

S CORPORATION INCOME ALLOCATION STATEMENT

Tax Year: 20____

Corporation Name: _____ Employer ID Number (EIN): _____

Shareholder Name: _____ Taxpayer ID Number (SSN/TIN): _____

Address: _____

Number of Shares Owned: _____ Ownership Percentage: _____

Line Item Description	Corporate Total Amount (\$)	Shareholder Allocated Share (\$)
Ordinary Business Income (Loss)		
Net Rental Real Estate Income (Loss)		
Other Net Rental Income (Loss)		
Interest Income		
Ordinary Dividends		
Royalties		
Net Short-Term Capital Gain (Loss)		
Net Long-Term Capital Gain (Loss)		
Section 179 Deduction		
Other Income / Deductions (Specify):		
Other Income / Deductions (Specify):		

Prepared By (Name/Title): _____ Signature: _____ Date: _____

Shareholder Signature: _____ Date: _____