

For OED Film Office Use Only  
Production Project Number: 09-002

**APPROVED**

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STATE OF ALASKA  
ALASKA FILM OFFICE  
550 West 7th Avenue, Suite 1770  
Anchorage, AK 99501  
907-269-8190

OCT 21 2009

DW

ALASKA FILM PRODUCTION TAX CREDIT  
APPLICATION FORM

APPLICANT INFORMATION

Name of Production Company (Applicant) <b>KAOS ENTERTAINMENT, LLC</b>		Employer Identification Number [REDACTED]	
Doing Business As (If Applicable)			
Address <b>1601 COLORADO AVENUE</b>		City/State/Zip <b>SANTA MONICA, CA 90404</b>	
Applicant Type	<input type="checkbox"/> Corporation <input type="checkbox"/> Trust	<input checked="" type="checkbox"/> LLC <input type="checkbox"/> Partnership	<input type="checkbox"/> Sole proprietorship
Designated production company representative <b>MELANIE BAINES</b>	Telephone <b>310 998 3288</b>	Fax <b>310 998 3289</b>	Email <b>mbaines@kaosent.com</b>

PRODUCTION INFORMATION

Name of production <b>GRIZZLY LAND</b>	Expected or actual release or premiere date <b>NOT DETERMINED YET</b>		
Type of production	<input type="checkbox"/> Feature film <input type="checkbox"/> Television series	<input checked="" type="checkbox"/> Documentary <input type="checkbox"/> Commercial/advertisement	<input type="checkbox"/> Other (identify below)
Actual Production Schedule	Alaska		
	Start Date	End Date	
Pre-production	<b>NOT IN ALASKA</b>		
Production	<b>06.11.09</b>	<b>09.26.09</b>	
Post Production	<b>NOT IN ALASKA</b>		
Total Budget	[REDACTED]	Actual Alaska expenditures <b>\$178,393.58</b>	
Number of Alaska jobs created (full time equivalent) <b>3</b> ALTHOUGH PAID THROUGH KATMAI BEAR TOURS	Avg. duration of Alaska employment (in months) <b>3.5 months.</b>		
Total number of principal photography days <b>72</b>	Number of principle photography days in Alaska <b>72</b>		

Identify communities in Alaska where you incurred expenditures for services, purchase real property or purchase/lease/rent tangible property from an Alaska business (3 AAC 188.040)(f).

**HOMER & KATMAI NATIONAL PARK/HALLO BAY**

ACTUAL PRODUCTION CREDIT REQUESTED		
1	Wages and salaries (include amounts from 1a and 1b)	\$ 60,100.00
	1(a) paid to Alaska residents	\$ 6,200.00
	1(b) paid to non-Alaska residents	\$ 53,900.00
2	Transportation (in Alaska)	\$ 4,665.40
3	Interstate transportation and shipping costs to and from Alaska (count 50%)	5,557.83
4	Location fees and cost of rental or purchased facilities and equipment	\$ 200.00
5	Services	\$ 106,000.00
6	Food and Lodging	\$ 1,870.35
7	Other Alaska production expenses (attach detailed budget)	\$ 0
8	Total Alaska production expenses. Add lines 1-7	\$ 178,393.58
9	Production credit. <u>Multiply line 8 by 30%.</u>	x .30 \$ 53,518.08

ACTUAL ALASKA WAGES CREDIT REQUESTED		
10	Total Alaska wages credit. <u>Multiply line 1(a) by 10%.</u>	x .10 \$ 620.00

ACTUAL SEASONAL CREDIT REQUESTED		
11	Total expenses from line 8 that were incurred between October 1 and March 30 of the qualifying production period.	\$ 0
12	Seasonal credit. <u>Multiply line 11 by 2%.</u>	x .02 \$ 0

ACTUAL RURAL CREDIT REQUESTED		
13	Total expenses from line 8 that qualify for rural credit.	\$ 0
14	Rural credit. <u>Multiply line 13 by 2%.</u>	x .02 \$ 0

ACTUAL CREDITS REQUESTED		
15	Add lines 9, 10, 12, 14	\$ 54,138.08
16	Amount of tax credit approved by Alaska Film Office in Qualification Letter.	\$ 54,240.00
17	Subtract line 16 from line 15. If more than zero, the Alaska Film Office will award tax credits for this amount according to requirements of 3 ACC.188050(d).	\$ <101.92>

**AGREEMENTS**

- I certify that I am an authorized representative of the applicant and as such am authorized to make the statement of affirmation contained herein.
- I hereby agree to allow representatives of the Alaska Film Office access to applicable records as may be necessary for the administration of this program.
- I certify, under penalties of unsworn falsification, that the above statements and information contained in the application and attachments are complete, true, and correct to the best of my knowledge and belief.
- I certify that the production is not an ineligible project as defined in AS 44.33.233(c).

