred in Minnesota. A record of the employee's exempt or non-exempt status can be found by referencing the signed copy of the Employee Notice that the employer maintains on file pursuant to the Minnesota Wage Theft Prevention Act. For an exempt employee enter 8.0 hours for each work day up to 40 hours per each payroll week. For non-exempt employees enter actual number of hours worked.

| | | Employe | es | |
|--|----------------------------------|--------------------------------------|---------------------------------------|---|
| | Exempt Minnesota residents | Not-exempt Minnesota residents | Exempt non- Minnesota residents | Not-exempt non- Minnesota residents |
| Number | | | | |
| Salary and wages paid | | | | |
| Number of hours worked | | | | |
| What is the total amount of Minnesota income tax paid? \$ What is the total amount of unemployment insurance paid? \$ | | | | |
| What was the total value of contracts provided pursuant to independent contractor agreements for this project? \$ | | | | |
| Section V. CPA preparing the Cost Verification Report | | | | |
| CPA Firm: | | | | |
| CPA certificate number: Expiration date: | | | : | |
| First name: | La | st name: | Title: | |
| Phone: | Email a | ddress: | | |



Section IV. Business Acknowledgement and Certification

Tennessen Warning Notice: We are requesting data from you to determine if you are eligible for an award under the Film Production Tax Credit Program. You are not required to provide the requested information, but your failure to do so may result in DEED's inability to evaluate your eligibility for an award pursuant to the criteria developed under the program's enabling legislation and rules. The data you provide to us is classified as private or nonpublic data and cannot be shared without your permission, except as specified by statute or court order.

Data Privacy Notice: Certain data required by this form is classified as private or nonpublic data under Minn. Stat. § 13.591, subd. 1. Some other data that we collect in this application is classified as private data under Minn. Stat. § 116J.401, subd. 3.

Data Privacy Acknowledgement and Certification:

- 1. The undersigned certifies that any statement or representation in this report, or information provided herein, is true correct, and complete to the best of their knowledge; and
- 2. I acknowledge that I have reviewed the Cost Verification Report and that it is a true and correct representation of the amount of eligible production costs that are directly attributable to the production of this film project in Minnesota; and
- 3. I certify that the DEED approved static or animated logo lasting approximately five seconds is visibly displayed in the end credits before the below-the-line crew crawl and will continue to be displayed for the life of the project; and
- 4. I affirm that, as an officer of the business, I have the authority to sign this form on behalf of the company.

| Printed name and title: | |
|-------------------------|-------|
| | |
| Signature: | Date: |