



Annual Statement of Business Income

Head of Household Name: _____

Business Address: _____

Name of Self-Employed Person: _____

Business Name: _____

Type of Business: _____

Business Start Date: _____

Timeframe provided (must be the last 12 months): _____ to _____

If you have filed a tax return for the previous year, you must provide a copy of your most recent tax return, including form 1040, Schedule C and Schedule SE if applicable. If you did not file a tax return, the attached Statement of Income and Expenses form must be filled out for each month which income was received. Please note that DCA uses the IRS Self Employment Guidelines for expenses and deductions.

Gross Income

Gross Receipts or Sales	\$ _____
Total of Gross Income	\$ _____

Business Expenses

Employee's salaries	\$ _____
Cost of Materials/Goods/Inventory	\$ _____
Rent for business	\$ _____
Tax on Business Property	\$ _____
Business Phone/Utilities	\$ _____
Vehicle Expense/Mileage (Not to and from home)	\$ _____
Advertising	\$ _____
Insurance/Worker's Compensation	\$ _____
Interest on Business Loans	\$ _____
Legal/Professional fees	\$ _____
Repairs	\$ _____
Other: _____	\$ _____
Total Business Expenses	\$ _____

Total Gross Income \$ _____ Less Total Expenses \$ _____ = Net Income \$ _____

I certify that all the information provided on this form is true and complete to the best of my knowledge and belief. I know that I am required to provide documentation of income and expenses with this form. I understand if I don't provide adequate documentation my housing assistance could be terminated. I know that it is my responsibility to report any increase in my self-employment income within 10 business days of the effective date of the change.

Signature

Date