

**Getting Started & the Sole Proprietor** 

**MGIC** 



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#### What do I need to start?

#### Loan application

• Tells borrower's story

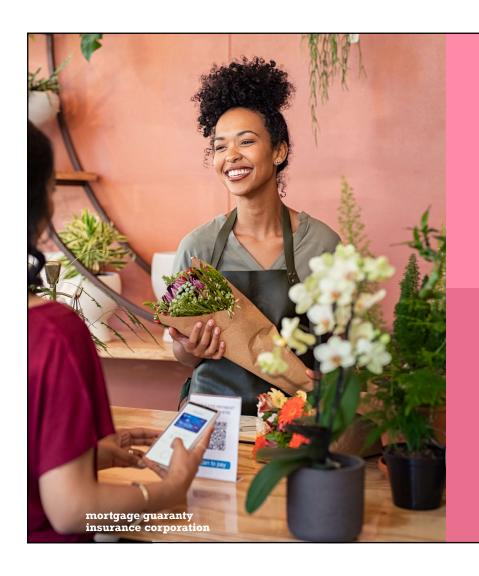
#### **Tax returns**

- Personal
- Business
- 1 or 2 years of each

#### Worksheet

• Documents your decisions





# Who is self-employed?

Any individual who has a 25% or greater ownership interest in a business.

#### The Uniform Residential Loan Application (URLA)

Employer or Business Name	Phone ( ) -	Gross Monthly Income
Street	Unit #	Base \$/mor
City State	ZIP Country	Overtime \$/mor
		Bonus \$/mor
Position or Title	Check if this statement applies:	Commission \$ /mor
Start Date / (mm/dd/yyyy) How long in this line of work? Years Months	I am employed by a family member, property seller, real estate agent, or othe	r Military Entitlements \$ /mor
	party to the transaction.	Other \$ /mor
Check if you are the Business I have an ownership sh Owner or Self-Employed X I have an ownership sh		TOTAL \$ 0.00/mor

# When can self-employment income be used?

## A 2-year history is required

### Exceptions – with at least a 12-month history

- a) Borrower receiving same or greater income in similar field or position
- b) Borrower in a similar occupation in which they had similar responsibilities

# When can self-employment income be used?

## Business must be financially stable

- 1. Do business earnings trends support the likelihood that cash flow will continue?
- 2. Will the business generate sufficient income AND is there a history of distributing income to the borrower?



## Cash flow worksheets

(4) Fannie Mae Cash Flow Analysis (Form 1084) Business Name (optional): \_ This worksheet may be used to prepare a written evaluation of the analysis of income related to self-employment. The purpose of this written analysis is to determine the amount of stable and continuous income that will be available to the borrower for lean qualifying purposes. IRS Form 1040 - Individual Income Tax Return 1. W-2 Income from Self-Employment 2. Schedule B – Interest and Ordinary Dividends a. Interest Income from Self-Employment
 b. Dividends from Self-Employment 3. Schedule C - Profit or Loss from Business: Sole Schedule C – Profit or Loss from Business: Sa. Net Profit or (Loss)
b. Nonrecurring Other (Income) Loss/Expenses
c. Depletion
d. Depreciation
e. Non-deductible Travel and Meals Expenses
f. Business Use of Home
g. Amortization/Casualty Loss Schedule D – Capital Gains and Losses
 a. Recurring Capital Gains Schedule E – Supplemental Income and Loss
Note: A lender may use Fannie Mae Rental Income Worl
income (loss) reported on Schedule E. ets (Form 1037 or Form 1038) to calculate individual rental Royalties Received
 Total Expenses Schedule F - Profit or Loss from Farming
 Net Farm Profit or (Loss)
 Non-Tax Portion Openion Coop and CCC Payments
 Nonrecurring Other (Income) Loss
 Openication Costal (Income) Loss
 Openication Costal (Income)
 Amortization Casually Loss/Depletion
 Business Lie of Horme applicable, a lender may include analysis of the sale and related recurring capital gains. Page 1 of 8

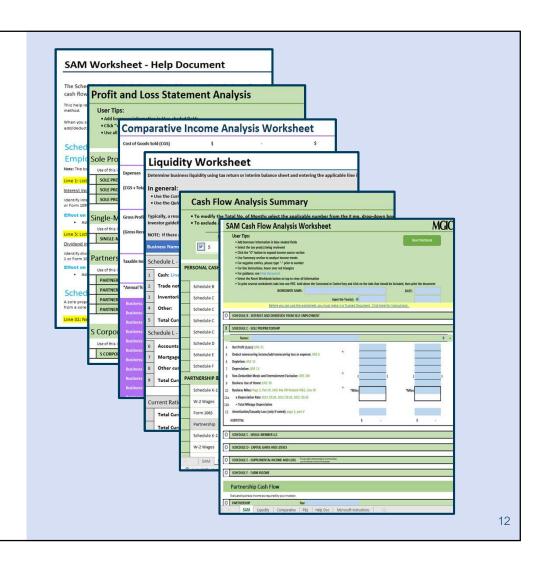
Borrower Name	e:					
Freddie Mac	For	n 91				
	ncome Calcu hedule Analysis					
Form 91 is to be used to document the Seller's calculation of the income for a self-employed Borrower. This form is a tool to help the Seller calculate the income for a self-employed Borrower; the Seller's calculations must be based on the requirements and guidance for the determisation of stable monthly income in Tropic 5300. This form does not replace the requirements and guidance for the analysis and treatment of the income for self-employed Borrowers as described in Chapters 5304 and 5305.  Income Calculations from IRS Form 1040						
IRS Form 1040 Federal Individual Income Tax Return	Year:	Year:				
W-2 Income from self-employment (reported on IRS Forms 1040 Name of business:	and 1120 or 1120S)					
IRS Form 1040, W-2 Income – Officer Compensation (Section 5304	i.1(d)) <sup>1</sup> (+)	(+)				
Subtotal of W-2 income from self-employment  Validate with business returns and IRS Form 1125-E, Compensation of Officers,	s anniirahla	\$				
	as approach					
Schedule B – Interest and Ordinary Dividends  Recurring interest income (Chapter 5305)	(+)	(+)				
Recurring dividend income (Chapter 5305)	(+)	(+)				
	(-)	(-)				
Dividend income from self-employment reported on IRS Form 1120						
Dividend income from self-employment reported on IRS Form 1120 Subtotal of dividends and interest	\$	\$				
	\$	\$				

