Motion Picture Credits

2015

Include this completed form and your Commerce post-approval document with your return.

Name as s	shown on Form 140, 140	120S, 120X or 165			ding [M, M D D 2 0 Y Y]. Social Security or Employer Identification Number			
Part 1	Individual Who	Will Maintain Records of						
Ivallie			Current Address – number and street					
Phone Number (with area code)			City, Town or Post Office			State	ZIP Code	
Part 2	Listing of Post-	Approved Productions					_	
received		npanies, complete this section oval. If you have more that						
		ation	tion (b		it Amount			
	(a)1 Allocation Year	(a)2 Post-Approval Date	(a)3 Post-Approval Numbe	r				
1	YYYY	M,MID,DIY,Y,Y,Y				0	0	
2	YYYY	M,M,D,D,Y,Y,Y,Y				0	0	
3	Aggregate total from	all additional schedules		3		0	0	
4	_	through 3		4		0	0	
Part 3 5	The S corporation has Claim the credit for OR	credit Election and Share as made an irrevocable election or motion picture production corresponding production corresponding to the co	on for the allocation ye costs as shown on Par	ar <u>Ľ</u> t 2, li	ne 4 (for the allo	ocation y	ear mentioned	
Sign	ature		Title				Date	
		he shareholders, complete lin Form 334. Provide each sha						
6	Name of shareholder	r:						
7	Shareholder's TIN:	L	٦			Г		
8	Shareholder's share	of the available credit for mot	ion picture production	costs	s from Part 2, lir	ne 4	8	00
9	Arizona income:	of the amount of motion pictuders of an S corporation: If yo				e the		
		B, line 9 on your Arizona incom					9	00

Name (as shown on page 1)		TIN			
Part 4	Partner's Share of Credit				
	lines 10 through 12 separately for each partner. Furnish each partner with a copy of the post-approval document from Commerce.	ith a copy of pages 1 and 2 o	of Form 3	334. Provide	e each
10	Name of partner:				
11	Partner's TIN:				
12	Partner's share of the available credit for motion picture production cos	•	12		00
Part 5	Available Credit Carryover				
nclude F	orm(s) 334-1 to detail lines 15 and/or 18.				
13	Allocation year: See instructions		13	2010	
14	Original credit amount		14		00
15	Credit transfers received: Include schedule		15		00
16	Available credit: Add lines 14 and 15		16		00
17	Amount previously used		17		00
18	Credit transferred to other taxpayer(s): Include schedule		18		00
19	Amount unallowable: See instructions		19		00
20	Available carryover: Subtract the sum of lines 17 through 19 from line	16	20		00
21	TOTAL AVAILABLE CARRYOVER: Enter the amount from line 20. • Corporations, exempt organizations with UBTI, and S corporation: A Form 300, Part 1, line 13, column (b).	lso enter this amount on			
	 Individuals: Also enter this amount on Form 301, Part 1, line 19, colu 	ımn (b)	21		00

Name (as shown on Form 334):			TIN:		Page of
Form 334-1 Sc	chedule of Cre	dit Transfers			2015
List the credit for motion picture production costs that you either received				Applies to al	location year: 2010
Part 1 Credits Received From Other Entities: List	the credits other en	tities have transferre	ed to you.		
1 Name of Transferor	TIN	(a) Commerce Post-Approval Number		(b) Transfer	(c) Credit Received from Transferor
Name of Motion Picture Production Company	TIN			Date D D 2 0 Y Y	\$
2 Name of Transferor	TIN		171 171	0 0 12 0	
Name of Motion Picture Production Company	TIN		M M	D D ₁ 2 0 Y Y	\$
3 Name of Transferor	TIN		171 171	0 0 2 0	Ψ
Name of Motion Picture Production Company	TIN		M M	D D ₁ 2 0 Y Y	\$
4 Name of Transferor	TIN		171 171	0 0 2 0 1 1	Ψ
Name of Motion Picture Production Company	TIN				
			IVI IVI	D D 2 0 Y Y	\$
5 TOTAL: Add lines 1 through 4 in column (c)					\$
Part 2 Credits Transferred to Other Entities: List the	ne credits vou trans	ferred to other entiti	Δς		
6 Name of Motion Picture Production Company	TIN	(a)	(b)	(c)	(d)
		Latest Taxable Year	Amount of Credit	Amount of Credit	Credit Balance
Name of Transferee	TIN	in Which You Applied Credit	Available for Transfer	Transferred	
Commerce Post-Approval Number: Transfer Date:	MM _I D D _I 2 0 Y Y		\$	\$	\$
7 Name of Motion Picture Production Company	TIN				
Name of Transferee	TIN				
Commerce Post-Approval Number: Transfer Date:	MM _I D D _I 2 0 Y Y		\$	\$	\$
8 Name of Motion Picture Production Company	TIN				
Name of Transferee	TIN				
Commerce Post-Approval Number: Transfer Date:	MM _I D D _I 2 0 Y Y		\$	\$	\$
9 Name of Motion Picture Production Company	TIN				
Name of Transferee	TIN				
Commerce Post-Approval Number: Transfer Date:	MM _I D D _I 2 0 Y Y		\$	\$	\$
10 TOTAL: Add lines 6 through 9 in columns (b) through (d)			\$	\$	\$
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