

PARTNERSHIP CAPITAL ACCOUNT BALANCE DECLARATION

PARTNERSHIP INFORMATION

Partnership Name: _____

EIN / Tax ID: _____

Reporting Period: _____

PARTNER INFORMATION

Partner Name: _____

Partner TIN/SSN: _____

Ownership %: _____

CAPITAL ACCOUNT BALANCE SUMMARY

Transaction Description	Amount (\$)
Beginning Capital Balance (as of: / /)	
(+) Capital Contributions (Cash)	
(+) Capital Contributions (Property/Asset)	
(+) Share of Partnership Income / Gain	
(-) Share of Partnership Loss / Deduction	
(-) Withdrawals / Distributions (Cash)	
(-) Withdrawals / Distributions (Property)	
Ending Capital Balance (as of: / /)	

I, the undersigned partner/authorized representative, hereby declare and certify under penalty of perjury that the capital account balances and transactions detailed above are true, accurate, and complete statements of the partner's equity interest in the partnership for the specified period.

Partner Signature

Date: / /

Authorized General Partner / Accountant
Signature

Date: / /