# Self Employed Borrower: Schedule C

#### September 2021

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# Recommended Prerequisites

- Understanding Desktop Underwriter®- The Basics
- Understanding Loan Product Advisor- The Basics
- Self Employed Income the Basics Part 1- Personal Return
- Self Employed Income the Basics Part 2- Business Return

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# Materials You Will Need

- Form 1084 Worksheet
- Tax Return 1040's for Dan Designer



## Objective

Understand the meaning of "Self-Employed"

Learn to use Fannie Mae's 1084 to calculate supportable income using tax returns.

**Complete Fannie Mae's 1084 Cashflow Analysis** 

• Review Schedule C

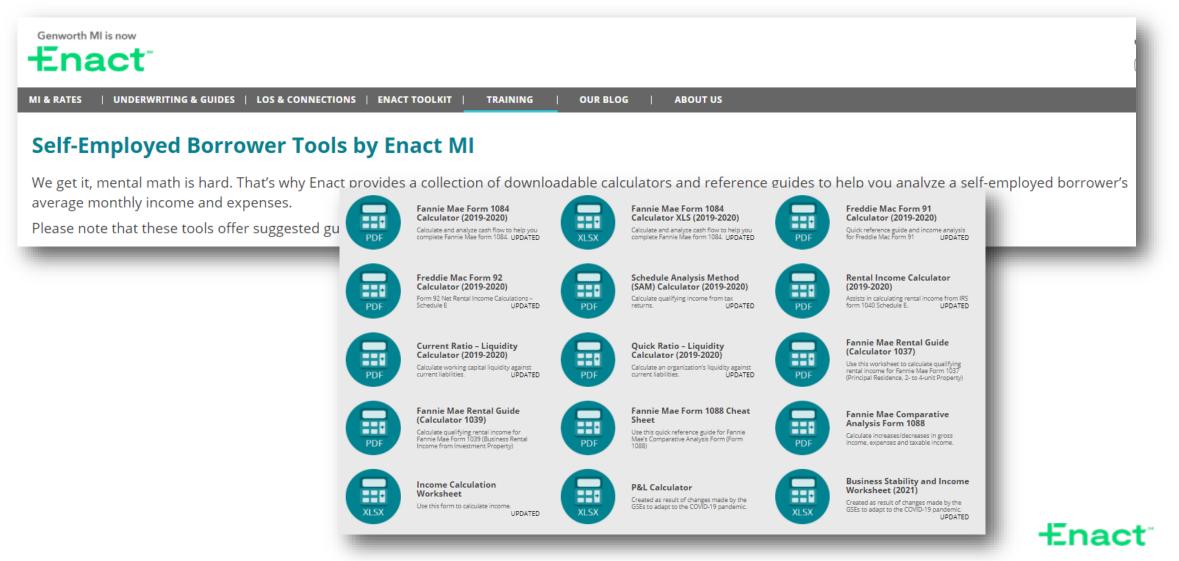


# You'll Need

	• X :	Single 🗌 Married filing jointly	Ma	rried filing separately	(MFS)	Head of ho	usehold (HOH)	Qu	ualifying widow	w(er) (QW	
Check only one box.		u checked the MFS box, enter the on is a child but not your depender		of your spouse. If you	checl	ked the HOH or C	W box, enter th	e child	's name if the	qualifying	
Your first name	and m	ddle initial	Last	name				Yours	social security	number	
Dan			De	signer				XXX	-XX-XXXX		
If joint return, sp	pouse's	first name and middle initial	Last	name				Spous	e's social secu	rity numbe	
	,	r and street). If you have a P.O. box, se tor Drive	e instru	ctions.			Apt. no.		dential Election k here if you, o		
		cor brive ce. If you have a foreign address, also o	omnlai	a enseae balow	Sta	in 7	P code		se if filing jointly		
Raleigh	ost oni	te: Il you have a loreign aburess, also o	ompier	e spaces below.	N		7615		to this fund. C		
Foreign country	name			Foreign province/state		-	preign postal code		elow will not c ax or refund.	nange	
r oreign oouniny	Titerite			Toreign provincerstate	reser		vegr posta coos	,		Spous	
\t any time du	ring 20	020, did you receive, sell, send, exc	hange	e, or otherwise acquire	e any	financial interest	in any virtual cu	rrency	? 🗌 Yes	X No	
Standard Deduction		eone can claim:									
Age/Blindness	You	Were born before January 2,	1956	Are blind Sp	ouse	: 🗌 Was born I	pefore January 2	2, 1956	is blin	d	
Dependents	s (see	instructions):		(2) Social securit	y	(3) Relationship	(4) 🖌 if q	ualifies	for (see instruct	ions):	
fmore	(1) F	irst name Last name		number		to you	Child tax c	redit	Credit for othe	r depender	
han four										]	
dependents, see instructions											
and check										]	
here 🕨 📃										]	
	1	Wages, salaries, tips, etc. Attach	Form(	s) W-2				· 上	1		
Attach Sch. B if	2a	Tax-exempt interest	2a		bΤ	axable interest		. 2	2b :	2,144.	
required.	3a	Qualified dividends	3a		ьс	ordinary dividend	s	. 3	Bb		
	4a	IRA distributions	4a		ЬΤ	axable amount .		. 4	1b		
	5a	Pensions and annuities	5a		bΤ	axable amount .		. 5	5b		
tandard	6a	Social security benefits	6a		bΤ	axable amount .		_	Sb		
eduction for— Single or	7	Capital gain or (loss). Attach Sche	edule (	D if required. If not req	uired	, check here	▶[	⊐∟	7		
Married filing	8	Other income from Schedule 1, lin	ne 9.					. 🗖	8 6	5,270.	
separately, \$12,400	9	Add lines 1, 2b, 3b, 4b, 5b, 6b, 7,	and 8	3. This is your total inc	ome			•	9 63	8,414.	
	10	Adjustments to income:									
	а	From Schedule 1, line 22				10a	25,12	6.			
jointly or Qualifying	b	Charitable contributions if you take	e the s	tandard deduction. Se	e inst	ructions 10b					
jointly or Qualifying widow(er),	с	Add lines 10a and 10b. These are	your	total adjustments to	inco	me		► 1	0c 2	5,126.	
ointly or Qualifying widow(er), \$24,800 Head of		Subtract line 10c from line 9. This	is you	ar adjusted gross inc	ome			▶ 1	11 43	3,288.	
pintty or Qualifying widow(er), \$24,800 Head of household,	11	Subtract line 10c from line 9. This is your adjusted gross income						. 1	12 2	9,541.	
pintly or Qualifying widow(er), \$24,800 Head of household, \$18,650 If you checked		Standard deduction or itemized	Qualified business income deduction. Attach Form 8995 or Form 8995-A								
pintly or Qualifying widow(er), \$24,800 Head of household, \$18,650 If you checked any box under	11			ttach Form 8995 or F	orm 8	995-A					
jointly or Qualifying widow(er), \$24,800 Head of household, \$18,650 If you checked any box under Standard Deduction,	11 12	Qualified business income deduc	tion. A					· –			
Married filing jointly or Qualifying widow(er), \$24,800 Head of household, \$18,650 If you checked any box under Standard Deduction, see instructions.	11 12 13	Qualified business income deduc	tion. A					. 1	14 3:	2,749. 2,290. 0,998.	



## Income Worksheets/Calculator



# Income Worksheets/Calculator

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#### Self-Employed Borrower Tools by Enact MI

We get it, mental math is hard. That's why Enact provides a collection of downloadable calculators and reference g average monthly income and expenses.

Please note that these tools offer suggested guidance, they don't replace instructions or applicable guidelines from



#### Fannie Mae Form 1084 Calculator (2019-2020)

Calculate and analyze cash flow to help you complete Fannie Mae form 1084. UPDATED



#### Calculator and Quick Reference Guide: Fannie Mae Cash Flow Analysis

Please use the following quick reference guide to assist you in completing Farnie Mae Form 1014. It provides suggested guidance only and does not replace Farnie Mae instructions or applicable guidelines. Note: For entire with the marker (~1 type a \* 1 or entire a nearestive ancest. Example. -12.146.57

	Form 1040 – Individual Income Tax Return		2020	2019	NOTES						
1	W-2 Income from Self-Employment	+			"Only add back the eligible						
2	Schedule B - Interest and Ordinary Dividends	-			"Other" deductions, such as Amortization or						
	a. Interest Income from Self-Employment (Line 1)	+			Casualty Loss.						
	b. Dividends from Self-Employment (Line E)	Network.									
3	Schedule C - Profit or Loss from Business: Sole Proprietorship										
	a. Net Profit or Loss (Line 31)	8									
	b. Nonrecurring Other (Income) Loss/Expenses (Line 6)	+/-									
	c. Depletion (Line 12)	+									
	d. Depteciation (Line til)	+	2								
	Non-deductible Meals and Entertainment Expenses     [Line 34b]	-									
_	<ol> <li>Business Use of Home (Line 30, Check applicable guidelines)</li> </ol>	•									
	g. Amortization/Casuality Loss (Only add back Amort/CL - Review Schedule C Page 2, Part V*)	•									
_	Business Miles (Page 2, Part N, Line 44a OR Related 4542, Line 30)										
_	X Depreciation Rate (2020 - 27t; 2019 - 36t)		0.27	0.28							
_	= Total Mileage Depreciation	+	0.00	0.00							
	Subtotal Schedule C										
ė.	Schedule D - Capital Gains and Losses										
	a. Recurring Capital Gains (from Self-Employment)										
£	Schedule E – Supplemental Income and Loss										
	Nate: A lender may use Fannie Mae Rental Income Workshee farm to calculate individual rental income (lass) reported on										
-	a. Royalties Received (Line 4)	8									
	b. Total Expenses (Line 20)	-									
	c. Depletion (Line 18)	+									
	Subtotal Schedule E		0.00	0.00	5						
6	Schedule F - Profit or Loss from Farming	1.1	5		2						
	a. Net Farm Profit or Loss (Line 34)	+/	S		2						
	b. Non-Tax Portion Orgoing Coop and CCC Payments (Line 3, 4, 4(a -b))	+/									
	c. Nonrecurring Other (Income) or Loss (Lines Sc & 8)	+/									
	d. Depreciation (Line 14)	+	(		6						
-	e. Amortization/Casualty Loss/Depletion (Line 32*)	+	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )								
	f. Business Use of Home (Line 22, Check applicable guidelines	+			8						
				0.00							
-	Subtotal Schedule #	-	0.00	0.00							



