# **Commercial Agreement: Regular Earnings Contributions Report Form**

(Use separate form for Vacation Pay)

## **Employer Information**

Employer Name	Contact Person	
Address	Phone Number/ E-mail	
Choose One:	☐ AICP ☐ Non-AICP	

## **Report Information**

report information	
Total Contributions Reported (1) \$0.00	Liquidated Damages/Interest (2)
Check Number	Date Report Prepared

Employee Information				Project Information				Salary	Contributions to be Sent by Employer							
Last Name	First Name	Cat Code	Social Security Number	Project or Commercial Name	Work Period Begin Date	Work Period End Date	# of Shoot Days (4)	Presumed	Employee Pension 2.5%	Employer Pension	Employer Pension Rate (6)	Div. Fund 0.5%		CIAF (9)	Employer Health 10.5%	
											%					
											%					
											%					
											%					
											%					
											%					
											%					
TOTALS					\$	\$	\$		\$		\$	\$				

Please make checks payable to DGA-PRODUCER PENSION & HEALTH PLANS, INC. and mail to:

DGA-Producer Pension and Health Plans 5055 Wilshire Blvd Ste 600 Los Angeles CA 90036

**Attn: Contributions Department** 

If remitting payment electronically, please email this report to: <a href="mailto:contributions@dgaplans.org">contributions@dgaplans.org</a> Additional copies of this form are available online at <a href="https://www.dgaplans.org/producers">www.dgaplans.org/producers</a>.

If you have any questions regarding this form you can contact us at (323) 866-2200, ext. 567.

<u>List of Valid Job Category Codes</u>
DR – Director
UP – Unit Production Manager

DP – Principal Director PU – Principal UPM  $1A - 1^{st}$  Assistant Director  $12 - 1^{st}$  AD/ $2^{nd}$  AD

1P – Principal 1<sup>st</sup> Asst. Director 2L – 2<sup>nd</sup> 2<sup>nd</sup> AD/Location Manager

1S – Staff 1<sup>st</sup> Assistant Director 3A – 2<sup>nd</sup> 2<sup>nd</sup> Assistant Director

2A – 2<sup>nd</sup> Assistant Director 4A – Additional 2<sup>nd</sup> Assistant Director

2P – Principal 2<sup>nd</sup> Asst. Director U1 – UPM/1<sup>st</sup> Assistant Director 2S – Staff 2<sup>nd</sup> Assistant Director

#### Notes

- 1) Employer contributions are to be made on a monthly basis, no later than the last day of each month for compensation earned during the preceding month
- 2) The greater of liquidated damages or interest penalty will be charged for late contributions.
- 3) A Social Security number is required. Federal ID numbers are not acceptable.
- 4) For AICP companies, provide number of shoot days for all non-Principal Directors.
- 5) For non-AICP companies, refer to Article 3-104 of the National Commercial Agreement. For AICP companies, refer to the AICP Sideletter as modified by the 2023 MOA.
- 6) Employer Pension rate is 8.5% effective 1/3/22, 8.0% effective 1/1/21 to 1/2/22 and 7.0% effective 12/1/19 to 12/31/20.
- 7) Contribution of **0.5%** is broken down as follows: 0.25% to Qualification List and 0.25% to Diversity Program is effective 1/25/24 and .4% for work performed 11/29/15 to 1/24/24.
- 8) When reporting Contract Qual./Div. Fund contributions, indicate the area ("L" for Los Angeles, "N" for New York or "O" for Other Area).
- 9) Commercial Industry Administrative Fund is 0.40% for work performed on or after 1/25/24 and 0.35% for work performed prior to 1/25/24.

(rev. January 4, 2024)