

# DIVIDEND EARNINGS DECLARATION FORM

Statement of Dividend Income Distribution

## COMPANY / PAYER INFORMATION

Company Name:

Tax ID / EIN:

Address:

## SHAREHOLDER / RECIPIENT INFORMATION

Shareholder Name:

Account Number:

Address:

Taxpayer ID / SSN:

## DIVIDEND DECLARATION DETAILS

Class of Shares	Number of Shares	Dividend Rate per Share	Gross Dividend Amount	Withholding Tax	Net Amount Payable
Total Distributions:					

Declaration Date:

Record Date:

Payment Date:

## DECLARATION & AUTHORIZATION

I hereby certify and declare, under penalty of perjury, that the dividend distribution information and earnings stated above are true, accurate, and correct in accordance with the books and financial records of the paying corporation.

\_\_\_\_\_  
Authorized Officer Signature

\_\_\_\_\_  
Title / Position

\_\_\_\_\_  
Date

\_\_\_\_\_  
Shareholder Signature (if required)

---

**Print Name**

---

**Date**

---

Confidential Document. For tax declaration and accounting purposes only.