### Income Worksheets/Calculator



Freddie Mac Form 91 Calculator (2019-2020) Quick reference guide

and income analysis for Freddie Mac Form 91 UPDATED

#### nctionality, download PDF first before entering data. Please download before each in as calculators are updated periodically. Namiji) Loan Namber

#### Enact

#### Calculator and Quick Reference Guide: Form 91 Income Calculations

Please use the following quick reference guide to assist you in completing Freddie Mac Form 91. This form is for suggested guidance and does not replace Freddie Mac instructions or applicable guidelines. Note: For entries with the marker (*i*-/) type a ': ' for entering a negative amount. Example: -12,345.67

#### I. Income Calculations from IRS Form 1040

IRS Form 1040 Federal Individual Income Tax Return

	W-2 Income from self-employment (reported on IRS For 1040 and 1120 or 1120S)	ms	2020	2019	NOTES
	Name of Business:				
	W-2 Income, Section 5304.1 (d)1	•			Validate with business returns and IRS Form 1125-E.
_	Subtotal of W-2 Income From Self-employment		\$ 0.00	\$ 0.00	Compensation of Officers, as applicable
2	Schedule B – Interest and Ordinary Dividends		2020	2019	NOTES
	Recurring interest income (Chepter 5305) (Line 1)	•			
	Recurring dividend income (Chapter 5305) (Line 5)	•			
	Dividend income from self-employment reported on IRS Form 1120	-			
_	Subtotal of Dividends and Interest		\$ 0.00	\$ 0.00	
3	Schedule C — Profit or Loss from Business (Sole Proprietorship) (Chapter 5304)		2020	2019	NOTES
	Name of Business #1:				
	Net profit or loss (Line 31)	+/-			
	Non-recurring other income or loss, or expenses (Line 6)	+/-			
	Depletion (Line 12)	•			
	Depreciation - See three lines below for additional vehicle depreciation (Line 13)	•			
	Meals and entertainment exclusion (Line 24b)	-	_		
	Amortization or casuality loss - Only add back Amort/CL (Review C, Page 2, Part V)	+			
	Business use of home - Follow investor credit policy (Line 30, Form 8829 or Simplified Method Worksheet)	•			
	Business Miles (Page 2, Part IV, Line 44a or Related 4562, Line 30)				
	x Depreciation Rate (2020-27¢ and 2019-26¢)		\$0.27	\$0.25	
	= Total Mileage Depreciation		\$ 0.00	\$ 0.00	
	Subtotal from Schedule C, Business #1		5 0.00	\$ 0.00	

This calculator can be found at https://EnactMi.com/self-employed-borrower-calculator





### The Tax Return...

8

Filing Status Check only one box.	Single Married filing jointly If you checked the MFS box, enter th person is a child but not your depend	e name of				1 ,		
Your first name	and middle initial	Last n	ame				Your so	cial security number
Dan		Des	igner				XXX-	XX-XXXX
If joint return, sp	ouse's first name and middle initial	Last n	ame				Spouse	's social security number
	number and street). If you have a P.O. box, orator Drive	see instruct	tions.			Apt. no.	Check h	ntial Election Campaign here if you, or your
City, town, or po Raleigh	st office. If you have a foreign address, also	o complete	spaces below.	State NC		code 615	to go to	if filing jointly, want \$3 this fund. Checking a ow will not change
Foreign country	name		Foreign province/state/o	ounty	Fore	ign postal code	your tax	correfund. You Spouse
At any time dur	ing 2020, did you receive, sell, send, e	xchange,	or otherwise acquire a	iny financial inter	est in	any virtual cu	rrency?	Yes XNo
Standard Deduction	Someone can claim: You as a			as a dependent ilien				
Age/Blindness	You: Were born before January	2, 1956	Are blind Spo	use: 🗌 Was bo	m be	fore January 2	2, 1956	Is blind
Dependents	(see instructions):		(2) Social security	(3) Relations	hip	(4) 🖌 if q	ualifies fo	r (see instructions):
If more	(1) First name Last name		number	to you		Child tax cr	redit	Credit for other dependents
than four								
dependents, see instructions								
and check								
here 🕨 🗌								
	1 Wages, salaries, tips, etc. Atta	ch Form(s)	W-2				. 1	
Attach	2a Tax-exempt interest	2a		b Taxable intere	st		2b	2,144.
Sch. B if	3a Qualified dividends	3a		b Ordinary divide			3b	1
required. J	4a IRA distributions	4a		b Taxable amou			4b	
	5a Pensions and annuities	- <del>1</del> a 5a		b Taxable amou			. 5b	
	6a Social security benefits	5a 6a		b Taxable amound b T			. 50 . 6b	
Standard Deduction for—	<ul> <li>5a Social security benefits</li> <li>7 Capital gain or (loss). Attach Security benefits</li> </ul>					· · · · ·	7	
Single or	7 Capital gain or (loss). Attach Se	chedule D	if required. If not requ	rea, check here		►	1	
ner income	from Schedule 1, line 9 .							. 8
Married filing	10 Adjustments to income:							
jointly or Qualifying	a From Schedule 1, line 22 .			10	Da	25,12	6.	
widow(er), \$24,800	b Charitable contributions if you t	ake the sta	andard deduction. See	instructions 10	b			
\$24,800 Head of	c Add lines 10a and 10b. These						► 10	25,126.
household,	11 Subtract line 10c from line 9. T						► 11	
\$18,650  _ If you checked	12 Standard deduction or itemiz	,					12	
any box under	<ol> <li>Standard deduction or itemiz</li> <li>Qualified business income ded</li> </ol>			,			12	
Standard Deduction.					·			m// 221
	14 Add lines 12 and 13						. 14	32,290.
see instructions.	15 Taxable income. Subtract line	444	and the second second	enter-0			. 15	10,998.

#### The Example is Dan Designer

Dan runs a business from home. The business is a Sole Proprietor and he files a Schedule C. He is a 100% owner.

SCHEDULE 1 (Form 1040) Additional		Additional Income and Adjustments to Income		c	MB No. 1545-0074
	Attach to Form 1040, 1040-SR, or 1040-NR. The Breverus Service Go to www.irs.gov/Form1040 for instructions and the latest information.				ZUZU Attachment Sequence No. 01
	(s) shown on Fo Designer	rm 1040, 1040-SR, or 1040-NR	Your so XXX-X		ecurity number
Par	Additio	onal Income			
1	Taxable refu	nds, credits, or offsets of state and local income taxes		1	
2a	Alimony rec	eived		2a	
b	Date of origi	nal divorce or separation agreement (see instructions) $\blacktriangleright$			
3	Business ind	come or (loss). Attach Schedule C		3	66,270
4	Other gains	or (losses). Attach Form 4797		4	
5	Rental real e	state, royalties, partnerships, S corporations, trusts, etc. Attach Sched	ule E	5	
6	Farm incom	e or (loss). Attach Schedule F		6	
7	Unemploym	ent compensation		7	
8	Other incom	e. List type and amount ►		8	
9		es 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040		9	66,270

