California Film and Television Tax Credit Program 2.0

EXPENDITURE SUMMARY REPORT

Non-Independent Productions

CFC Use Only:		
DATE RECEIVED:		
QUEUE #	CAL #	FISCAL YEAR:
CATEGORY:		

TITLE

New Copyright Reg # _____

PHASE 4

Section 1: APPLICANT INFORMATION

Applicant Entity	Taxpayer ID:	
Contact Name	Contact Title:	
Address:		
City:	State:	Zip:
Country:	Email:	
Phone:	Cell Phone:	Fax:

Parent Company, if applicable	☐ Check here if same as Applicant;	
Name:	Title:	
Company Name:		
Address		
City:	State:	Zip:
Country:	Email:	
Phone:	Cell phone:	Fax:

Section 2: CONTACT INFORMATION

A. Payroll Service		
Company Name:	Paymaster:	
Address		
Email:		Phone:
B. Distributor - Domestic or International		
Company Name:	Contact	
Email:		Phone:
C. Agreed Upon Procedures - CPA Firm Information		
CPA Firm:		
CPA:	License or Permit #	
Address		
Email:		Phone:

Section 3: PROJECT INFORMATION

A. Type of Production

- ☐ Feature Film (Theatrical)
- ☐ Feature Film - Direct to DVD / VOD
- ☐ Movie of the Week
- ☐ Mini-Series
- ☐ Recurring TV Series
- ☐ Pilot
- ☐ New TV Series
- # of episodes
- ☐ TV pilot was initially accepted in the program

B. Production Schedule	
Start Date of Pre-Production:	Start Date of Principal Photography:
New Hiatus Start Date (If applicable) New	Hiatus End Date (If applicable)
End Date of Principal Photography:	End Date of Post-Production:
New Final Element Creation Date:	Projected or Actual Release Date:

Section 4: PRODUCTION SHOOT DAYS AND LOCATION

A. Principal Photography (PP) Days

a. Total PP days in Los Angeles zone:		f. Total PP days:	0
b. Total PP days outside LA zone (in CA):		g. Total % CA PP days (c ÷ f x 100):	#DIV/0!
c. Total CA PP days:	0	h. Estimated total CA 2nd unit / stunt / VFX days:	
d. Total % PP outside LA Zone:	#DIV/0!	i. Total PP facility days:	
e. Total non-CA PP days:		j. Total % PP facility days:	#DIV/0!

B. If shot outside of LA zone, indicate CA counties:

C. If shot outside the State, state(s) or country(s):

Section 5: PRODUCTION STATISTICS

A. Labor Statistics for In-State Work

Total # of Cast Members:		Total Extras / Stand-ins Man-Days**:	
Total Cast Man-Days**:		Total # of Qualified & Non-Qualified CA Residents:	
Total # of "Base" Crew Members*:		Total # of Qualified & Non-Qualified Non-residents:	
Total Crew Man-Days**:		Total # of CA Vendors:	

* Base crew is the average number of staff and shooting crew employed per day.

** The sum of the number of days, full or partial, a person is estimated to work.

B. California Income Taxes Withheld	C. Total Production Spend
Total state income taxes withheld on qualified AND non-qualified wages:	Total California Expenditures (Qualified & Non-Qualified):

C. Visual Effects

Total Worldwide VFX Expenditures		Total CA VFX Expenditures	

D. Employment Diversity Information

Note: Complete the information for cast and crew (do not include extras) to the extent possible and based only upon information provided by the individual cast and crew members in their payroll start information.

	# of Hires		# of Days Worked	
	Male	Female	Male	Female
Asian Pacific				
Black				
Caucasian				
Latino / Hispanic				
Native American Indian				
Unknown / Other				
TOTAL	0	0	0	0

Section 6: Jobs Ratio

Please input original Jobs Ratio from application and actual spend Jobs Ratio as per the CPA performing the AUP.

Jobs Ratio from Application	Jobs Ratio from Actual Spend	Percent Decrease	Differential	Percent Increase
		#DIV/0!		#DIV/0!

Section 7: CREDIT ALLOCATION

Total Qualified Wages		
Total Qualified Non-Wages		
Total Completion Bond Fee no more than 2% of Qualified Expenditures:	0	
Total Qualified Expenditures		#VALUE!

Tax Credit Amount	**20%**	#VALUE!

Section 8: FINAL CREDIT AND SIGNATURE CERTIFICATION

FINAL TAX CREDIT ALLOCATION

Note: Credit allocation applies only to the first $100 million of qualified expenditures for non-independents.

Credit Allocation Letter Amount:	
Total Adjusted Credit Allocation:	#VALUE!
Adjustment for Overstatement: If Applicable	#DIV/0!

FINAL CREDIT AMOUNT: = **#VALUE!**

Section 10: CERTIFICATION

☐ By typing in the applicant's name in the designated box on the Expenditure Summary Report, such action is the applicant's acknowledgement, agreement, and certification that the applicant has read and reviewed the application, including all its attachments and that the content provided in the Expenditure Summary Report by the applicant is true and accurate to the best of his or her knowledge or at least the knowledge of what would be expected of a reasonable person in the same capacity.

Applicant's Name

Applicant's Title

Date