



One Capitol Hill, 3rd Floor - Providence, RI 02908 - (401)222-3456 Steven Feinberg, Executive Director

RHODE ISLAND FILM & TV MOTION PICTURE PRODUCTION TAX CREDIT FINAL APPLICATION

Identification Num	ber (Office Use On	y)			
Feature Film	TV Movie/Pilot	TV Series	Commerc	cial M	usic Video
Documentary	Web Series	Other			
	(pi	ease check one)			
Name and Mailing	Address of Produc	tion Company:			
Name of Production 0	Company				
Address		City	State	Zip Code	Country
Contact Person		Title		Telephor	e Number
Production Compa	any's Rhode Island	Domiciled Addres	s:		
Address		City	Zip Code	Effe	ective Date
Name of Production	on:				
Federal Taxpaver	Identification Numb	er:			

Name of Rhode Island Banking Institution Address City Zip Code Contact Person Telephone Number Title **Location of Soundstage, if applicable:** Address Zip Code City State Country Brief Background of Company/Companies Involved in Production: **Brief Story Synopsis:**

Rhode Island Banking Institution:

Total Rhode Island Production Budget:				
Principa	I Photography Start Date:			
RI Produ	uction Activity Completion Date:			
	e reflects the year during which the tax credit will be applied			
Number	of principal and ongoing photography days in Rhode Island or, for live theatrical			
producti	ions, length of theatrical run:			
Number	of principal and ongoing photography days outside of Rhode Island:			
-	ted Amount of Motion Picture Tax Credit:			
* Total RI	eligible Production Budget x 0.30 = Tax Credit Amount			
	"ABOVE THE LINE" PERSONNEL			
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Credits:				
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Name:				
Credits:				

"ABOVE THE LINE" PERSONNEL

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INTERNSHIPS Briefly describe or attach additional information on your participation in internship programs offered by the State of Rhode Island, Rhode Island colleges, universities, labor organizations and non-profit organizations associated with the motion picture industry:
and non-pront organizations accordated with the motion picture industry.
Number of Interns:
TRAINING PROGRAMS Briefly describe or attach additional information on your participation in training programs offered by Rhode Island colleges, universities, labor organizations and non-profit organizations associated with the motion picture industry:
Number of Training Program Participants:

DIVERSITY PROGRAMS Briefly describe or attach additional information on your participation in diversity programs offered by Rhode Island colleges, universities, labor organizations and non-profit organizations associated with the motion picture industry designed to promote and encourage training and hiring of Rhode Island residents who represent the diversity of the Rhode Island population:

REQUIRED DOCUMENTATION (PLEASE ATTACH)

Total Number of Rhode Island Residents Hired:

Secretary of State Articles of Corporation

Number of Minorities Hired: _____

Letter of Good Standing from Rhode Island Division of Taxation Certificate of Disclosure of Corporation or LLC Final Screenplay Letter of Intent of Viable Distribution signed by a major theatrical exhibitor or television network or cable station

Calendar of days each "above the line" personnel (i.e.; Director, Producers, Writers and Featured Actors) of the production arrived, performed work in and departed Rhode Island Daily Production Schedule

Cost Report (example under All Forms at www.film.ri.gov)

Detailed RI Budget

Accountant's Certification of Cost Report

Production Tax Credit Information Request Form

Diversity Tracking Chart (example under All Forms at www.film.ri.gov)

2 USB thumb drives/DVD's of the finished product (to the Film Office only).

By signing below, I/we understand that, along with this completed document and required documentation, in compliance with the Rules and Regulations, I/we must provide screen credit to the Rhode Island Film & Television Office using the exact language and logo as follows:

With grateful acknowledgement to the State of Rhode Island and Steven Feinberg, the Rhode Island Film & Television Office



The Rules and Regulations definition of screen credit is as follows: "Screen Credit' means a Motion Picture company engaged in a State Certified Production shall accord the State of Rhode Island, The Rhode Island Film & Television Office, along with the approved name and title of the Film Office Director, at the Film Office Director's sole discretion, a credit on screen "With grateful acknowledgement to" in the end titles of the Motion Picture with all other characteristics (including, without limitation, size, form, placement and duration) of such credit that equal to end credit of principal actor."

I/we also understand that I/we must provide the Rhode Island Film & Television Office two (2) physical copies of the finished production via USB thumb drive or DVD/Blu-Ray Disc. * theatrical productions exempt.

Under penalty of perjury, I/we declare that I/we have examined this form, including any accompanying documents and information, and to the best of my/our knowledge, the information and statements are correct and complete. I understand that providing false or misleading information is a violation of law and may subject me/us to legal penalties.

Production Company:		
Signature of Authorized Agent	Print Name of Authorized Agent	
Title of Authorized Agent	 Date	

IF THE INFORMATION PROVIDED HEREIN SHOULD BE CONSIDERED CONFIDENTIAL AND EXEMPT FROM PUBLIC DISCLOSURE PURSUANT TO RIGL §38-2-2(4)(B), PLEASE CHECK AND INITIAL HERE

Please submit Final Application and documentation to:

Steven Feinberg, Executive Director Rhode Island Film & Television Office One Capitol Hill, 3rd Floor Providence, RI 02908

and

Donna Dube, Principal Revenue Agent Rhode Island Division of Taxation One Capitol Hill, 1st Floor Providence, RI 02908