Review Line 8 to determine if a Schedule 1 has been filed



### The Tax Return...

3

(Form 1040) Department of the Treasury Internal Revenue Service	<ul> <li>Attach to Form 1040, 1040-SR, or 1040-NR.</li> <li>Go to www.irs.gov/Form1040 for instructions and the latest information.</li> </ul>	2020 Attachment Sequence No. 01	100% owner	SCHEDULE C     (Form 1040)     Department of the Treesry     Internal Remain Strate 2010     Attach to Form 1040, 1040-SR, 1040-SR, 0140-SR, 1040-SR, 1	
Name(s) shown on Form	1040, 1040-SR, or 1040-NR	Your social security number		Name of proprietor Dan Designer	Social security
Dan Designer		XXX-XX-XXXX		A Principal business or profession, including product or service (see instructions) Interior Design	B Enter code fr
Part Addition	al Income			C Business name. If no separate business name, leave blank.	D Employer ID
1 Taxable refun	ds, credits, or offsets of state and local income taxes	1		E Business address (including suite or room no.)  1000 Decorator Drive City, town or post office, state, and ZIP code Raleigh, NC 27615	
	ved			F Accounting method: (1) ⊠ Cash (2) _Accrual (3) _Other (specify) ▶     G Did you "materially participate" in the operation of this business during 2020? If "No," see instruct	tions for limit on losses
2		2a		If you started or acquired this business during 2020, check here     Did you make any payments in 2020 that would require you to file Form(s) 1099? See instructions	
b Date of origina	al divorce or separation agreement (see instructions)			J If "Yes," did you or will you file required Form(s) 1099?	
3 Business inco	me or (loss). Attach Schedule C	<b>3</b> 66,270.		1 Gross receipts or sales. See instructions for line 1 and check the box if this income was reported Form W-2 and the "Statutory employee" box on that form was checked	. • 🗆 🔢
4 Other gains or	r (losses). Attach Form 4797	4		2 Returns and allowances	2
5 Rental real est	ate, royalties, partnerships, S corporations, trusts, etc. Attach Sche	dule E 5		Cost of goods sold (from line 42)     Gross profit. Subtract line 4 from line 3	4
	or (loss). Attach Schedule F			6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) . 7 Gross income. Add lines 5 and 6 .	· · · 6
				Bart II         Expenses. Enter expenses for business use of your home only on line 30.           8         17,999.         18         Office expense (see institution of the second se	
	nt compensation	7		9 Car and truck expenses (see 9 25,082. 19 Pension and profit-sharing instructions) 9 25,082. 20 Rent or lease (see instru- 0 Commissions and fees . 10 2 Vehicles machines. and	ctions):
8 Other income.	. List type and amount ►			10         a Vehicler           11         Contract labor (see instructions)           12         21           12         21	20b
		8		13 Depreciation and section 179 22 Supplies (not included in expense deduction (not	
	s 1 through 8. Enter here and on Form 1040, 1040-SR, or 1040			included in Part III) (see instructions)	
line 8		<b>9</b> 66,270.		(other than on line 19). <u>14</u> b Deductible meals (see insurance (other than health) <u>15</u> 3,100, instructions).	245
				16 Interest (see instructions): 25 Utilities	t credits). 26
_				16b         1,444.         27a         Other expenses (from lin spessional services           17         17,660.         b         Reserved for future usion	e 48) 27a
ness income	e or (loss). Attach Schedule C		3	66,270. mses before expenses for business use of home. Add lines 8 through 27a	· · ► 28
			+ +	Expenses for business use of your home. Do not report these expenses elsewhere. Attach F unless using the simplified method. See instructions.	orm 8829
				Simplified method filers only: Enter the total square footage of (a) your home: and (b) the part of your home used for business: Use the Si	molified
				Method Worksheet in the instructions to figure the amount to enter on line 30	
				<ul> <li>If a profit enter on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (if yo checked the box on line 1, see instructions). Estates and trusts, enter on Form 1041, line 3.</li> </ul>	" ) a
				<ul> <li>If a loss, you must go to line 32.</li> </ul>	
				32 If you have a loss, check the box that describes your investment in this activity. See instructions. <ul> <li>If you checked 32a, enter the loss on both Schedule 1 Form 1040), line 3, and on Schedule</li> </ul>	
				SE, line 2. (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter of Form 1041, line 3.	on } 32a ⊟ Al 32b ⊟ Sc at
E				If you checked 32b, you must attach Form 6198, Your loss may be limited.      REV 02/1521 TTW	50

#### The Example is Dan Designer

Dan runs a business from home. The business is a Sole Proprietor and he files a Schedule C. He is a

T I I Yes No Yes No as reported to you on 297,800. 14,888. 0. 282,912. 282,912. se (see instructions) profit-sharing plans (see instructions) hinery, and equipm 22,700. ss property maintenance 6,599. included in Part III) 1,750. enses . oals: 7,855. eals (see 1,172. mployment credit es (from line 48) . 13,929. uture use 94,825. Attach Form 8829 Use the Simplified 28,555. ine 2. (If you ine 3. 66,270. structions. on Schedule 32a All investment is at risk. usts, enter on 32b Some investment is not at risk. 02/15/21 TTW Schedule C (Form 1040) 2020 Review Line 3 to determine if a Schedule C has been filed



OMB No. 1545-0074

2020

Sequence No. 09

\*\*\*-\*\*-\*\*\*\* ▶ 5 4 1 4 0 0

### The Tax Return...

(Form 1040) Department of the Treasury Internal Revenue Service (39)	Profit or Loss From Business (Sole Proprietorship) Go to www.irs.gov/ScheduleC for instructions and the latest in Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships generally		2020 Attachment Sequence No. 09			runs	
Name of proprietor	· · · · · · · · · · · · · · · · · · ·	Social security			Dai	110115	a Du
Dan Designer		XXX-XX-	XXX			<b>•</b> •	_
Interior 1			4 1 4 0 0		is a	Sole	Prop
C Business name.	. If no separate business name, leave blank.	D Employer ID	umber (EIN) (see instr.)			is a 10	100/
	ss (including suite or room no.)  1000 Decorator Drive Raleigh, NC 27615				пе	15 a 11	JU 70
F Accounting met	thod: (1) 🗙 Cash (2) Accrual (3) Other (specify) >						
G Did you "materi	ally participate" in the operation of this business during 2020? If "No," see instru	uctions for limit on losses	. Yes No				
	r acquired this business during 2020, check here						
	ny payments in 2020 that would require you to file Form(s) 1099? See instruction	ns					
	u or will you file required Form(s) 1099?		. Yes No				
Part Income	exceller. Can instructions for time 4 and shook the hear if this income uncorrected						
• • • • • • • • • • • • • • • • • • •	ess income or (loss). Attach Sc					3	66,2
	sold (from line 42)		0.				
	Subtract line 4 from line 3		282,912.				
	ncluding federal and state gasoline or fuel tax credit or refund (see instructions)						
	Add lines 5 and 6	🕨 7	282,912.				
8 Advertising		10.01/00.01	17,555.				
	fit or (loss). Subtract line 30 from line 29. profit, enter on both Schedule 1 (Form 104)	0), line 3, and	on Schedule SE, lin	e 2. (If you			
<ul> <li>If a p checked</li> </ul>	orofit, enter on both Schedule 1 (Form 104 d the box on line 1, see instructions). Estates	** *	F	· · ·	31	66	5,270.
<ul> <li>If a p checked</li> <li>If a lo</li> </ul>	orofit, enter on both <b>Schedule 1 (Form 104</b> d the box on line 1, see instructions). Estates ss, you <b>must</b> go to line 32.	** *	F	· · ·	31	66	5,270.
<ul> <li>If a p checked</li> <li>If a lo</li> </ul>	orofit, enter on both <b>Schedule 1 (Form 104</b> d the box on line 1, see instructions). Estates ss, you <b>must</b> go to line 32.	and trusts, er	ter on Form 1041, lin	· · ·	31	66	5,270.
If a p checked     If a lo	the box on line 1, see instructions). Estates ss, you <b>must</b> go to line 32.	and trusts, er	ter on Form 1041, lin	· · ·	31	66	5,270.
If a p checked     If a lo	the box on line 1, see instructions). Estates ss, you must go to line 32. the pogams 14 15 3,100. a Travel. b Deduction masks (see instructions).	s and trusts, er	ter on Form 1041, lin	· · ·	31	66	5,270.
If a p checked     If a lo     Bendlows     If a lo     Insurance (other than on il     Insurance (other	the portion in the series of t	and trusts, er	ter on Form 1041, lin	· · ·	31	66	5,270.
If a p checked     If a lo     Checked     If a lo     Checked     If a lo     If a l	a Trevel.     a Trevel.       atta heath)     16       atta hea	24a 24b 24b 25 ent credits) 26 inc e48) 27a	ter on Form 1041, lin	· · ·	31	66	;,270. <u></u>
If a p checked     If a lo     If a l	rofit, enter on both Schedule 1 (Form 104 d the box on line 1, see instructions). Estates ss, you must go to line 32. If pograms 14 b B B B B B B B B B B B B B B B B B B		ter on Form 1041, lin	· · ·	31	66	5,270.
If a p checked If a lo If a l	a Travel     a Travel       at he box on line 1, see instructions). Estates       ss, you must go to line 32.       aft pogams       than health       than health       15       16       16       17       17, 660       b Reserved for future un       the operand for expenses for business us of home Add lines 8 through 72	24a 24b 24b 24b 24b 25 26 inc 48) 27a 26 27b 27b 28	ter on Form 1041, lin	· · ·	31	66	<u>,270.</u>
If a p checker If a lo If a	rofit, enter on both Schedule 1 (Form 104 d the box on line 1, see instructions). Estates ss, you must go to line 32. Ift programs 14 15 3,100. Ift an instructions): barias (c) 16 1,444. 26 Willies 20 Utilise 32 barias (c) 17 17,660. b Reserved for future un b barce experses for business use of norm. Add lines 8 through 27a or of loss, Subtract line 28 form line 7.	24a 24b 24b 24b 24b 24b 25 ent credits) 28 27a 28 27a 28 28 28 29	ter on Form 1041, lin	· · ·	31	66	5,270.
If a p checker If a lo If a	rofit, enter on both Schedule 1 (Form 104 d the box on line 1, see instructions). Estates ss, you must go to line 32. If pograms 14 b B B B B B B B B B B B B B B B B B B	248     248     248     248     248     248     248     27     28     27     28     27     28     27     28     29     Form 8829	ter on Form 1041, lin	· · ·	31	66	5,270.
If a p checker If a lo If a	rofit, enter on both Schedule 1 (Form 104 d the box on line 1, see instructions). Estates ss, you must go to line 32. If pograms it an inset) than habt) it is a job in the second s	24a 24b 24b 24b 24b 24b 25 ent credits) 28 27a 28 27a 28 28 28 29	ter on Form 1041, lin	· · ·	31	66	5,270.
If a p checker     If a lo If a l	a travel       16       3,100         a travel       15       3,100         a travel       16       1,444,25         b b coductible meals (see instructions).       25         tran math)       16       3,100         trans math)       16       1,444,25         trans math)       17,660       26         trans math)       17,660       26         trans math)       17,660       27         trans the brain structure us before expenses for business use of home. Add lines 8 through 27a       30         or (leas). Subtract line 28 tom line 7	24a     24b     24b     24b     25     27a     27a     27a     27b     27b     27b     27b     27b     28     27b     28     27b     28     30     30     you }	ter on Form 1041, lin	· · ·	31	66	5,270.
If a p checker     If a lo     If a	rofit, enter on both Schedule 1 (Form 104 d the box on line 1, see instructions). Estates ss, you must go to line 32. If pograms 4 b a b a b a b a b a b a b a b a b a b	24a 24b 24b 24b 24b 24b 24b 24b 24b	ter on Form 1041, lin	· · ·	31	66	5,270.
If a p checker     checker     checker     e If a lo     checker     fa a lo     checker     interest (see lins     dortgage (sald the     b Other     Checker     checker     Total expenser     Total expenser     Songlither and the     simplified med     and (b) the part     Method Works     Sin Netprofit or (6	a travel       16       3,100         a travel       15       3,100         a travel       16       1,444,25         b b coductible meals (see instructions).       25         tran math)       16       3,100         trans math)       16       1,444,25         trans math)       17,660       26         trans math)       17,660       26         trans math)       17,660       27         trans the brain structure us before expenses for business use of home. Add lines 8 through 27a       30         or (leas). Subtract line 28 tom line 7	24a           24b           25           ent credits)         26           int credits)         27a           ise         27b           ise         27a           Simplified         29           Form 8829         30           you         31	ter on Form 1041, lin	· · ·	31	66	5,270.
If a p checker     If a lo     If a	arrowit     ite box on line 1, see instructions). Estates       ift pogares     ite box on line 1, see instructions). Estates       ift pogares     ite box on line 3, see instructions). Estates       ift pogares     ite box on line 3, see instructions).       interview     ite box on line 3, see instructions.       interview     ite box instonsees.       in	s and trusts, er           24a           24b           24b           24b           25           ent crafts)           28           ent crafts)           27b           27b           28           Form 8829           Simplified           30           you           31           s.           Jate           32a □ All	ter on Form 1041, lin 7,855. 1,172. 13,929. 188,087. 94,825. 28,555. 66,270. nvestment is at risk. ne investment is not	· · ·	31	66	5,270.

