

Final Production and Economic Impact Report Minnesota Film Production Tax Credit Program

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 by email to <u>MNfilmtaxcredit.tour@state.mn.us</u> 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 is required to certify that the information contained in this report is to the best of their knowledge true, correct, and complete. Who is the corporate officer that will sign the certification form?

First name: ______ Last name: ______ Title: _____

Phone: _____Email address: _____

Section III. Project information

Title of I	project:				
Type of	project (check one):				
	Feature Film	Documentary	Nation	al Television/Ir	nternet
	TV/internet Pilot	IV/Internet Commer	cial	Music video only	Post-production

Where in Minnesota was the production office located?

Where in Minnesota did principal photography take place (list specific key locations)?

Did post-production occur in Minnesota?

 \Box No \Box Yes

Complete the table with the actual production schedule that occurred.

	Minnesota only			All other locations		
	Start date (mm/dd/yyyy)		Number of days	Startdate (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 are 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			
Airfare			
Per Diem and Housing Allowance			
Personnel			
Talent			
Sets, Props, and Wardrobe			
Production Office Rental			
Studio Rental			
Equipment 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			

Was an amount entered above for the other category?

 \Box No (if no, skip to the next question) \Box Yes (if yes, provide detail below)

Provide a description and dollar amount (rounded to the nearest thousand) for each invoice. You may consolidate multiple invoices from the same vendor.

What was the amount of non-Minnesota spend? \$_____

What was the total project cost? \$_____

How many room nights of lodging occurred in Minnesota?_____

Were any fees paid to municipal entities in Minnesota?

 \Box No \Box 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 <u>Minnesota Wage Theft Prevention Act</u>. 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.

	Employees				
	Number of workers	Salary and wages paid	Number of hours worked		
Exempt Minnesota Residents					
Not-Exempt Minnesota Residents					
Exempt non - Minnesota residents					
Not-exempt non - Minnesota residents					
Total above-the- line Minnesota resident					
Total above-the- line non - resident					
Total below-the- line Minnesota resident					

Total below-the-			
line non-resident			
What is the total amou	unt of Minnesota income tax	paid? \$	
What is the total amou	unt of unemployment insurar	ice paid? \$	
	ue of contracts provided pur roject? \$	suant to independent contractor	
Section V. CPA preparin	g the Cost Verification Repor	t	
CPA Firm:			
CPA certificate numbe	er:	Expiration date:	-
First name:	Last name:	Title:	
Phone:	Email address:		

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 Explore Minnesota Film'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 Explore Minnesota Film approved static or animated logo is visibly displayed in the end credits and will continue to be displayed for the life of the project. Television commercials are exempt from logo requirements.; 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