# All-in-one self-employed income calculator

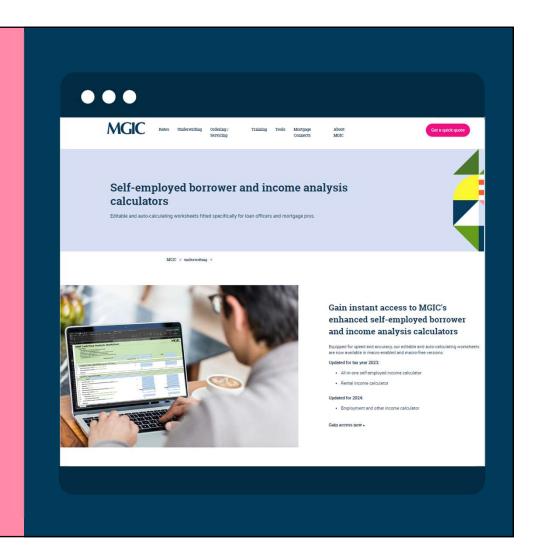
Excel XLSM - macro-enabled

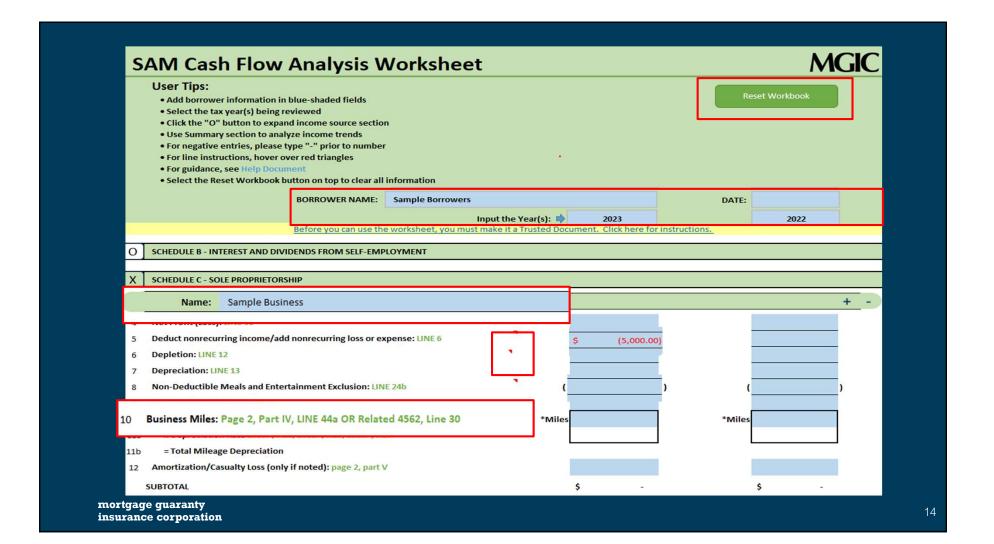
Excel XLSX - macro-free

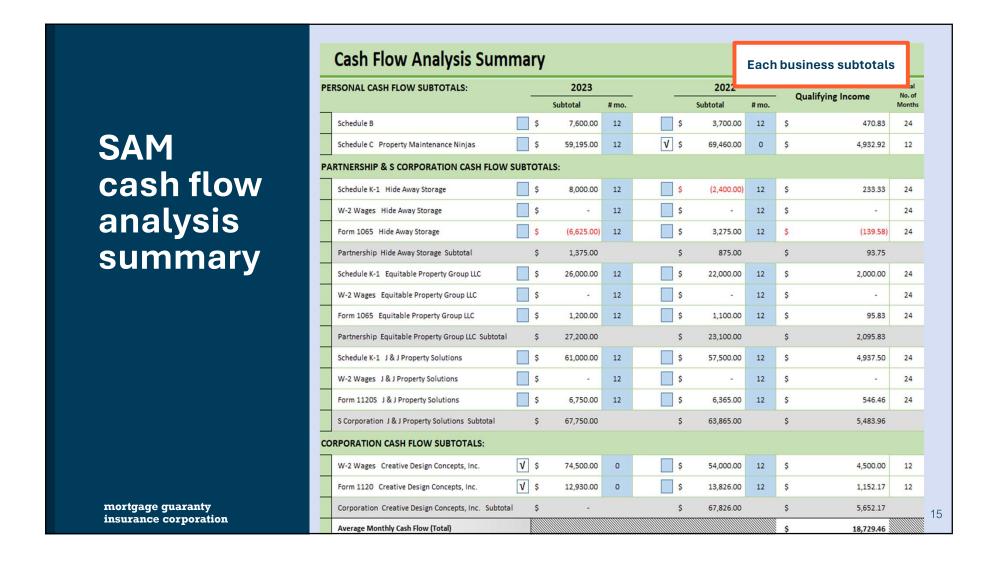
**Excel XLSX - macro-free short** 



mgic.com/seb



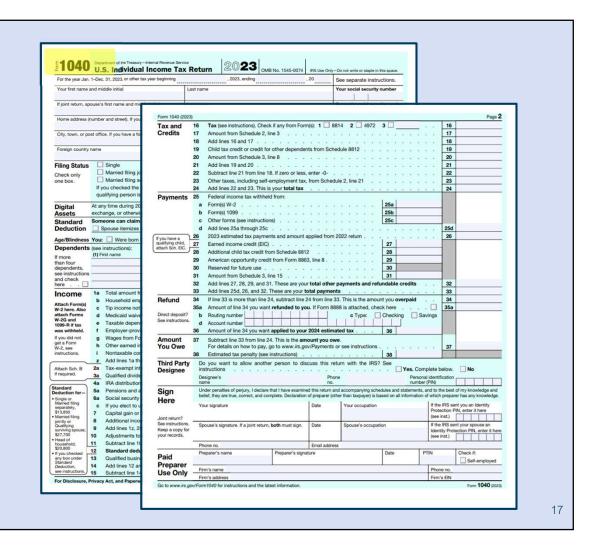




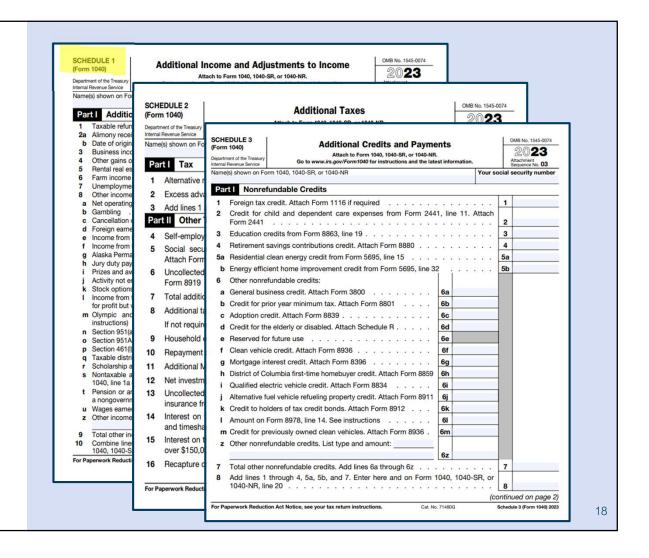


#### 2022 Personal Return – Form 1040

Pages 1 and 2



Schedules 1, 2 & 3



#### 1040-SR

- Same line items
- Same schedules
- Same income reported

mortgage guaranty insurance corporation

For the year Jan.	1-Dec	31, 2023, or other tax	x year beginning			, 2023, end	ling		. 20	See separ	rate instructions.
Your first nam	e and	middle initial		Last	name				,	our soci	al security number
If joint return,	spous	e's first name and	middle initial	Last	name				8	Spouse's s	ocial security number
Home address	(num	nber and street). If	you have a P.O.	box, se	ee instruc	tions.					al Election Campaigr
City, town, or p	oost o	ffice. If you have a f	oreign address, a	also co	mplete sp	aces below.	State	Z	P code 5	spouse if f	e if you, or your fling jointly, want \$3
									t	o go to th oox below our tax or	is fund. Checking a will not change
Foreign country	ry nan	ne		- 1	roreign p	rovince/state	county	Fore	ign postal code 3		You Spouse
Filing Status		Head of house	hold (HOH)		Qualify	ing surviv	ving spouse	e (QS	S)		parately (MFS)
check only one box.		u checked the Ne if the qualifying						cked	the HOH or QS	S box,	enter the child's
Digital Assets	pro	any time durin perty or servic a financial inte	ces); or (b) s	ell. e	xchanc	e, or other	erwise disp	ose o	of a digital as	set	Yes □ No
Standard	Sor	neone can cla	aim: Yo	ou as	a depe	ndent	☐ Your sp	ouse	as a depend	dent	
Deduction		Spouse itemiz	Accessor 1			al market and the					
	Age	e/Blindness	You: Spouse:				January 2 January 2,		☐ Is blin	d	
					(2) Soc	ial security nur	mber (3) Relation	nship to	(4) Check the box	if qualifies	for (see instructions):
Dependents see instructions)	(1) F	irst name	Last name		(2)	nai security riui	you			tt low	
(see instructions)	(1) F	First name	Last name		(4) 533	lai security riui			Child tax cred	dit Cre	edit for other dependents
(see instructions): If more than four dependents, see	(1) F	irst name	Last name		1,750	iai security riui				dit Cre	
(see instructions): If more than four dependents, see instructions and	(1) F	irst name	Last name			as security no				dit Cre	
see instructions): If more than four dependents, see instructions and check here	(1) F	Total amoun		n(s) W			you	,		1a	
(see instructions) If more than four dependents, see instructions and check here	(1) F		t from Form		/-2, box	x 1 (see in	nstructions)				
(see instructions): If more than four dependents, see instructions and check here  Income Attach Form(s) W-2 here. Also	(1) F	Total amoun	t from Form	ages	-2, box	x 1 (see in	nstructions) Form(s) W-		Child tax cree	1a	
fee instructions): If more than four dependents, see instructions and check here  Income Attach Form(s) W-2 here. Also attach Forms W-2G and	(1) F	Total amoun Household e Tip income r	t from Form employee wa	ages on li	r-2, box	x 1 (see in ported on see instru	nstructions) Form(s) W-		Child tax cree	1a 1b	
f more than four dependents, see instructions and theck here   Income Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was	1a b c	Total amoun Household e Tip income r Medicaid wa	t from Form employee wa not reported liver paymer	ages on li	7-2, box not repone 1a (	x 1 (see in ported on see instru	structions) Form(s) W- actions) .	2 (see	Child tax cree	1a 1b 1c	
if more than four dependents, see instructions and check here  income Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld. If you did not	1a b c	Total amoun Household e Tip income r Medicaid wa Taxable dep	t from Form employee wa not reported iiver paymer endent care	ages on li nts no bene	not repone 1a (	x 1 (see in ported on see instru rted on Form 2	structions) Form(s) W- lections) . orm(s) W-2		Child tax crec	1a 1b 1c 1d	
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if more than four dependents, see instructions and check here [Income Attach Forms] W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld. If you did not get a Form W-2, see	1a b c d	Total amoun Household e Tip income r Medicaid wa Taxable dep	t from Form imployee wa not reported iiver paymer endent care ovided adop Form 8919,	ages on lints no bene ption	7-2, box not repone 1a (ot reponefits from benefit	x 1 (see instructed on Form 2 its from Form 2	structions) Form(s) W- lections) . orm(s) W-2		Child tax crec	1a 1b 1c 1d 1e	
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#### 5 business structures