#### The Example is Dan Designer

Dan runs a business from home. The business is a Sole Proprietor and he files a Schedule C. He is a 100% owner.

Review Line 31 to determine if just 1 Schedule C has been filed

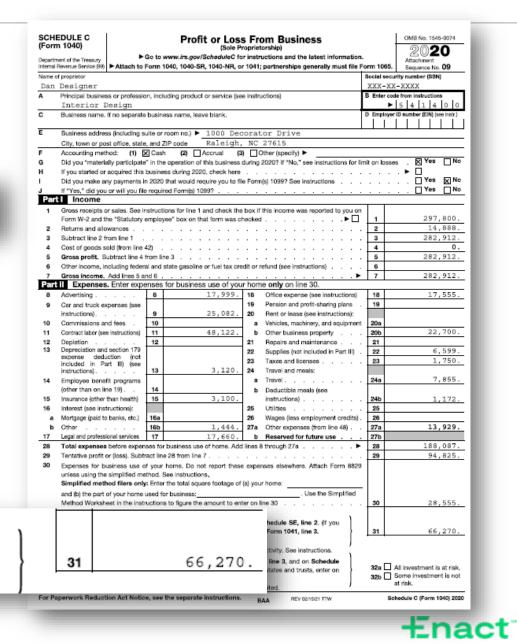


### Review Schedule C

#### Start with the Net Profit or Loss

If a loss, you must go to line 32.

_				
3	Schedule C - Profit or Loss from Business: Sole Proprietorship			
	a. Net Profit or Loss (Line 31)	+/-		
	-			
31	<ul> <li>Net profit or (loss). Subtract line 30 from line 29.</li> <li>If a profit, enter on both Schedule 1 (Form 1040), line 3, and on a checked the box on line 1, see instructions). Estates and trusts, enter of the second s</li></ul>		r.	



### Income Analysis Form 1084

	Subtotal Schedule C	=	66,270.00
	= Total Mileage Depreciation	+	0.00
	X Depreciation Rate (2020 - 27¢; 2019 - 26¢)		0.27
	Business Miles (Page 2, Part IV, Line 44a OR Related 4562, Line 30)		
	g. Amortization/Casualty Loss (Only add back Amort/CL - Review Schedule C Page 2, Part V*)	+	
	f. Business Use of Home (Line 30, Check applicable guidelines)	+	
	e. Non-deductible Meals and Entertainment Expenses (Line 24b)	-	
	d. Depreciation (Line 13)	+	
	c. Depletion (Line 12)	+	
	b. Nonrecurring Other (Income) Loss/Expenses (Line 6)	+/-	
	a. Net Profit or Loss (Line 31)	+/-	66,270.00
3	Schedule C – Profit or Loss from Business: Sole Proprietorshi	р	



#### b. Nonrecurring Other (Income) Loss/Expenses (Line 6)

Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) . . . . 6

\_\_\_\_\_\_

6

+/-

Examples include:

- Profit from postage, shipping or handling, if you track it separately
- Interest earned on notes or accounts receivable
- Bad debts you deducted in a previous year that were repaid (whole or in part) this year
- Cash prizes and awards that your business received, such as a \$500 prize from your local Chamber of Commerce for "Business of the Year"

Is "Other Income" Regular and Reoccurring? Is a Gas or Fuel Credit? Usually No - When in doubt - Take it out!



# Income Analysis Form 1084

3	Schedule C – Profit or Loss from Business: Sole Proprietorshi	р	
	a. Net Profit or Loss (Line 31)	+/-	66,270.00
	b. Nonrecurring Other (Income) Loss/Expenses (Line 6)	+/-	0.00
	c. Depletion (Line 12)	+	
	d. Depreciation (Line 13)	+	
	e. Non-deductible Meals and Entertainment Expenses (Line 24b)	_	
	f. Business Use of Home (Line 30, Check applicable guidelines)	+	
	g. Amortization/Casualty Loss (Only add back Amort/CL - Review Schedule C Page 2, Part V*)	+	
	Business Miles (Page 2, Part IV, Line 44a OR Related 4562, Line 30)		
	X Depreciation Rate (2020 - 27¢; 2019 - 26¢)		0.27
	= Total Mileage Depreciation	+	0.00
	Subtotal Schedule C	=	66,270.00



#### c. Depletion (Line 12)

12 Dep

Depletion . . . . .

12

3	Schedule C – Profit or Loss from Business: Sole Proprietorshi	р	
	a. Net Profit or Loss (Line 31)	+/-	66,270.00
	b. Nonrecurring Other (Income) Loss/Expenses (Line 6)	+/-	0.00
	c. Depletion (Line 12)	+	0.00
	d. Depreciation (Line 13)	+	
	e. Non-deductible Meals and Entertainment Expenses (Line 24b)	-	
	f. Business Use of Home (Line 30, Check applicable guidelines)	+	
	g. Amortization/Casualty Loss (Only add back Amort/CL - Review Schedule C Page 2, Part V*)	+	
	Business Miles (Page 2, Part IV, Line 44a OR Related 4562, Line 30)		
	X Depreciation Rate (2020 - 27¢; 2019 - 26¢)		0.27
	= Total Mileage Depreciation	+	0.00
	Subtotal Schedule C	=	66,270.00



#### d. Depreciation (Line 13)

-20

 13
 Depreciation and section 179

 expense
 deduction (not

 included
 in Part III) (see

 instructions).
 13

3,120.

3	Schedule C – Profit or Loss from Business: Sole Proprietorship	þ	
	a. Net Profit or Loss (Line 31)	+/-	66,270.00
	b. Nonrecurring Other (Income) Loss/Expenses (Line 6)	+/-	0.00
	c. Depletion (Line 12)	+	0.00
	d. Depreciation (Line 13)	+	3,120.00
	e. Non-deductible Meals and Entertainment Expenses (Line 24b)	_	
	f. Business Use of Home (Line 30, Check applicable guidelines)	+	
	g. Amortization/Casualty Loss (Only add back Amort/CL - Review Schedule C Page 2, Part V*)	+	
	Business Miles (Page 2, Part IV, Line 44a OR Related 4562, Line 30)		
	X Depreciation Rate (2020 - 27¢; 2019 - 26¢)		0.27
	= Total Mileage Depreciation	+	0.00
	Subtotal Schedule C	=	69,390.00
			]



+

#### e. Non-deductible Meals and Entertainment Expenses (Line 24b)

a   Travel.   .   .   24a   7,855.     b   Deductible meals (see   .   .   .	24	Travel and meals:		
	а	Travel	<b>24a</b> 7	,855.
	ь	Deductible meals (see		
instructions)	l	instructions)	24b 1	,172.

