

Do not use this form if you submitted your most recent (current) federal tax return. Use this form **ONLY** if you have filed an extension on your federal tax return or your income has changed **drastically in the last year**. Your income must be reported on an IRS Schedule C. Please complete and send the following:

- Send monthly business ledgers or detailed profit and loss transaction statements for the six months before the month you sign the application.
- Send a copy of your federal tax return extension.
- Fill out Sections A, B, and C. Sign and date this form.
- If your business is a **corporation or partnership** (you complete IRS Schedule E) **fill out the Corporation/Partnership Income Worksheet included in the Other Forms Packet**.
- If your business is a **LLC**, call FHIAP at 888-564-9669. Be sure to ask for a self-employment specialist. We will tell you what parts of the worksheet to fill out.
- If your income is from **fishing** (you complete IRS Schedule C) **fill out the Farming, Ranching, and Fishing Income Worksheet included in the Other Forms Packet**.

A — Business Information


Name	Business name
Business address	Type of business

B — Gross Receipts Received

Please list all business income/gross receipts received in the six months **before** the month you sign your application for FHIAP. List gross receipts before any expenses are subtracted.

	<i>Name months</i>					
Name month you sign application _____						
Income Source (please list):						
Income Source (please list):						
Total Income/Gross Receipts:						

C — Business Expenses

You may choose one of two ways to figure your income. You can either have FHIAP reduce your gross business receipts by 50 percent, or reduce your gross business receipts using actual allowable expenses. Use the method that will help you the most. We will not go back and re-figure your eligibility using the other method. If you are not sure which way to figure your income, call 888-564-9669 and ask for a self-employment eligibility specialist. 

To have FHIAP take a 50% deduction for your expenses from your total gross receipts, check this box:

If you checked the box above, all you need to do is sign on the next page!

If you want FHIAP to deduct your actual allowable expenses, do not check the box. Turn the page and complete Section C.

C — Business Expenses, *continued*

Name months

Name month you sign application _____						
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Expenses

1) Wholesale cost of inventory purchased						
2) *Employee wages/benefits/payroll taxes						
3) Business property: rent paid (<i>see #11** below</i>)						
4) Business property: utilities (<i>see #11** below</i>)						
5) Business insurance, taxes, and assessments						
6) Licenses, permits, legal, and professional fees						
7) Operating supplies (<i>office supplies, postage</i>)						
8) Equipment rental/service/repair/maintenance						
9) Equipment purchase/machinery/durable goods						
10) Business telephone expense						
11) Advertising						
12) Interest on business loans						
13) Mileage/transportation costs <i>(see Self-Employment Instructions)</i>						
14) Bad debt (<i>write offs</i>)						
15) Other expenses (<i>use separate sheet</i>)						
Total Expenses:						

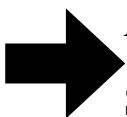
***Do not include wages, benefits, taxes, etc. for family members**

The following costs are NOT allowable business expenses:

- | | |
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| <ol style="list-style-type: none"> 1. Meals for the applicant, spouse, or dependents 2. Payments on the principal of the purchase price of income-producing real estate 3. Federal, state, and local income taxes 4. Draws or salaries paid to any family member and related payroll expenses 5. Money allocated for personal retirement 6. Work-related personal expenses (personal business, entertainment, etc.) 7. Depreciation | <ol style="list-style-type: none"> 8. Costs related to traveling to another area when there is no reasonable possibility of deriving income from the trip 9. Interest or fees on credit cards 10. Personal telephone charges 11. **The costs of real property used as both a home and a business, unless the real property (including utilities) used for a business is separate from the dwelling. <i>For more information see the Sample Self-Employment Worksheet and Instructions in the Other Forms Packet.</i> |
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By signing this worksheet, I declare that the information submitted on this form is true, and if my file is chosen for a quality assurance audit, I agree to cooperate and furnish documentation verifying this information. I also understand by giving false, incomplete, or misleading information could cause an overpayment of benefits that I must repay for subsidy I was not eligible to receive.

Sign here



Applicant's signature: _____ Date: _____

Spouse's signature: _____ Date: _____