Sole Proprietorship



**Partnership** 



Limited Liability Company



S Corporation

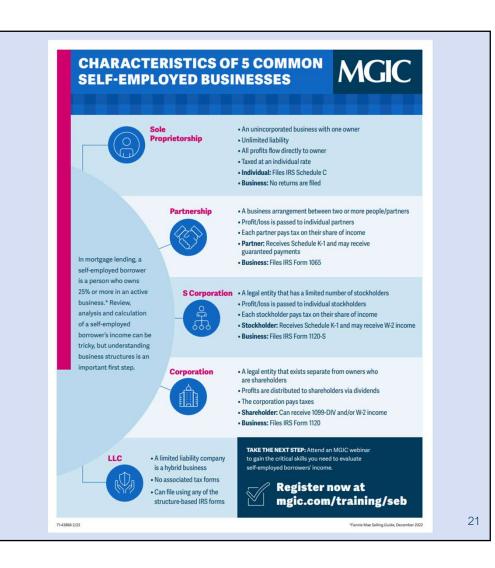


Corporation

mortgage guaranty insurance corporation

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#### Infographic: Characteristics of 5 common self-employed businesses





tates Underwriting

Ordering / Servicing aining Tools Mortgage Connects About

Get a quick quote

#### **Magic Minutes training series**







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#### **Sole Proprietor**

#### **Definition**

Unincorporated business with 1 owner

Simplest but riskiest type of business

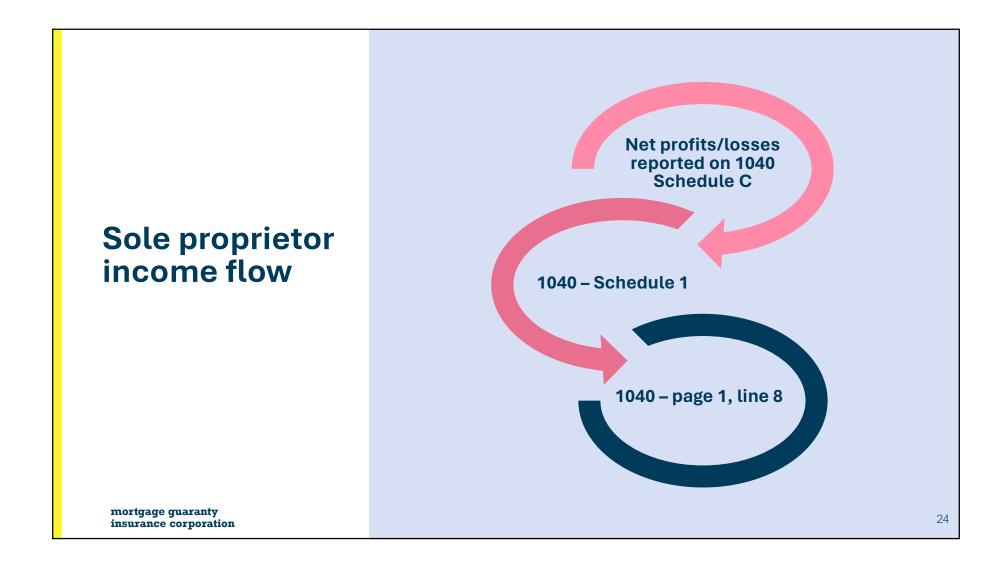
#### Liability

Owner has unlimited liability for any debts incurred by the business

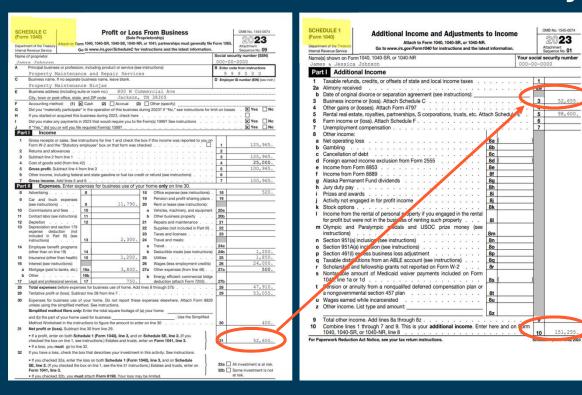
#### **Taxation**

Owner reports income on Schedule C

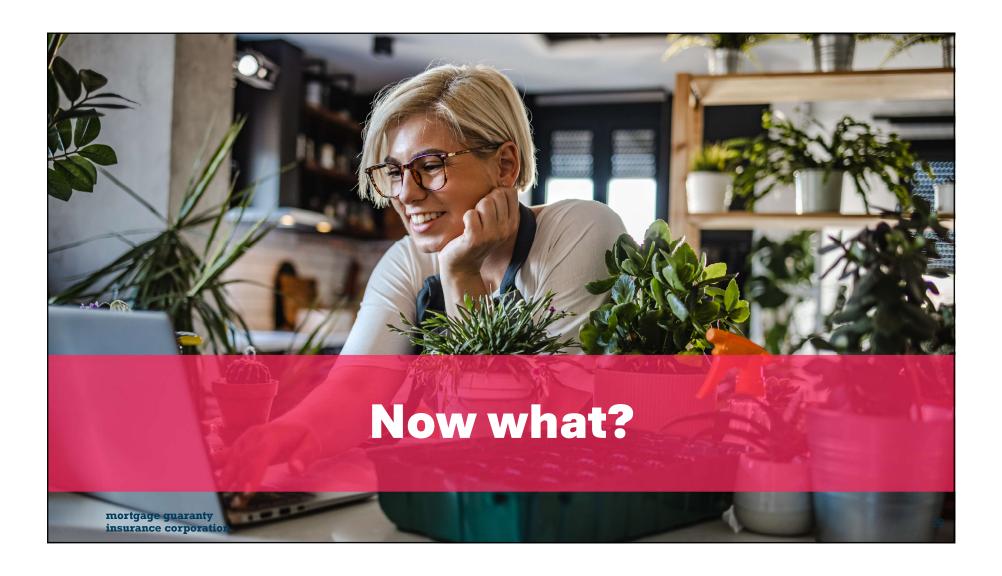
Owner is taxed at the individual tax rate