3	Schedule C – Profit or Loss from Business: Sole Proprietorshi	р	
	a. Net Profit or Loss (Line 31)	+/-	66,270.00
	b. Nonrecurring Other (Income) Loss/Expenses (Line 6)	+/-	0.00
	c. Depletion (Line 12)	+	0.00
	d. Depreciation (Line 13)	+	3,120.00
	e. Non-deductible Meals and Entertainment Expenses (Line 24b)	-	1,172.00
	f. Business Use of Home (Line 30, Check applicable guidelines)	+	
	g. Amortization/Casualty Loss (Only add back Amort/CL - Review Schedule C Page 2, Part V*)	+	
	Business Miles (Page 2, Part IV, Line 44a OR Related 4562, Line 30)		
	X Depreciation Rate (2020 - 27¢; 2019 - 26¢)		0.27
	= Total Mileage Depreciation	+	0.00
	Subtotal Schedule C	=	68,218.00



## Schedule C Meals

#### **Business meal expenses.**

You can deduct a percentage of the actual cost of a meal if the following conditions are met.

The meal expense was an ordinary and necessary expense in carrying on your trade or business;

The expense was not lavish or extravagant under the circumstances;

You or your employee was present at the meal;

The meal was provided to a current or potential business customer, client, consultant, or similar business contact; and

In the case of food or beverages provided during or at an entertainment event, the food and beverages were purchased separately from the entertainment, or the cost of the food and beverages was stated separately from the cost of the entertainment on one or more bills, invoices, or receipts.





### Schedule C Meals

#### Amount of deduction.

In most cases, you can deduct only 50% of your business meal expenses, including meals incurred while away from home on business. However, for individuals subject to the Department of Transportation (DOT) hours of service limits, that percentage is increased to 80% for business meals consumed during, or incident to, any period of duty for which those limits are in effect. Individuals subject to the DOT hours of service limits include the following.

Certain air transportation workers (such as pilots, crew, dispatchers, mechanics, and control tower operators) who are under Federal Aviation Administration regulations.

Interstate truck operators who are under DOT regulations.

Certain merchant mariners who are under Coast Guard regulations.

However, you can fully deduct meals and incidentals furnished or reimbursed to an employee if you properly treat the expense as wages subject to withholding. You also can fully deduct meals and incidentals provided to a nonemployee to the extent the expenses are includible in the gross income of that person and reported on Form 1099-NEC. See Pub. 535 for details and other exceptions.

www.irs.gov

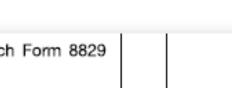


28,55

#### f. Business Use of Home (Line 30, Check applicable guidelines)

#### 30 Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method. See instructions. Simplified method filers only: Enter the total square footage of (a) your home: . Use the Simplified and (b) the part of your home used for business: Method Worksheet in the instructions to figure the amount to enter on line 30 . 30

#### Let's review the worksheet...



+

### 8829 Business Use of Home

	Form UUL3 File of Department of the Treasury Internal Revenue Service (99) Go to	- nly wi	ith Schedule C (Fe home you use	ISINESS USE O orm 1040). Use a sepa d for business during 129 for instructions an	arate Fo the yea	orm 8829 for each ar.		OMB No. 1545-0074		
	Name(s) of proprietor(s)							cial security number		
	Dan Designer						XXX-	XX-XXXX		
	Part I Part of Your Home Us	ed fo	or Business	Inter	ior I	Design				
	<ol> <li>Area used regularly and exclusion product samples (see instruct</li> <li>Total area of home</li> <li>Divide line 1 by line 2. Enter the</li> </ol>	ctions)	)		· ·		. 1	,		
	Jointe me r by me z. Enter me	resu		-			. 3	37.08 78		
Part	Figure Your Allowable Deduction		bus	iness, go to line 4.	All oth	ers, go to líne 7.				
8	Enter the amount from Schedule C, line 29, <b>plus</b> any gain derived from the business use of your home,	8	94,825, UIS	used per day	4		hr.			
	minus any loss from the trade or business not derived from the business use of your home. See instructions. See instructions for columns (a) and (b) before completing lines 9-22. (a) Direct expenses (b) Indirect expenses	8		are during the year,						
9	Casualty losses (see instructions) 9 8,250.	1			_	0 704				
10	Deductible mortgage interest (see instructions) . 10 23,111.				5	8,784	nr.			
11	Real estate taxes (see instructions) 11 18,400.		hal a	mount	6					
12	Add lines 9, 10, and 11						_			
13	Multiply line 12, column (b), by line 7		use	ed exclusively for bu	isiness	s, multiply line 6 t	by			
14	Add line 12, column (a), and line 13	14	23,642. s. er	nter the amount from	line 3		► 7	37.08 %		
15	Subtract line 14 from line 8. If zero or less, enter -0	15	71,183.					0,100 %		
16	Excess mortgage interest (see instructions) 16	-								
17 18	Excess real estate taxes (see instructions) 17	-		Part III Depreciati	on of Y	our Home		,		-
18	Insurance         18         3,909.           Rent         1         19	-								
20	Repairs and maintenance	-		37 Enter the smaller	of your	home's adjusted basi	s or its fa	ir market value. See instructio		
20	Utilities	-		38 Value of land inclu	uded on	line 37			38	
22	Other expenses (see instructions) 22 720.	-		39 Basis of building.	Subtrac	t line 38 from line 37			39	_
23	Add lines 16 through 22	1		5						_
24	Multiply line 23, column (b), by line 7	1								
25	Carryover of prior year operating expenses (see instructions) 25	1								
26	Add line 23, column (a), line 24, and line 25	26	9,147.	42 Depreciation allow	/able (se	e instructions). Multip	ly line 40	by line 41. Enter here and on I	line 30 above 42	
27	Allowable operating expenses. Enter the smaller of line 15 or line 26	27	9,147.	Part IV Carryover	of Una	llowed Expenses t	o 2021			
28	Limit on excess casualty losses and depreciation. Subtract line 27 from line 15	28	62,036.					than zero, enter -0	43	-
29	Excess casualty losses (see instructions)	_						-		
30	Depreciation of your home from line 42 below	-		44 Excess casualty log	osses ar	nd depreciation. Subtr	act line 3	3 from line 32. If less than zer	ro, enter -0 44	
31	Carryover of prior year excess casuality losses and depreciation (see instructions) 31			For Paperwork Reduction	Act Noti	ce, see your tax return	instructio	ns. BAA	REV 02/15/21 TTW	
32	Add lines 29 through 31	32 33	4,016.			-		<b>D</b> CC		
33 34	Allowable excess casualty losses and depreciation. Enter the <b>smaller</b> of line 28 or line 32 Add lines 14, 27, and 33	33	36,805.							
34	Casualty loss portion, if any, from lines 14 and 33. Carry amount to Form 4684. See instructions	34	8,250.							
36	Allowable expenses for business use of your home. Subtract line 35 from line 34. Enter here and on Schedule C, line 30. If your home was used for more than one business, see instructions.		28,555.							1
1.000	and on Schedule C, line 30. If your nome was used for more than one business, see Instructions.	36	28,555.							

376,000.

376,000. 139,421. 2.5641 % 4,016.

Form 8829 (2020)

**Enact** 

0. 0.

## Income Analysis Form 1084

3	Schedule C – Profit or Loss from Business: Sole Proprietorshi	р	
	a. Net Profit or Loss (Line 31)	+/-	66,270.00
	b. Nonrecurring Other (Income) Loss/Expenses (Line 6)	+/-	0.00
	c. Depletion (Line 12)	+	0.00
	d. Depreciation (Line 13)	+	3,120.00
	e. Non-deductible Meals and Entertainment Expenses (Line 24b)	-	1,172.00
	f. Business Use of Home (Line 30, Check applicable guidelines)	+	28,555.00
	g. Amortization/Casualty Loss (Only add back Amort/CL - Review Schedule C Page 2, Part V*)	+	
	Business Miles (Page 2, Part IV, Line 44a OR Related 4562, Line 30)		
	X Depreciation Rate (2020 - 27¢; 2019 - 26¢)		0.27
	= Total Mileage Depreciation	+	0.00
	Subtotal Schedule C	=	96,773.00



g. Am	nortization/Casualty	y Lo	ss (Only add bac	k Ar	nort/CL -		
Revie	w Schedule C Page	2, F	Part V*)		+		
-		-		-		-	
Par	till Expenses. Enter expe	enses	for business use of you	r hom	e <b>only</b> on line 30.		,
8	Advertising	8	17,999.	18	Office expense (see instructions)	18	17,555.
9	Car and truck expenses (see			19	Pension and profit-sharing plans .	19	
	instructions).	9	25,082.	20	Rent or lease (see instructions):		
10	Commissions and fees .	10		а	Vehicles, machinery, and equipment	20a	
11	Contract labor (see instructions)	11	48,122.	b	Other business property	20b	22,700.
12	Depletion	12		21	Repairs and maintenance	21	
13	Depreciation and section 179			22	Supplies (not included in Part III) .	22	6,599.
	expense deduction (not included in Part III) (see			23	Taxes and licenses	23	1,750.
	instructions).	13	3,120.	24	Travel and meals:		
14	Employee benefit programs			а	Travel	24a	7,855.
	(other than on line 19).	14		b	Deductible meals (see		
15	Insurance (other than health)	15	3,100.		instructions)	24b	1,172.

