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# EARNINGS ALLOCATION STATEMENT

Statement Date: \_\_\_\_\_

Allocation Period: \_\_\_\_\_

Document ID: \_\_\_\_\_

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## ENTITY INFORMATION

Legal Name: \_\_\_\_\_

Tax ID/EIN: \_\_\_\_\_

Address: \_\_\_\_\_

Phone/Email: \_\_\_\_\_

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## RECIPIENT / PARTNER INFORMATION

Name: \_\_\_\_\_

ID/SSN/TIN: \_\_\_\_\_

Ownership %: \_\_\_\_\_

Address: \_\_\_\_\_

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DESCRIPTION OF ALLOCATION	AMOUNT
Total Net Allocable Earnings for Period	_____
Individual Allocation Percentage	_____
Gross Allocated Share of Earnings	_____
Less: Guaranteed Payments / Prior Distributions	_____
Less: Withholding / Deductions	_____
<b>Net Allocated Earnings Balance</b>	_____

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\_\_\_\_\_  
Authorized representative Signature

Date: \_\_\_\_\_

\_\_\_\_\_  
**Recipient / Partner Signature**

Date: \_\_\_\_\_