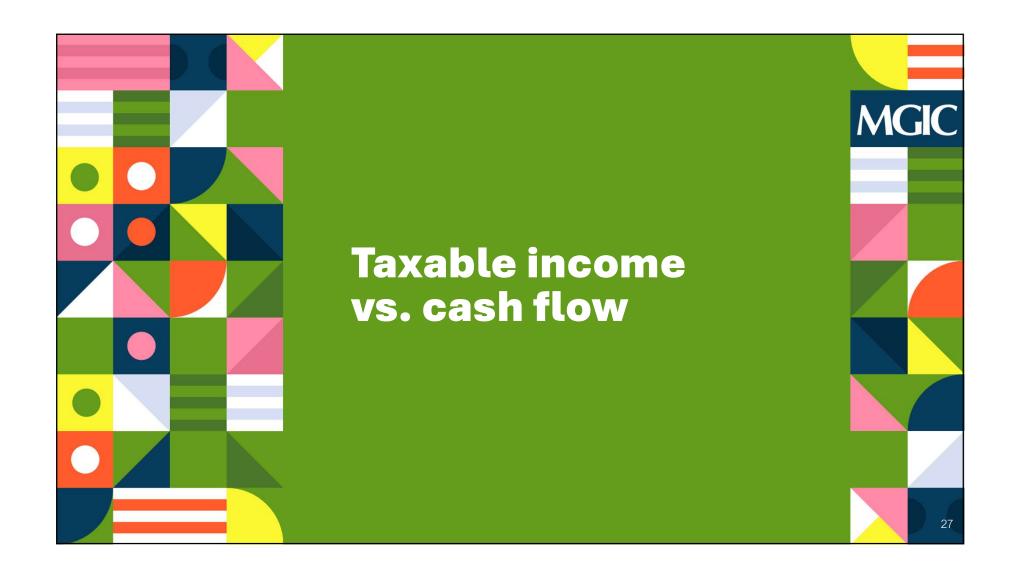


#### Follow the money



	1-Dec. 31, 2023, or other tax year beginning		, 2023, endir	ng .		20	See separa	te instructions.
Your first name a	and middle initial	Last name				*********	Your social	security number
James	and invoice a state	Johnson						0 0000
	super's first name and middle initial	Last name						cial security numb
Jessica		Johnson					000 10	0   0001
	sumber and street). If you have a P.O. box,				A	ot. no.		Election Campaig
1750 Pros	sperity Drive					177.55	Check here	if you, or your
City, town, or po	st office. If you have a foreign address, also	complete space	s below.	State	ZIP co	de	spouse if fill	ing jointly, want \$1 fund, Checking a
Jackson				TN	383		box below v	will not change
Foreign country	name	Forei	gn province/state/or	ounty	Foreign	postal code	your tax or	refund. You Spour
	Single			☐ Head of				You   Spour
Filing Status Check only one box.	Married filing jointly (even if onl Married filing separately (MFS) If you checked the MFS box, enter qualifying person is a child but not	the name of yo	ur spouse. If you	Qualifyir	ig survivi OH or QS	ng spouse S box, ente	r the child's	name if the
Assets	At any time during 2023, did you: (a) exchange, or otherwise dispose of a	digital asset (or	ward, award, or p a financial intere	ayment for prop st in a digital as	erty or s set)? (Se	ervices); or	(b) sell,	Yes ⊠ No
	Someone can claim: You as a Spouse itemizes on a separate re		Your spouse re a dual-status a					
Age/Blindness	You: Were born before January	2, 1959 A	re blind Spor	use: Was b				Is blind
Dependents	(see instructions):		(2) Social security	(3) Relation	ship (4)			for (see instructions
f more	(1) First name Last name		number	to you	_	Child tax o	redit Cred	Sit for other depender
than four dependents.		_			$\rightarrow$		-	
see instructions	<u> </u>			_	$\rightarrow$		_	
and check		_		_	_	<u> </u>	_	<u> </u>
Income	1a Total amount from Form(s) W-2	box 1 (see ins	tructions)	100 50 500			. 1a	60,000.
	b Household employee wages no				2000		1b	
Attach Form(s) W-2 here, Also	c Tip income not reported on line			F004 - M00400			. 1c	
attach Forms	d Medicaid waiver payments not	reported on Fo	rm(s) W-2 (see in	structions) ,			. 1d	
W-2G and 1099-R if tax	e Taxable dependent care benefit	ts from Form 2	441, line 26 .				. 1e	
was withheld.	<ul> <li>f Employer-provided adoption b</li> </ul>	enefits from For	m 8839, line 29				. 1f	
f you did not get a Form	g Wages from Form 8919, line 6		100 B 100 B	100 200 100	600		. 1g	
N-2, see	h Other earned income (see instr			500 500	10	0 000	- 1h	0.
instructions.	<ul> <li>Nontaxable combat pay election</li> </ul>				1i		-	60,000
	z Add lines 1a through 1h	2a		Taxable intere		X 833	1z /2b	1,700.
Attach Sch. B f required.	Za Tax-exempt interest	2a 3a		Ordinary divid		20 402	3b	6,900.
_	4a IRA distributions	4a		Taxable amou			- 4b	0,000.
tandard	5a Pensions and annuities	5a		Taxable amou		2000	5b	
eduction for— Single or	6a Social security benefits	6a		Taxable amou		18 X 18 1	6b	
Married filing separately,	c If you elect to use the lump-sur					[		
\$13,850	7 Capital gain or (loss). Attach Sc						7	-1,000.
Married filing jointly or	8 Additional income from Schedu					100	8	151,255.
Qualifying spouse,	9 Add lines 12 25 00 00 00, oc	, r, and 8. This	is your total ince	ome	1000	90.00		218 855
\$27.700 May 1 of	Adjustments to income from Si				7007		. 10	6,952.
household,	11 Subtract line 10 from line 9. Th						. 11	211,903.
If you checked -	12 Standard deduction or itemiz				( )	9.104	. 12	27,700
	13 Qualified business income ded			1995-A			. 13	27,101
	14 Add lines 12 and 13		in bass or rount				14	54,801.





# 3 key concepts

- 1 Noncash expenses
- 2 IRS limited loss/expenses
- Recurring and nonrecurring income and expenses

#### Noncash expenses

- Expenses deducted from taxable income that do not require actual cash payment
- Common types of "noncash" expenses
  - Depreciation
  - Depletion
  - Amortization
- Add back to cash flow if included in total expenses
- Schedules C, E & F and business returns



#### IRS limited loss/expense

- Limits loss/expense a taxpayer can deduct from taxable income
- Most common limited expense:
  - Meals
- "Nondeductible" portion must be deducted from cash flow
- Schedules C & E and business returns

Note: Per IRS Notice 2021-25, the IRS will temporarily allow for a 100% deduction for expenses paid or incurred in 2021 and 2022 for food or beverages provided by a restaurant. Please consult your internal guidelines as to how to proceed.



## Recurring and nonrecurring income and expense

#### Recurring

- Income: Expected to continue 3 or more years
- Expense: Day-to-day cost of business operations

#### **Nonrecurring**

- **Income:** One-time occurrence (e.g., sale of an asset, prize)
- **Expense:** Extraordinary one-time occurrence (e.g., casualty loss)



#### Taxable vs. qualifying income

# Start with taxable income



#### Add back

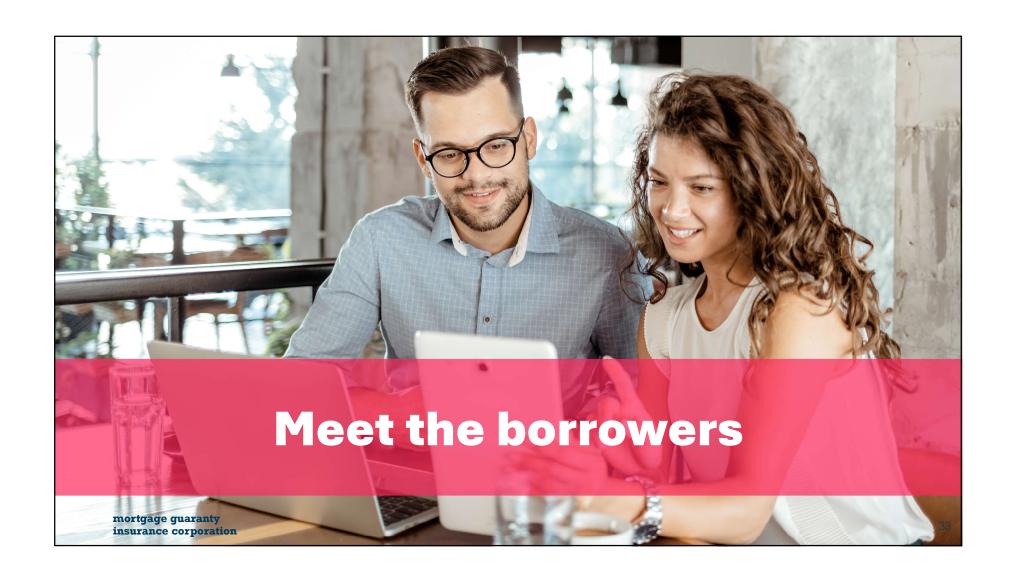
- Noncash expenses
- Business use of home
- One-time losses