Line 27a reveals there are other expenses, let's review page 2...

1,444.

17,660.

25

26

b

Utilities .

Wages (less employment credits)

Reserved for future use . . . 27b

27a Other expenses (from line 48) .

25

26

27a



13,929.

16

17

а

b

Interest (see instructions):

Mortgage (paid to banks, etc.)

Other . . . . . .

Legal and professional services

16a

16b

17

### Income Analysis Form 1084

gifts		8,000
Printing		4,579
Magazines		250
Dues Statemer		1,100
Magazines Dues Statement # May say-		
	48	13,929

This section may indicate that the "other" expenses have been itemized on a statement.



## Income Analysis Form 1084

3	Schedule C – Profit or Loss from Business: Sole Proprietorshi	р	
	a. Net Profit or Loss (Line 31)	+/-	66,270.00
	b. Nonrecurring Other (Income) Loss/Expenses (Line 6)	+/-	0.00
	c. Depletion (Line 12)	+	0.00
	d. Depreciation (Line 13)	+	3,120.00
	e. Non-deductible Meals and Entertainment Expenses (Line 24b)	-	1,172.00
	f. Business Use of Home (Line 30, Check applicable guidelines)	+	28,555.00
	g. Amortization/Casualty Loss (Only add back Amort/CL - Review Schedule C Page 2, Part V*)	+	0.00
	Business Miles (Page 2, Part IV, Line 44a OR Related 4562, Line 30)		
	X Depreciation Rate (2020 - 27¢; 2019 - 26¢)		0.27
	= Total Mileage Depreciation	+	0.00
	Subtotal Schedule C	=	96,773.00



Business Miles (Page 2, Part IV, Line 44a OR Related 4562, Line 30)		
X Depreciation Rate (2020 - 27¢; 2019 - 26¢)		0.27
= Total Mileage Depreciation	+	0.00

If the customer has entered expenses on Line #9 they will have an entry on Part IV or a 4562 will be attached.

Par	t II Expenses. Enter expe	enses for business use of you		
8	Advertising	8 17,999.		
9	Car and truck expenses (see instructions).	9 25,082.		
Part	internation on rou	Vehicle. Complete this part only if you ar o file Form 4562 for this business. See the		
43	When did you place your vehicle i	in service for business purposes? (month/day/year)	▶	
44	Of the total number of miles you o	drove your vehicle during 2020, enter the number of r	miles you used your vehicle for:	
а	Business	<b>b</b> Commuting (see instructions)	<b>c</b> Other	
45	Was your vehicle available for per	rsonal use during off-duty hours?		Yes No
46	Do you (or your spouse) have and	ther vehicle available for personal use?		Yes No
47a	Do you have evidence to support	your deduction?		Yes No

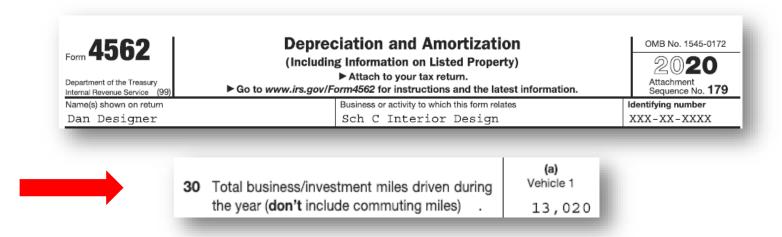
#### Let's look for the 4562...



	age 2				Form 4562 (2020)
4562	Depreciatio	on and A	mortizatior	OMB No. 1545-0172	Part V Listed Property (Include automobiles, certain entertainment, recreation, or amusement.)
Form	(Including Info			2020	Note: For any vehicle for which you are using the standa
and the second start	► Go to www.irs.gov/Form456		ons and the latest	t information. Attachment Sequence No. 179	24b, columns (a) through (c) of Section A, all of Section B
Name(s) shown on return Dan Designer			which this form relates or Design	Identifying number XXX-XX-XXXX	
Part I Election To Exper	nse Certain Property Und	der Section	179		Section A—Depreciation and Other Information (Caution:
1 Maximum amount (see ins	any listed property, comple				24a Do you have evidence to support the business/investment use claimed?
2 Total cost of section 179 p 3 Threshold cost of section 1 4 Reduction in limitation. Su	property placed in service (se 179 property before reduction	e instructions n in limitation	s)	<b>2</b> 3,976. <b>3</b> 2,590,000.	(a) (b) (c) (e) Type of property (list Date placed Business/ (d) Basis for depr
5 Dollar limitation for tax y separately, see instruction	year. Subtract line 4 from lin	ne 1. If zero	or less, enter -	0 If married filing	vehicles first) in service investment use Cost or other basis (business/inve use onl
6 (a) Description			iness use only)	3 1,040,000.	
Embroidery Machine			1,999.	Page PartV Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used	25 Special depreciation allowance for qualified listed property pl
Sony Video Camera	amount from line 20	L	1,977.	entertainment, recreation, or amusement.) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 2	the tax year and used more than 50% in a qualified business u
<ul> <li>7 Listed property. Enter the a</li> <li>8 Total elected cost of section</li> </ul>				24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.  Section A – Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)	
<ol> <li>9 Tentative deduction. Enter</li> </ol>				24a Do you have evidence to support the business/investment use claimed? 🛛 Yes 🗌 No 🛛 24b If "Yes," is the evidence written? 🖾 Yes 🗋 N	20 Property used more than 50% in a qualified business use:
10 Carryover of disallowed de				(a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	2018 Mercedes Benz GLS 01/01/2018 83.11 %
11 Business income limitation.				e 5. Vencial legreciation allowance for qualified listed property placed in service during	2010 NEICeues BEILZ 013 01/01/2010 05.11 /0
12 Section 179 expense dedu				<ol> <li>the tax year and used more than 50% in a qualified business use. See instructions . 25</li> </ol>	%
13 Carryover of disallowed de	eauction to 2021. Add lines 9			13 26 Property used more than 50% in a qualified business use:	
Note: Don't use Part II or Part I	III below for listed property. In	netoord use D	art V	2018 Marcedes Bata GLS 01/01/2018 83.11.96	04
Note: Don't use Part II or Part I Part II Special Depreciati				99	%
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X Depreciation	Rate (2020 - 27¢; 201	9-26¢)		0.27
= Total Mileage	Depreciation			0.00

If the customer has entered expenses on Line #9 they will have an entry on Part IV or a 4562 will be attached.



If the borrower has a 4562 with related vehicle expenses, there is a Schedule C Car & Truck Worksheet. However, it is NOT included in the clients copy. The detailed copy typically is the tax preparer's files only. The Worksheet will give you the line itemized expenses totaling the line #9 amount.



## Income Analysis Form 1084

3	Schedule C – Profit or Loss from Business: Sole Proprietorship					
	a. Net Profit or Loss (Line 31)	+/-	66,270.00			
	b. Nonrecurring Other (Income) Loss/Expenses (Line 6)	+/-	0.00			
	c. Depletion (Line 12)	+	0.00			
	d. Depreciation (Line 13)	+	3,120.00			
	e. Non-deductible Meals and Entertainment Expenses (Line 24b)	-	1,172.00			
	f. Business Use of Home (Line 30, Check applicable guidelines)	+	28,555.00			
	g. Amortization/Casualty Loss (Only add back Amort/CL - Review Schedule C Page 2, Part V*)	+	0.00			
	Business Miles (Page 2, Part IV, Line 44a OR Related 4562, Line 30)		13,020.00			
	X Depreciation Rate (2020 - 27¢; 2019 - 26¢)		0.27			
	= Total Mileage Depreciation	+	3,515.40			
	Subtotal Schedule C	=	100,288.40			



Subtotal Schedule C		=	100,288.40	0.00

#### If a two-year average must be considered you must complete both years.

#### **Income Trending**

After the monthly year-to-date income amount is calculated, it must be compared to prior years' earnings using the borrower's W-2's or signed federal income tax returns (or a standard Verification of Employment completed by the lender or third-party employment verification vendor)

- If the trend in the amount of income is stable or increasing, the income amount should be averaged
- If the trend was declining, but has since stabilized and there is no reason to believe that the borrower will not continue to be employed at the current level, the current, lower amount of variable income must be used
- If the trend is declining, the income may not be stable. Additional analysis must be conducted to determine if any variable income should be used, but in no instance may it be averaged over the period when the declination occurred



# Self-Employment Fannie Mae

The lender must prepare a written evaluation of its analysis of a self-employed borrower's personal income, including the business income or loss, reported on the borrower's individual income tax returns. The purpose of this written analysis is to determine the amount of stable and continuous income that will be available to the borrower. This is not required when a borrower is qualified using only income that is not derived from self-employment and self-employment is a secondary and separate source of income (or loss). Examples of income not derived from self-employment include salary and retirement income.

The lender may use Form 1084 or any other type of cash flow analysis, including automated tools, that applies the same principles as Fannie Mae's form.