MELANIE BAINES Applicant Representative Printed Name	Date 10.05.09
<i>Melanie Baines</i> Applicant Representative Signature	Date 10.05.09

*Melanie Baines* 10.13.09

Send application and related documents to:

Alaska Film Office  
550 West 7th Avenue, Suite 1770  
Anchorage, AK 99501

**APPLICANT CHECKLIST (to be included with application)**

- Detailed identification of the production;
- Detailed budget and cost report breaking down total and Alaska expenses along with a verification by a certified public accountant that satisfy the requirements of AS 43.33.235(d);
- Detailed list of all personnel and cast working in Alaska including dates and salaries earned while in Alaska;
- List of all Alaska principle photography days, including dates and locations;
- List of names and address of entities whose qualified expenses were included jointly with those of the Company in this application, as well as a detailed list of all such expenditures; *N/A*
- List of any tangible personal property for which costs were included that was not transferred or otherwise disposed of at the end of the production; *N/A*
- Rough assembly of the production as required by 3 AAC 188.050(b);
- Name and address of the certified public accountant who verified the production cost report of expenses included in this application.
- Sworn certification by producer as required by 3 ACC 188.050(e).



STATE OF ALASKA  
DEPARTMENT OF  
**COMMERCE**  
COMMUNITY AND  
ECONOMIC DEVELOPMENT

*Sean Parnell, Governor*  
*Emil Notti, Commissioner*  
*Joe Austerman, Director*

Office of Economic Development  
Alaska Film Office

October 21, 2009

MEMO

From: David Worrell, Film Office Development Specialist  
Alaska Film Office  
550 W. 7<sup>th</sup> Avenue, Suite 1770 | Anchorage AK 99501  
(907) 269-8491 p / f (907) 269-8125

To: Joseph Schmidt, Corporate Income Tax Auditor  
Alaska Department of Revenue, Tax Division  
550 W. 7<sup>th</sup> Avenue, Suite 500 | Anchorage AK 99501  
(907) 269-6626 p / f (907) 269-6644

Cc: Robynn Wilson, Revenue Audit Supervisor  
Alaska Department of Revenue, Tax Division

The Alaska Film Office has reviewed and is hereby approving the application of Kaos Entertainment, LLC. for a Film Production Tax Credit for their production "Grizzly Land."

Please issue a Film Production Tax Credit, in the amount of \$54,138.08, to Kaos Entertainment, LLC. (EIN [REDACTED]), 1601 Colorado Ave, Santa Monica, CA 90404.

Questions can be referred to Dave Worrell at the Alaska Film Office.



DATE: 10.13.09

Melanie Baines  
MELANIE BAINES  
Name and Title LINE PRODUCER

SUBSCRIBED AND SWORN TO before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public in and for the  
State of \_\_\_\_\_  
My commission expires: \_\_\_\_\_

**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

State of California

County of Los Angeles }

On 10/13/2009 before me, Angela M. Doss  
Date Here Insert Name and Title of the Officer

personally appeared Melanie Elaine Baines  
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature Angela M. Doss  
Signature of Notary Public



Place Notary Seal Above

**OPTIONAL**

*Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.*

**Description of Attached Document**

Title or Type of Document: Sworn Certificate Compliance (3 AAC 188.050(e))

Document Date: 10/13/2009 Number of Pages: 2

Signer(s) Other Than Named Above: N/A

**Capacity(ies) Claimed by Signer(s)**

Signer's Name: \_\_\_\_\_

- Individual
- Corporate Officer — Title(s): \_\_\_\_\_
- Partner —  Limited  General
- Attorney in Fact
- Trustee
- Guardian or Conservator
- Other: \_\_\_\_\_



Signer Is Representing: \_\_\_\_\_

Signer's Name: \_\_\_\_\_

- Individual
- Corporate Officer — Title(s): \_\_\_\_\_
- Partner —  Limited  General
- Attorney in Fact
- Trustee
- Guardian or Conservator
- Other: \_\_\_\_\_



Signer Is Representing: \_\_\_\_\_