#### Subtract

- Nonrecurring income
- Account for limited IRS expenses
- **Review** mortgages due in less than a year

mortgage guaranty insurance corporation

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## Loan application

Case study, pages 10 - 12

information as directed by your Lender.			_
Section 1: Borrower Information. This section a employment and other sources, such as retirement, that you w		Uniform Residential Loan Application — Add	
1a. Personal Information Name (First Middle, Last, Suffix)	Address Street 1750 PROSPERITY DRIVE City JACKSON	Section 1: Rorrower Information This coules when	** ** OF ON THE OWNER.
JAMES JOHNSON Alternate Names - List any names by which you are known or any name	Status: Sold, Intended Occup Investment, Prim Pending Sale, Pending Sale, Pending Sale, October Home, Other	employment and other sources, such as retirement, that you want	considered to qualify for this loan.
under which credit was previously received (First, Middle, Last, Suffix) JIMMY JOHNSON	Property Value or Retained Home, Other \$475,000 Retained Premary Residence Mortgage Loans on this Property Does not as	Name (First, Middle, Last, Suffix)	Social Security Number 000 - 00 - 0000 (or Individual Taxpayer Identification Number)
Type of Credit  I am applying for individual credit.  I am applying for joint credit. Total Number of Borrowers: Each Borrower intends to apply for joint credit. Your initials:	Creditor Name Account Number	Monthly Monthly with the Names - List any names by which you are known or any names under which credit was previously received (First, Middle, Last, Suffix) 1588 JOHNSON 5	Date of Birth (Itizenship  (mm/dd/yyyy)
Marital Status Dependents (not listed by another Borra		Type of Credit  I am applying for individual credit.  I am applying for joint credit. Total Number of Borrowers:	List Name(s) of Other Borrower(s) Applying for this Loan (First, Middle, Last, Suffix) – Use a separator between names JAMIES JOHNSON
<ul> <li>         Married Number 0</li></ul>	3b. IF APPLICABLE, Complete Information for Add Address Street 123 CLOVER STREET City JACKSON	Renal Controver mens to apply or join treat. 100 mass.	-
(Single, Divorced, Widowed, Civil Union, Domestic Partnership, Regist Reciprocal Beneficiary Relationship)  Current Address	Status: Sold, Pending Sale, Property Value or Retained Home, Other	My Attended Number 6	Contact Information Home Phone ( ) =
Street 1750 PROSPERSTY DRIVE  City_JACKSION  How Long at Current Address? 4 Years Months Housing C	\$350,000 Retained Investment	Unmarried  (Single Divorced Widowed Civil Union, Domestic Partnership, Registered	Work Phone ( ) - Ext. Email JESSJOHNSON@ANYWHERE.COM
If at Current Address for LESS than 2 years, list Former Address Street	□ D4	Monthly Current Address Mortgal Street 1750 PROSPERITY DRIVE  City JACKSON	Unit # State TN ₩ ZIP 38305 Country
City	SYZ MORTGAGE 83155315 No pris	How Long at Current Address? 5 Years Months Housing No  Hat Current Address for LESS than 2 years. list Former Address	primary housing expense  Own  Rent (5 /month)
Mailing Address - if different from Current Address Does not app Street City	3c. IF APPLICABLE, Complete Information for Add	Street City	Unit # State ZIP Country
	Address Street 225 S, MAIN STREET  City JACKSON	How Long at Former Address? Years Months Housing No Mailing Address - if different from Current Address Does not apply	
Employer or Business Name PROPERTY MAINTENANCE NINJAS	Does no  Status: Sold, Pending Sale, Pending Sale, Residence, Secon Home, Other	ary Ch.	State ZIP Country
Street 800 W. COMMERCIAL AVENUE  City _JACKSON State TN ▼ ZIP	Mortgage Loans on this Property Does not ap	Employer or Business Name CREATIVE DESIGN CONCEPTS	s not apply  Phone { 731 } 122 - 8544 Gross Monthly Income
Start Date 02 / 15 / 2021 (mm/dd/yyyy)	am emple reperty: Creditor Name Account Number	Monthly Mortgal Mortgal Paymen City _IACKSON	Unit #   Base   5   /month
Check if you are the Business 1 have an ownership share of le Owner or Self-Employed 1 have an ownership share of 2:	ast COMMERCIAL BK 15616546512	Position or Title OWNER  Start Date 10 / 01 / 2017 (mm/dd/yyyy)   Jame   popping	This statement applies:  mployed by a family member,  ry seller, real estate agent, or other to the transaction.  Chee
1c. IF APPLICABLE, Complete Information for Additional Employment or Business Name J&JPROPERTY SOLUTIONS	City Memphis	Owner or Self-Employed   (i) I have an ownership share of 25% of the self-time of 25% of 25% of the self-time of 25% of	nan 25%. Monthly Income (or Loss)
Street 2500 N EXECUTIVE DRIVE  City _MCKSON State TN  2	Status: Sold, Pending Sale, Pending Sale, Gray Home, Other	ary	ent/Self-Employment and Income
Start Date 09 / 01 / 2016 (mm/dd/yyyy)	eck if th 5 470.000 Retained Investment  I am em Mortgage Loans on this Property Does not apparty to:	Employer or Business Name EQUITABLE PROPERTY GROUP, LLC  Monthly  Street 1750 PROSPERITY DRIVE	Phone ( 731 ) 122 - 8544   Gross Monthly Income
Check if you are the Business I have an ownership share of Owner or Self-Employed I have an ownership share of	ess than Creditor Name Account Number		Some   Some
1c. IF APPLICABLE, Complete Information for Additional Employ		How long in this line of work? 5 Years Months party	mployed by a family member, try seller, real estate agent, or other to the transaction.  Military Entitlements 5 /month
Employer or Business Name HIDE AWAY STORAGE Street 42 WILLOW BLVD		☐ Check if you are the Business ☐ I have an ownership share of less to  Owner or Self-Employed ⑥ I have an ownership share of 25%  ① I have an ownership share of 25%	han 25%. Monthly Income (or Loss)
	ck if this		
How long in this line of work? 5 YearsMonths	am empl roperty i arty to ti		
Owner or Self-Employed  Owner or Self-Employed  Owner or Self-Employed  Owner or Self-Employed	ss than 1% or mi		

Current Employment/Self-Employment and Income	AACIC
proper or susiness Name PROPERTY MAINTENANCE NINAS Phone (*731) 226 - 1255  et 800 W. COMMERCIAL AVENUE Unit #  JACKSON State TN ZIP 38305 Country USA  itition or Title OWNER  rt Date 02 / 15 / 2021 (mm/dd/yyyy)  vlong in this line of work? 3 Years Months  Check if you are the Business O I have an ownership shall of less than 25%. Monthly Income (or Loss)	Gross Monthly Income Base
Owner or Self-Employed	TOTAL \$ 0.00/month 1b. Current Employment/Self-Employment and Income Does not apply
Tall FAPPLICABLE, Complete Information for Additional Employment/Self-Employment and Income   Supply   Phone   Supply   Phone   Supply   Phone   Supply   Phone   Supply   S	Does not apply   Gross Monthly Income   Base   S
c.IF APPLICABLE, Complete Information for Additional Employment/Self-Employment and Income inployer or Business Name HIDE AWAY STORAGE Phone (321) 236 - 5151  rete 42 WILLOW BLVD Unit #  by JACKSON State TN 2 IP 38305 Country	Commission of Title Owner   Position or Additional Employment/Self-Employment and Income   Does not apply

mortgage guaranty insurance corporation

35

#### 2023 Form 1040

Case study, pages 16 - 17

. 16 17 18 19 20 21 22 22 22 23 24 24	Page 24,694. 24,694. 24,694. 6,903. 31,597.
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. 18 . 19 . 20 . 21 . 22 . 23 . 24	24,694. 6,903. 31,597.
. 19 . 20 . 21 . 22 . 23 . 24	24,694. 6,903. 31,597.
. 20 . 21 . 22 . 23 . 24	6,903. 31,597.
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Firm's EIN	
	Form 1040 (20)
	(see inst.)

