PARTNERSHIP CAPITAL ACCOUNT SETTLEMENT AND RETURN

Official Settlement Statement and Release

Partnership Name: _____ **Date of Settlement:** _____

Effective Date: _____ **Dissolution/Withdrawal:** _____

1. PARTNER IDENTIFICATION

Partner Name: _____

Address: _____

Partnership Share (%): _____ **Contact Number:** _____

2. CAPITAL ACCOUNT RECONCILIATION & SETTLEMENT BALANCE

Item / Description	Amount ($)
Beginning Capital Account Balance (as of _____)	
Add: Additional Capital Contributions	
Add: Share of Net Income / Profits	
Less: Capital Withdrawals / Distributions	
Less: Share of Net Losses	
Adjustments (Specify: _____)	
Total Adjusted Ending Capital Account Balance	
Amount of Capital Return Payment	
Remaining Retained Balance (if any)	

3. TERMS AND METHOD OF RETURN PAYMENT

The return of the settled Capital Account balance shall be executed under the following payment terms and methods:

Payment Method: _____

Installment Terms (if applicable): _____

Due Date of Final Payment: _____ **Bank/Transit Details:** _____

4. SETTLEMENT AGREEMENT, RELEASE, AND ACKNOWLEDGMENT

By signing below, the Partner and the Managing Partner(s), on behalf of the Partnership, acknowledge and agree that the financial

calculations set forth above represent a true, fair, and final determination of the Partner's Capital Account. Upon receipt of the specified Capital Return Payment, the Partner hereby releases and forever discharges the Partnership, its remaining partners, agents, and representatives from any and all claims, liabilities, or demands arising out of or related to the Partner's capital contributions, share of profits/losses, or ownership interest in the Partnership, except as otherwise provided in the primary Partnership Agreement.

Departing / Settling Partner:

_____

Signature

_____

Printed Name

_____

Date

Authorized Managing Partner:

_____

Signature

_____

Printed Name

_____

Date