

LOAN CENTRAL **2020 SELF EMPLOYMENT INFORMATION** **(Schedule C or Schedule CEZ)**

BUSINESS INFORMATION & INCOME

Type of business _____ Business Phone _____

Business Name _____ Date Business Started _____

Business Address _____

Owner of business is the Applicant or Co-applicant Business License Number _____

YES NO Is this the first time filing taxes on this business? Start Date of Business: _____

2020 Business Income \$ _____

Start Inventory \$ _____ End Inventory \$ _____

YES NO Do you have receipts or bank statements to verify your income from your business that you can provide us?

IF YOU DO NOT HAVE RECORDS, WE ARE UNABLE TO PREPARE YOUR 2020 TAX RETURN!

What type of services did you provide? _____

Was the service you provided done in YOUR home? YES NO

If you have a house cleaning or lawnmowing business, did you provide the supplies and/or equipment? YES NO

Did you work a minimum of 500 hours in 2020? YES NO

For child care, home health care, house cleaning, and lawnmowing businesses, etc. please list your primary clients & numbers:

- 1 _____
 - 2 _____
 - 3 _____
- ...continue on back if more

Please list income for each person you worked for: 1.\$ _____, 2.\$ _____, 3.\$ _____ ...cont on back if needed

BUSINESS EXPENSE INFORMATION

YES NO Did you have any expenses for your business 2020?

YES NO Do you have receipts for your expenses for your business that you can provide us?

IF YOU DO NOT HAVE RECORDS, WE ARE UNABLE TO PREPARE YOUR 2020 TAX RETURN!

If yes, please provide the following Business Expense information:

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---------------|----------|---------------------|----------|------------------|----------|-------------|----------|----------------|----------|-----------------------|----------|------------------------------|----------|------------------------------|----------|---------------------------|----------|-------------------|----------|-------------------|----------|---|-------------------|----------|------------------|----------|-------------------------|----------|----------------------|----------|----------|----------|--------------------|----------|--------------------------|----------|---------------------------|----------|----------|----------|----------------------|----------|
| <table border="0" style="width: 100%;"> <tr><td>1 Advertising</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>2 Commission & Fees</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>3 Contract Labor</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>4 Depletion</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>5 Depreciation</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>6 Emp Benefit Program</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>7 Insurance(excludes health)</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>8 Business Mortgage Interest</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>9 Other Business Interest</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>10 Legal Services</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>11 Office Expense</td><td style="text-align: right;">\$ _____</td></tr> </table> | 1 Advertising | \$ _____ | 2 Commission & Fees | \$ _____ | 3 Contract Labor | \$ _____ | 4 Depletion | \$ _____ | 5 Depreciation | \$ _____ | 6 Emp Benefit Program | \$ _____ | 7 Insurance(excludes health) | \$ _____ | 8 Business Mortgage Interest | \$ _____ | 9 Other Business Interest | \$ _____ | 10 Legal Services | \$ _____ | 11 Office Expense | \$ _____ | <table border="0" style="width: 100%;"> <tr><td>12 Rent Machinery</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>13 Business Rent</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>14 Repairs for Business</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>15 Business Supplies</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>16 Taxes</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>17 Business Travel</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>18 Meals & Entertainment</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>19 Utilities for Business</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>20 Wages</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>21 Cost of Materials</td><td style="text-align: right;">\$ _____</td></tr> </table> | 12 Rent Machinery | \$ _____ | 13 Business Rent | \$ _____ | 14 Repairs for Business | \$ _____ | 15 Business Supplies | \$ _____ | 16 Taxes | \$ _____ | 17 Business Travel | \$ _____ | 18 Meals & Entertainment | \$ _____ | 19 Utilities for Business | \$ _____ | 20 Wages | \$ _____ | 21 Cost of Materials | \$ _____ |
| 1 Advertising | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 Commission & Fees | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3 Contract Labor | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4 Depletion | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5 Depreciation | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6 Emp Benefit Program | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7 Insurance(excludes health) | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8 Business Mortgage Interest | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 9 Other Business Interest | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 10 Legal Services | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11 Office Expense | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12 Rent Machinery | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 13 Business Rent | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 14 Repairs for Business | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 15 Business Supplies | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 16 Taxes | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 17 Business Travel | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18 Meals & Entertainment | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 19 Utilities for Business | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 20 Wages | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 21 Cost of Materials | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

TOTAL EXPENSE \$ _____

Car & Truck Expense: Actual miles driven from 1/1/20 to 12/31/20 _____ Miles for Job _____
or Actual expenses \$ _____

Year & Make of Auto _____ Date Car or Truck was put into service: _____

YES NO Do you have written evidence of mileage?

APPLICANT(S) CERTIFICATION

By signing below: You hereby certify that you have accurately provided Loan Central with your business information. You further certify that you have provided Loan Central with ALL of your business income and ALL of your business expense and can provide documentation, if needed. You understand that this information will be provided to the IRS and that you are responsible to maintain all your records.

Owner of Business Date