Page 2

# Schedules 1, 2 & 3

Case study, pages 18 - 19

Part I Educ 12 Certa 2a Al officia SCHEDULE 2 OMB No. 1545-0074 **Additional Taxes** b Healt (Form 1040) 23 Attach to Form 1040, 1040-SR, or 1040-NR Movi Dedu Name(s) sh Self-e 17 Self-Part II Other Taxes (continued) Part I Penal 17 Other additional taxes: 19a Alimo 1 Alt a Recapture of other credits. List type, form number, and amount: b Recip 2 Ex 20 IRA d 3 Ad **b** Recapture of federal mortgage subsidy, if you sold your home C Stude d Fo Part II c Additional tax on HSA distributions. Attach Form 8889 . . . . 22 Rese d Additional tax on an HSA because you didn't remain an eligible 23 Arch individual. Attach Form 8889 . . . . . . Othe e Additional tax on Archer MSA distributions. Attach Form 8853 . a Jury f Additional tax on Medicare Advantage MSA distributions. Attach **b** Dedu renta g Recapture of a charitable contribution deduction related to a c Nont fractional interest in tangible personal property . . . . . . . and L h Income you received from a nonqualified deferred compensation d Refor plan that fails to meet the requirements of section 409A . . . e Repa i Compensation you received from a nonqualified deferred Act o compensation plan described in section 457A . . . . . . . Conti j Section 72(m)(5) excess benefits tax . . . . . . . . . . . . . . 10 Re g Contr o Se p Se q Ta h Attorr 11 I Tax on accumulation distribution of trusts . . . . . . . . . . . . discri 12 m Excise tax on insider stock compensation from an expatriated Atton corporation . . . . . . . . . . . . . . . 13 Un n Look-back interest under section 167(g) or 460(b) from Form tax la 14 Hous o Tax on non-effectively connected income for any part of the Exces year you were a nonresident alien from Form 1040-NR . . . . 1041 p Any interest from Form 8621, line 16f, relating to distributions z Other from, and dispositions of, stock of a section 1291 fund . . . . q Any interest from Form 8621, line 24 . . . . . . . . . . . . . . 16 Re Total Any other taxes. List type and amount: \_ Add I 10 For Pape Section 965 net tax liability installment from Form 965-A . . . 20 Add lines 4, 7 through 16, and 18. These are your total other taxes. Enter here and on Form 1040 or 1040-SR, line 23, or Form 1040-NR, line 23b . . . . . . . . . . . . . . . . . 21 37

Additional Income and Adjustments to Income

Department of Internal Rever Name(s) s

Part II Adjustments to Income

#### **MGIC** Self-Employed Borrower **Documentation Matrix** The following matrix identifies the documentation you need from self-employed borrowers to substantiate the various types of income they may receive from different business structures. SEB Required SEB Documentation S Corporation Partnership **Documentation** Form 1040: U.S. Individual Income Tax Return) × with all applicable schedules and W-2s Schedule C: Profit or Loss from Business × Matrix Schedule E, Part II: Income or Loss From × Partnerships or S Corporations Schedule K-1 (Form 1065): Partner's Share of Form 1065: U.S. Return of Partnership Income with all applicable schedules Schedule K-1 (Form 1120-S): Shareholder's × Share of Income, Deductions, Credits, etc. Form 1120-S: U.S. Income Tax Return for an × S Corporation with all applicable schedules Form 1120: U.S. Corporate Income Tax Return with all applicable schedules Year-to-Date Profit & Loss Statement/ × Interim Balance Sheet: as applicable Partnership Agreement: may be required Corporate Resolution: may be required × A limited liability company (LLC) is a hybrid business and can file using the above IRS forms based on structure. 71-43665 11/23 mortgage guaranty 38 insurance corporation

## James & Jessica Johnson

- Married, no dependents
- James has an interest in 3 companies
- Jessica has an interest in 2 companies
- Own 3 rental properties (Schedule E, page 1)



### **Meet James Johnson**

**Sole proprietor of Property Maintenance Ninjas Schedule C** 

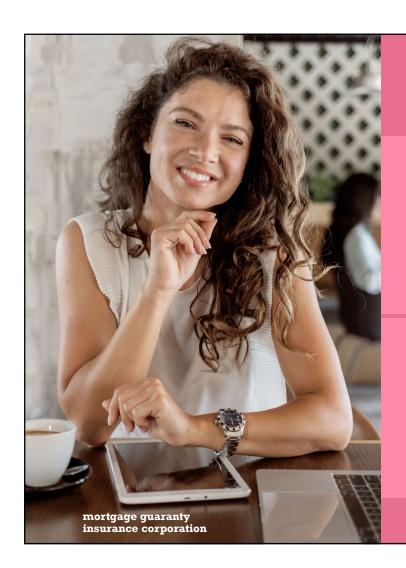
### 25% partner in Hide Away Storage

- Schedule E, page 2
- Partnership (1065) Schedule K-1
- Form 1065

# 50% shareholder in J & J Property Solutions (S corporation)

- Schedule E, page 2
- S Corporation (1120-S) Schedule K-1
- Form 1120-S
- SEB W-2 may also be required





### **Meet Jessica Johnson**

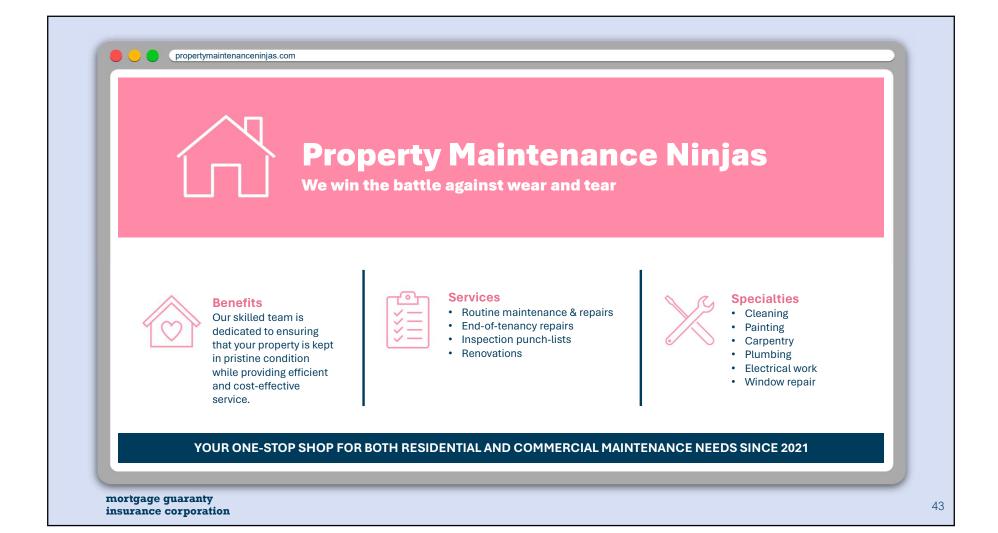
50% partner in Equitable Property Group, LLC (property owner)

- Schedule E, page 2
- Partnership Schedule K-1
- Form 1065
- Form 8825

100% owner of Creative Design Concepts, Inc.