A copy of the written analysis must be included as part of any loan application package that the lender submits to Fannie Mae for a mortgage that is selected for a post-purchase quality control review.

The lender may use a Fannie Mae-approved vendor tool to complete the written analysis and calculate selfemployment income. The lender may receive representation and warranty enforcement relief of the calculated amount if certain requirements are met. See <u>A2-2-04</u>, Limited Waiver and Enforcement Relief of Representations and Warranties for Mortgages Submitted to DU and Fannie Mae's website for the list of <u>Approved Vendor Tools</u>.

https://selling-guide.fanniemae.com/

Fannie Mae 2021 Selling Guide B3-3.2-01, Underwriting Factors and Documentation for a Self-Employed Borrower (12/04/2018)



#### Effective for applications taken June 11, 2020 and until further notice

#### Requirements for borrowers using self-employment income to qualify

**Effective:** These policies became effective for loans with application dates on or after Jun. 11, 2020. The updated requirements to obtain three business depository account statements (increased from two statements) with an unaudited profit and loss statement and to review the depository account statements to support the level of business revenue reported in the current YTD profit and loss statement were effective for loan applications dated on and after Dec. 14, 2020. All policies are effective until further notice.

#### **Income Analysis**

Self-employment income is variable in nature and generally subject to changing market and economic conditions. Whether a business is impacted by an adverse event, such as COVID-19, and the extent to which business earnings are impacted can depend on the nature of the business or the demand for products or services offered by the business. Income from a business that has been negatively impacted by changing conditions is not necessarily ineligible for use in qualifying the borrower. However, the lender is required to determine if the borrower's income is stable and has a reasonable expectation of continuance.

Due to the pandemic's continuing impact on businesses throughout the country, lenders are now required to obtain the following additional documentation to support the decision that the self-employment income meets our requirements:

- an audited year-to-date profit and loss statement reporting business revenue, expenses, and net income up to and
  including the most recent month preceding the loan application date; or
- an unaudited year-to-date profit and loss statement signed by the borrower reporting business revenue, expenses, and
  net income up to and including the most recent month preceding the loan application date, and three business
  depository account(s) statements no older than the latest three months represented on the year-to-date profit and loss
  statement.
  - For example, the business depository account statements can be no older than Aug, Sep, Oct. for a year-to-date profit and loss statement dated through Oct. 31.
  - The lender must review the three most recent depository account statements to support the level of business revenue reported in the current year-to-date profit and loss statement. Otherwise, the lender must obtain additional statements or other documentation to support the on-going nature of business revenue reported in the current yearto-date profit and loss statement.

**NOTE:** The year-to-date profit and loss statement must be no older than 60 days old as of the note date consistent with current <u>Age of Documentation</u> requirements below.



#### Effective for applications taken June 11, 2020 and until further notice

Lenders must review the profit and loss statement, and business depository accounts if required, and other relevant factors to determine the extent to which a business has been impacted by COVID-19. The lender can use the following guidance when performing the assessment of business operations and stability and must complete the business income assessment based on the minimum additional documentation above. In some instances, the lender may find it necessary to obtain supplemental documentation listed in the examples below.

Assessing the Impact of COVID-19					
Business operations	<ul> <li>Have business operations been maintained or modified to support continued business income?</li> <li>For example, review an updated business plan.</li> </ul>				
	<ul> <li>Is the business continuing to operate in the current location or an alternate location suitable for business operations?</li> <li>For example, perform an Internet search or verify through a third-party source.</li> </ul>				
	<ul> <li>Is there a demand for the product or service currently offered by the business?</li> <li>For example, obtain current business receipts or purchase contracts.</li> </ul>				
	<ul> <li>Is the business operation and/or revenue temporarily restricted due to state shelter in place, stay at home or other similar state or local orders?</li> </ul>				
	• Is the impact to the business operations negligible due to the nature of the business? For example, obtain a written explanation from the business owner or confirmation that income is seasonal apart from the event timeline.				



#### Effective for applications taken June 11, 2020 and until further notice

Business Income	<ul> <li>The lender must complete a business income assessment by comparing the year-to-date net business income from the year-to-date profit and loss statement to historical business income calculated using the <i>Cash Flow Analysis</i> (Form 1084)* for a similar timeframe (such as monthly).</li> <li>Lenders can make standard adjustments to business cash flow (net income on the profit and loss statement) in accordance with <u>B3-3.4-04</u>, Analyzing Profit and Loss Statements when making this determination.</li> </ul>
	<ul> <li>When the lender determines net business income is impacted, but profit and loss details are not sufficient to determine the income is stable at the reduced level, the lender can obtain additional documentation to supplement the profit and loss statement (such as a month-to- month income trending analysis) to make this determination. If stability cannot be confirmed, the income is not eligible for qualifying purposes. See <u>B3-3.1-01</u>, General Income Information for details.</li> </ul>
	Example Historical monthly self-employment income calculated using Form 1084 = \$2,000 Current level of stable monthly self-employment income as determined by the lender using details from the year-to-date profit and loss statement and other supplemental documentation = \$1,000
	The impact of the COVID 19 pandemic on current business income results in a 50% decline from historical levels. See <u>Business Income Calculation Adjustment</u> below for next steps. *Form 1084 or any other type of cash flow analysis form that applies the same principles.



#### Effective for applications taken June 11, 2020 and until further notice

Business Stability	<ul> <li>Does the profit and loss identify a significant imbalance between expenses and revenue that may impact financial stability? Or have modifications to current business operations been made to correct this imbalance? (Consider documenting with an updated business plan)</li> </ul>
	<ul> <li>Do prior year business tax returns demonstrate ample financial liquidity due to a history of retained earnings?</li> </ul>
	<ul> <li>Do current business account balances (excluding Paycheck Protection Program (PPP) or other similar COVID-19 related loans or grants) support the financial ability of the business to operate given current market and economic conditions?</li> </ul>
	A current balance sheet may be used to support the lender's determination of business stability, in conjunction with the profit loss statement.



# Business Income Calculation Adjustment

#### Effective for applications taken June 11, 2020 and until further notice

#### **Business Income Calculation Adjustment**

When the lender determines current year net business income has been impacted by the COVID-19 pandemic and is

- less than the historical monthly income calculated using Form 1084, but is stable at its current level, the lender must reduce the amount of qualifying income calculated using Form 1084 to no more than the current level of stable income as determined by the lender (see Business Income above).
- more than the historical income calculated using Form 1084, the lender must use no more than the currently stable level
  of income calculated using Form 1084 to qualify the borrower.

In all cases, qualifying income must be supported by documentation, including any supplemental documentation obtained by the lender.





### The Process

#### Use the P & L Calculator to Adjust the Income From the P & L

Click on tab for type of business you are reviewing

	CO)///	0-19 Guidance Resourc		
& L Net Income	+/-	-19 Guidance Resourc	e	
epreciation	+			
epletion	+			
mortization	+			
Ion-recurring Casualty Loss	+			
,				
lon-recurring Income	-			
other	-			
& L Business Sub-total	=	\$0.00		
6 of Ownership from K-1	%			
otal Net Business Income*	=	\$0.00		
Lenders may want to consider cu	rrent business liqu	idity/solvency before co	nsideration of business incon	ne



### Business Stability And Income Worksheet

<b>Enact</b> <sup>®</sup>	Business Stability and Income Review Worksheet & UW Certification					
	COVID-19 Guidance Resource					
Lender Loan #:						
Borrowers Name:						
Business Name:						
Tax form:	Tax Form (1065/1120S/1120/Schedule C/Schedule F)					
Income Assessment comparing YTE	) net business income from the year to date P&L statement to historical business income					
Cash Flow Analysis for tax returns pr Year(s) used for qualifying income Total Net Business Income W2 Earnings from business	ovided in file Year used for Qualifying Income Select option that corresponds to Year/Years used for Total Qualifying Income from Business (for example - 2019 "if 2019 was used for qualifying purposes, o "This amount should be the Total Business Income you calculated for that individual business per Self-Employed Cash Flow Analysis Form in file "This should be Borrower's W2 Earnings from the associated Business if applicable					
Historical Business Income used to Qualify:	\$0.00 Based on Self-Employed Cash Flow Analysis Form in file - "this amount should correspond with Total New Business Income above (B15 + B16) / 12 months					
P&L Analysis - <b>*Make sure to co</b> Total Net Business Income W2 Earnings/guaranteed payments from business Number of Months Covered Net Income / Number of Months Covered	#DIV/0!       Period ending date of P&L (Enter Month/Day/Year)         #DIV/0!       Period ending date of P&L (Enter Month/Day/Year)         'Verify the consistency of the declared expenses on the P&L to the historical expenses declared on the business tax return					
Business Income Calculation Adjust	tment when the lender determines current year net business income has been impacted by Covid19					
#DIV/0!	1)If current business income impacted by Covid19 is less than historical monthly income calculated using the Form 1084/91 Cash Flow Analysis, but is stable at its current level, reduce the amount of qualifying income calculated on the Cash Flow Analysis to no more than the current level of stable income as determined by the business income adjustments 2)If current business income impacted by Covid19 is more than the historical income calculated using the Form 1084/91 Cash Flow Analysis, no more than the current stable level of income calculated using Form 1084 can be used to qualify the borrower					
This amount is lessor of Scenario 1 & 2 for qualifying- However, IF income is NOT stable, NO income can be used to qualify						
<u>LINKS to Fannie Mae / Freddie Mac Bulletins for details on how to Assess the Impact of COVID-19 on Business:</u> LINK to Fannie Mae Bulletin for additional details LINK to Freddie Mac Bulletin for additional details						



### Business Stability And Income Worksheet

#### Confirm the following to Assess the Impact of COVID-19 to Business Operation:

Have business operations been maintained or modified to support continued business income? Is the business continuing to operate in the current location or an alternate location suitable for business operations? Is there a demand for the product or service currently offered by the business? Is the business operation and/or revenue temporarily restricted due to state shelter in place, stay at home or other similar state or local orders?

is the business operation and/or revenue temporarily restricted due to state shelter in place, stay at nome or other similar state or local orders: Is the impact to the business operations negligible due to the nature of the business?

