



**Self-Employment Income Form
Emergency Rental Assistance Program**

Any applicant who is self-employed should complete this form if they are submitting current income OR if they are submitting 2020 income and have not yet filed taxes. You may submit a copy of the 2020 tax return in place of this form.

Name of person who has self-employment income: _____

Company Name (if applicable): _____

Company Address: _____

Date of Income Reported (MM/DD/YY – MM/DD/YY): _____

Describe what you did to earn this money (be specific):

Self-Employment Expenses Calculation

List your business expenses. Enter the dates you paid the expenses and amount of each expense. Add the amounts and enter your total in the box "Total Expenses."

IMPORTANT: Please submit receipts, invoices, or other verifying papers in addition to this form.

| Date | Expenses | Amount |
|-------------------------|----------|--------|
| | | |
| | | |
| | | |
| | | |
| Total Expenses = | | |

Self-Employment Income Calculation

List the dates you received the income, your sources of income, and the amounts. Add the amounts and enter your total in the box "Total Income." Under the "Total Income" box, enter your total expenses. Subtract your total expenses from the total income and enter your "Net Self Employment Income."

IMPORTANT: Please submit receipts, invoices, or other verifying papers in addition to this form.

| Date | Income Source | Amount |
|-------------------------------------|---------------|--------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total Income = | | |
| Subtract Expenses = | | |
| Net Self Employment Income = | | |

I attest that the above information is true, correct, and complete to the best of my knowledge. I understand that submitting false, misleading, or incomplete information may result in termination of participation in the Program.

Signature

Date

Signature of Person Helping Complete Form
(if Applicable)

Date