- SEB W-2
- Form 1120





#### **Noncash expenses**

- Depreciation
- Depletion
- Amortization
- · Business use of home

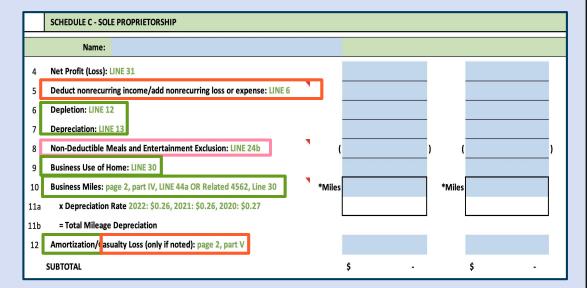
#### **Limited IRS deductions**

- Meals
- Travel & entertainment

#### **Nonrecurring**

- Other income
- One-time expenses

### **SAM Cash Flow Analysis Worksheet**



mortgage guaranty insurance corporation

### 2023 Schedule C

Case study, page 23

SCHEDULE C (Form 1040) Profit or Loss From Busi Attach to Form 1040, 1040-SR, 1040-SS, 1040-NR, or 1041; pg What is the Go to www.irs.gov/ScheduleC for instruction location and nature Is there a of the borrower's epair Services leave blank. demand for the business? 800 W Commercia business product Jackson, TN 38305 Accrual (3) Other (specif or service? OMB No. 1545-0074 Profit or Loss From Bu (Form. (Sole Proprietorship) 23 o Form 1040, 1040-SR, 1040-SS, 1040-NR, or 1041; par nust generally file Form 1065. Department of the Treas Attachment Go to www.irs.gov/ScheduleC for instruction a latest information. Sequence No. 09 Internal Revenue Service Name of proprietor Social security number (SSN) James Johnson Principal business or profession, including product or service (see instru B Enter code from instructions Property Maintenance and Repair Services 9 9 9 0 0 0 Business name. If no separate business name, leave blank. D Employer ID number (EIN) (see instr.) Property Maintenance Ninjas Business address (including suite or room in 800 W Commercial TN 31 ty, town or post office, state, and ZIP code Will the business nse deduction (not ded in Part III) (see continue generating and 2,300. distributing sufficient Is the income to enable the 3,800 banks, etc.) business in borrower to make the onal services 17 existence? before expenses for business use of home. Add or (loss). Subtract line 28 from line 7. payments on the business use of your home. Do not report these ig the simplified method. See instructions. requested mortgage? ed method filers only: Enter the total square footage of (a) y nd (b) the part of your home used for business Method Worksheet in the instructions to figure the amount to enter on line 30 31 Net profit or (loss). Subtract line 30 from line 29. • If a profit, enter on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you checked the box on line 1, see instructions.) Estates and trusts, enter on Form 1041, line 3. • If a loss, you must go to line 32. 45 32 If you have a loss, check the box that describes your investment in this activity. See instructions cked 32a, enter the loss on both Schedule 1 (Form 1040), line 3, and on Sci

SCHEDULE C (Form 1040)  Department of the Treasury Internal Revenue Service  Attach to Form 1040, 1040-SR, 1040-SR, 1040-NR, or 1041; partnerships or Go to www.irs.gov/ScheduleC for instructions and the late	ust generally file Form 1065.  Attachment Sequence No. 09		MGIC
Name of proprietor James Johnson	Social security number (SSN)		
A Principal business or profession, including product or service (see instructions)	B Enter code from instructions		
Property Maintenance and Repair Services	9 9 9 0 0 0		
C Business name. If no separate business name, leave blank.	D Employer ID number (EIN) (see instr.)		
Property Maintenance Ninjas  E Business address (including suite or room no.) 800 W Commercial Ave			
E Business address (including suite or room no.) 800 W Commercial Ave  City, town or post office, state, and ZIP code Jackson, TN 38305			
F Accounting method: (1) Cash (2) Accrual (3) Other (specify)		SAM Cash Flow Analysis Works	sheet
G Did you "materially participate" in the operation of this business during 2023? If "No," see	nstructions for limit on losses . X Yes No	JAIVI Casii i love Alialysis veolik	Silect
H If you started or acquired this business during 2023, check here			
Did you make any payments in 2023 that would require you to file Form(s) 1099? See instr		Name - Droporty Maintenance Minist James	2022
J M "Yes," did you or will you file required Form(s) 1099?	Yes No	Name: Property Maintenance Ninjas - James	2023
BORNAGO CONTRACTOR CON			
1 Gross receipts or sales. See instructions for line 1 and check the box if this income was re Form W-2 and the "Statutory employee" box on that form was checked		4 Net Profit (Loss): LINE 31	
2 Returns and allowances	2		
3 Subtract line 2 from line 1	3 125,965.	5 Deduct nonrecurring income/add nonrecurring loss or expense: LINE 6	
4 Cost of goods sold (from line 42)	4 25,000.	5 Deduct non-cearing meanic/add non-cearing 1000 of expense, enter	
5 Gross profit. Subtract line 4 from line 3	5 100,965.	6 Depletion: LINE 12	
Other income, including federal and state gasoline or fuel tax credit or refund (see instruct     Gross income, Add lines 5 and 6	ons) 6	0 Depletion Live 12	
Part II Expenses. Enter expenses for business use of your home only on line		7 Depreciation: LINE 13	
8 Advertising 8 18 Office expense (s		/ Depreciation: LINE 13	
9 Car and truck expenses 19 Pension and prof		8 Non-Deductible Meals and Entertainment Exclusion: LINE 24b	,
(see instructions) 9 11,790. 20 Rent or lease (see		8 Non-Deductible Meals and Entertainment Exclusion; LINE 240	
10 Commissions and fees . 10 a Vehicles, machiner 11 Contract labor (see instructions) 11 b Other business p		O Business Har of Harrey LINE 20	
12 Depletion 12 21 Repairs and main		9 Business Use of Home: LINE 30	
13 Depreciation and section 179 22 Supplies (not incl		and the second of the second o	40.00
expense deduction (not included in Part III) (see 23 Taxes and license	3 23	10 Business Miles: Page 2, Part IV, LINE 44a OR Related 4562, Line 30	*Miles
instructions) 13 2,300. 24 Travel and meals.			
14 Employee benefit programs a Travel		11a x Depreciation Rate 2023: \$0.28, 2022: \$0.26, 2021: \$0.26	
(other than on line 19) .   14   b Deductible meals   15   Insurance (other than health)   15   1,200 .   25   Utilities			
16 Interest (see instructions): 15 1,200. 25 Utilities		11b = Total Mileage Depreciation	
a Mortgage (paid to banks, etc.) 16a 3,800. 27a Other expenses (	,		
b Other 16b b Energy efficient of		12 Amortization/Casualty Loss (only if noted): page 2, part V	
17 Legal and professional services 17 750. deduction (attach			
Total expenses before expenses for business use of home. Add lines 8 through 27b		SUBTOTAL	•
29 Tentative profit or (loss). Subtract line 28 from line 7		SOUTOTAL	,
30 Expenses for business use of your home. Do not report these expenses elsewhere. A unless using the simplified method. See instructions.	ach Form 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 Simplified		
Method Worksheet in the instructions to figure the amount to enter on line 30	30 400.		
31 Net profit or (loss). Subtract line 30 from line 29.	,		
If a profit, enter on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If			
checked the box on line 1, see instructions.) Estates and trusts, enter on Form 1041, line • If a loss, you must go to line 32.	31 32,655.		
32 If you have a loss, check the box that describes your investment in this activity. See instru	tions.		
If you checked 32a, enter the loss on both Schedule 1 (Form 1040), line 3, and on Schedule 1.	1		
SE, line 2. (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts,	enter on 32a All investment is at risk.		
Form 1041, line 3.	32h Some investment is not		

