

Statement of Allocated Earnings

ENTITY NAME

TAX ID / EIN

FISCAL PERIOD

RECIPIENT NAME

RECIPIENT ID / SSN

ALLOCATION %

DESCRIPTION	AMOUNT (\$)
Total Net Income of Entity	_____
Less: Retained Reserves	_____
Total Distributable Earnings	_____
Allocated Share of Earnings (based on Allocation %)	_____
Less: Total Distributions Paid to Date	_____
Net Undistributed Allocated Earnings	_____

AUTHORIZED REPRESENTATIVE SIGNATURE

Date: _____

RECIPIENT SIGNATURE

Date: _____