#### Confirm the following to Assess the Impact of COVID-19 to Business Stability:

Does the P&L identify a significant imbalance between expenses and revenue that may impact financial stability? Or have modifications to current business operations been made to correct this imbalance? Do prior years business tax returns demonstrate ample financial liquidity due to a history of retained earnings? Do current business account balances (excluding Paycheck Protection Program) PPP or other similar Covid19 related loans or grant(s) support the financial ability of the business to operate given current market and economic conditions?

$\vdash$	
(Yes,No,N/A)	

(Yes,No,N/A)

#### BUSINESS ASSETS REVIEWED: "Only required if Unaudited P&L or Additional Documentation is required

	Month One	Month Two		Month Three		
Bank Name:		Bank Name:	Bank Name:			
Beginning Balance		Beginning Balance	Beginning Balance			
Deposits		Deposits	Deposits			
Debits and Checks		Debits and Checks	Debits and Checks			
Ending Balance		Ending Balance	Ending Balance			
	Month One	Month Two		Month Three		
Bank Name:		Bank Name:	Bank Name:			
Beginning Balance		Beginning Balance	Beginning Balance			
Deposits		Deposits	Deposits			
Debits and Checks		Debits and Checks	Debits and Checks			
Ending Balance		Ending Balance	Ending Balance			
	Month One	Month Two		Month Three		
Bank Name:		Bank Name:	Bank Name:			
Beginning Balance		Beginning Balance	Beginning Balance			
Deposits		Deposits	Deposits			
Debits and Checks		Debits and Checks	Debits and Checks			
Ending Balance		Ending Balance	Ending Balance			

Reminder: Any Paycheck Protection Program (PPP) Funds or other similar COVID-19 related loans or grants must be excluded from Deposits and Qualifying Balance

Confirm business is depositing sufficient funds to support income used in qualifying

I certify that I have reviewed the required documentation and validated that the income from all qualifying businesses is acceptable to proceed

Date

Underwriter Name

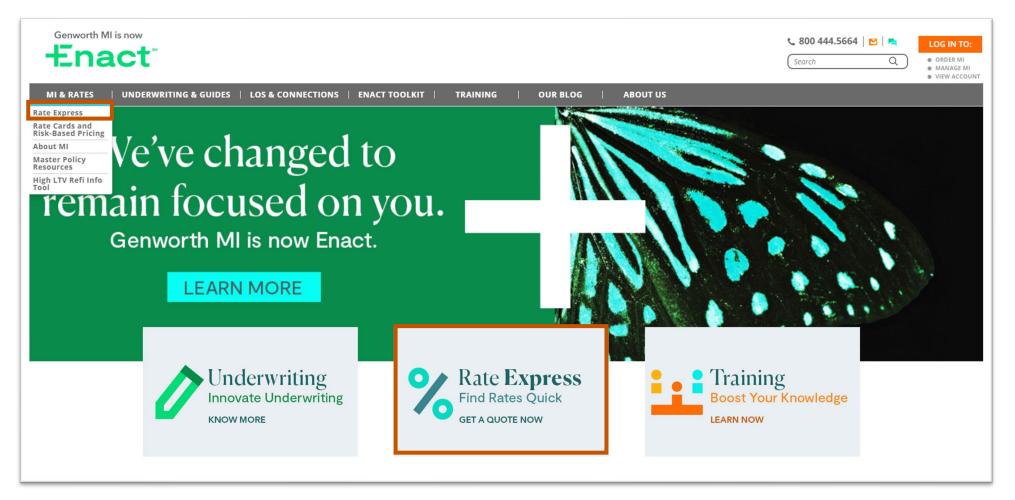
We offer this calculator to help you with calculating and analyzing purposes.

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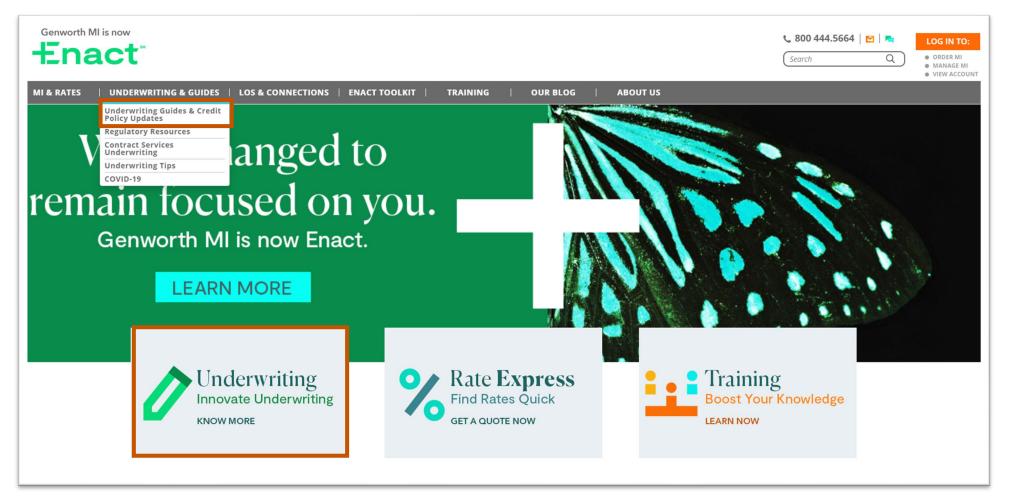


# Enact Rate Express<sup>®</sup>



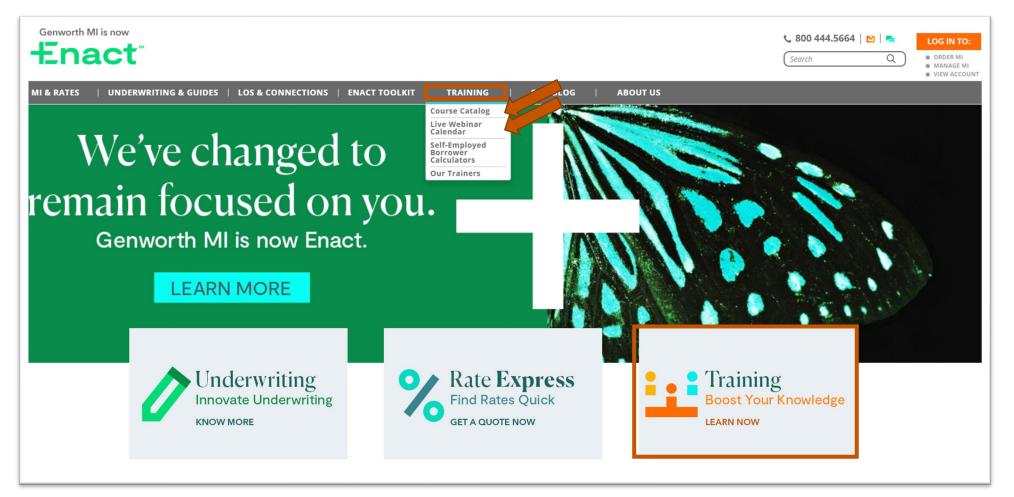


# Enact Underwriting Guidelines



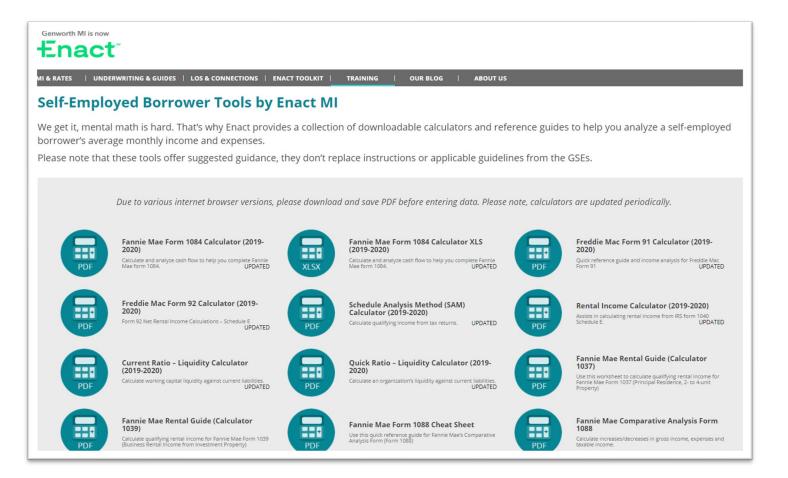


### Enact Training Resources





### Enact Training Resources





### Your Enact Resources

- ActionCenter<sup>®</sup> : 800 444.5664
- Your Local Enact Regional Underwriter
- Your Enact Sales Representative



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