HEDULE C rm 1040) artment of the Treasu nal Revenue Service	Profit or Loss From Business (Sole Proprietorship) Attach to Form 1040, 1040-SR, 1040-SS, 1040-NR, or 1041; partnerships must generally fi Go to www.irs.gov/ScheduleC for instructions and the latest information		MGIC	
me of proprietor		Social security number (SSN)		
James Johnson		000-00-0000		
	ness or profession, including product or service (see instructions)	B Enter code from instructions		
	Maintenance and Repair Services e. If no separate business name, leave blank.	9 9 9 0 0 0  D Employer ID number (EIN) (see instr.)		
	Maintenance Ninjas	Employer to number (Em) (see mas.)		
	ress (including suite or room no.) 800 W Commercial Ave			
	post office, state, and ZIP code Jackson, TN 38305			
	ethod: (1) S Cash (2) Accrual (3) Other (specify)		SAM Cash Flow Analysis Worksheet	
	rially participate" in the operation of this business during 2023? If "No," see instructions for		SAIVI Cash How Analysis Worksheet	
	or acquired this business during 2023, check here			_
	ou or will you file required Form(s) 1099?			_
Part I Incom			Name: Property Maintenance Minjas - James 2023	
1 Gross receipt	s or sales. See instructions for line 1 and check the box if this income was reported to you		The second secon	
	the "Statutory employee" box on that form was checked			
	llowances	. 2	4 Net Profit (Loss): LINE 31 \$ 52	,655.00
	? from line 1	. 3 125,965. 4 25,000.		
4 Cost of good	sold (from line 42)	25,000.	5 Deduct nonrecurring income/add nonrecurring loss or expense: LINE 6	
6 Other income	including federal and state gasoline or fuel tax credit or refund (see instructions)	. 6	5 Deduct nonlecturing income and nonlecturing loss of expense. Live o	
	e. Add lines 5 and 6	. / 100,965.		
Part II Exper	ses. Enter expenses for business use of your home only on line 30.		6 Depletion: LINE 12	
8 Advertising .				_
	ick expenses 19 Pension and profit-sharing plans	. 19	7 Depreciation: LINE 13	
(see instructions  Commissions		nt 20a		
	and fees . 10 a Vehicles, machinery, and equipme see instructions) 11 b Other business property	. 20b	8 Non-Deductible Meals and Entertainment Exclusion: LINE 24b	
	12 21 Repairs and maintenance	21	o Non-Deductible Medis and Entertainment Exclusion. Line 240	
13 Depreciation a	nd section 179 22 Supplies (not included in Part III)			
	duction (not Part III) (see 23 Taxes and licenses	. 23	9 Business Use of Home: LINE 30	
instructions)	13 2,300. 24 Travel and meals:			_
	nefit programs a Travel		10 Business Miles: Page 2, Part IV, LINE 44a OR Related 4562, Line 30 *Miles	
(other than or				
	er than health) 15 1,200. 25 Utilities		11a x Depreciation Rate 2023; \$0.28, 2022; \$0.26, 2021; \$0.26	
16 Interest (see i a Mortgage (pai	nstructions); 26 Wages (less employment credits to banks, etc.) 16a 3,800. 27a Other expenses (from line 48).	. 27a 500.	11a x Depreciation Rate 2023: \$0.28, 2022: \$0.26, 2021: \$0.26	
The second second	to banks, etc.) 16a 5, 800. 27a Other expenses (from line 46).  b Energy efficient commercial bld.			
	ssional services 17 750. Benergy efficient commercial bio deduction (attach Form 7205).	35 27b	11b = Total Mileage Depreciation	
	es before expenses for business use of home. Add lines 8 through 27b	. 28 47,910.		
29 Tentative pro	it or (loss). Subtract line 28 from line 7	. 29 53,055.	12 Amortization/Casualty Loss (only if noted): page 2, part V	
	business use of your home. Do not report these expenses elsewhere. Attach Form 88:	29		
	he simplified method. See instructions.			
	ethod filers only: Enter the total square footage of (a) your home:	-	SUBTOTAL \$ 52	,655.00
	rt of your home used for business: Use the Simplified sheet in the instructions to figure the amount to enter on line 30	. 30 400.		6
	(loss). Subtract line 30 from line 29.	400.		
5/	eter on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2. (If you			
checked the	ox on line 1, see instructions.) Estates and trusts, enter on Form 1041, line 3.	31 52,655.		
• If a loss, yo	must go to line 32.			
12 If you have a	oss, check the box that describes your investment in this activity. See instructions.			
	ed 32a, enter the loss on both Schedule 1 (Form 1040), line 3, and on Schedule			
<ul> <li>If you check</li> </ul>	ed 32a, enter the loss on both Schedule 1 (Form 1040), line 3, and on Schedule	32a All investment is at risk.		

# What is needed to retain other income?

- Other income must be identified
- Need to understand how it is related to the business operation
- Need to have an expectation of continuance history

(Forn	EDULE C in 1040) ment of the Treasury Revenue Service			(Sol 040-SR, 1040-SS, 104	Propri	rom Business ietorship) r 1041; partnerships must generally fil tructions and the latest information		OMB No. 1545-0074  2023  Attachment Sequence No. 09		
Name	of proprietor						Social se	curity number (SSN)		
Jame	es Johnson						000-0	0-0000		
A	Principal business	or professio	n, includi	ng product or service	(see ins	structions)	B Enter o	ode from instructions		
				Repair Serv	ces		_	9 9 0 0 0		
С	Business name. If r						D Employ	er ID number (EIN) (see instr.)		
	Property Ma:				_					
E	Business address (					ercial Ave				
F	City, town or post of			(2) Accrual		N 38305				CANA Cook Flam
G					(3)	Other (specify) ng 2023? If "No," see instructions for	limit on lone	va Vvae □Na		SAM Cash Flow
H						ng 2023 r ii No, see instructions for				
•						orm(s) 1099? See instructions			_	
J						annay roos: occ mondolons				
Par		7-2 1110	4							Name: Property Maintenan
1	Gross receipts or s	ales. See in	structions	s for line 1 and check	the box	if this income was reported to you o	n			
						ked	1	125,965.		
2	Returns and allowa	nces	0.00		2 2		. 2		4	Net Profit (Loss): LINE 31
3	Subtract line 2 from						. 3	125,965.	7	
4	Cost of goods sold	(from line 4	2)		(*)		. 4	25,000.		Data transport at the second at the
					-			TAN DEE	5	Deduct nonrecurring income/add nor
6						or refund (see instructions)	. 6			
Part				or husingss use o		home only on line 30.	. 1	100,965.	6	Depletion: LINE 12
8	Advertising		8	or business use o	18		. 18	520.		
9	Car and truck				19				_	Describition UNIT 42
9	(see instructions)		9	11,79	. 20				/	Depreciation: LINE 13
10	Commissions and t	lees .	10			a Vehicles, machinery, and equipment	nt 20a			
44	0-1-2-1-2-1-2-1-2-1-2-1-2-1-2-1-2-1-2-1-		-			b Other business property	. 20b		8	Non-Deductible Meals and Entertain
12	Depletion		12		21	Repairs and maintenance	. 21		•	
10	expense deducti	on (not			22					Developed Use of Homes LINE 20
	moladed in Part	on (not			23		. 23		9	Business Use of Home: LINE 30
	instructions) .		13	2,30	. 24	Travel and meals:				
14	Employee benefit p				7	- TI	24-		10	Business Miles: Page 2, Part IV, LINE 4
	(other than on line	ACTUAL VIEW	14	1.20		<ul> <li>Deductible meals (see instruction</li> </ul>	7	1,200.		8-7
15	Insurance (other that Interest (see instruc		15	1,20	26		26	24,000.	44.	u Dangasiation Rate 2022, čo 20 20
10	Mortgage (paid to be	33.55	16a	3,80		<ul> <li>Wages (less employment credits)</li> <li>Other expenses (from line 48) .</li> </ul>		500.	11a	x Depreciation Rate 2023: \$0.28, 20
ь	Other		16b	3,00				300.		
17	Legal and profession		17	75		<ul> <li>Energy efficient commercial bldg deduction (attach Form 7205) .</li> </ul>	. 27b		11b	= Total Mileage Depreciation
28			_		_	es 8 through 27b		47,910.	110	0
29							. 29	53,055.	40	Americation /Consults Loss (only if a
30	Expenses for busin	ness use of	vour ho	me. Do not report ti	ese ex	penses elsewhere. Attach Form 882	9		12	Amortization/Casualty Loss (only if no
	unless using the sir									
	Simplified method	filers only	Enter the	e total square footage	of (a) y	our home:	_			CURTOTAL
	and (b) the part of y	our home u	used for b	usiness:		. Use the Simplified				SUBTOTAL
					enter o	n line 30	. 30	400.		
31	Net profit or (loss)					1				
	<ul> <li>If a profit, enter o</li> </ul>	n both Sch	edule 1 (F	Form 1040), line 3, a	d on Se	chedule SE, line 2. (If you	2000			
				ons.) Estates and trus	s, enter	r on Form 1041, line 3.	31	52,655.		
00	If a loss, you mus					J				
32	CHECKS INC. POLICE POR			re-position to Monocolous contrates		his activity. See instructions.				
						), line 3, and on Schedule	222 🗆	All investment is at risk.		
		necked the t	oox on line	e 1, see the line 31 ins	ructions	s.) Estates and trusts, enter on	020	CALLIANORITION IT 19 OF 1194"		

# **MGIC**

### SAM Cash Flow Analysis Worksheet

	Name:	Property Maintenance Minjas - James			2023	
4	Net Profit (Loss	s): LINE 31 urring income/add nonrecurring loss or expense: LINE 6	•		\$ 52,655.00	
6	Depletion: LIN					
7	Depreciation: l	INE 13			\$ 2,300.00	
8	Non-Deductibl	e Meals and Entertainment Exclusion: LINE 24b	1	(	\$ 1,200.00	
9	Business Use o	f Home: LINE 30			\$ 400.00	
10	<b>Business Miles</b>	: Page 2, Part IV, LINE 44a OR Related 4562, Line 30	*	*Miles		
11a	x Depreciati	on Rate 2023: \$0.28, 2022: \$0.26, 2021: \$0.26				
11b	= Total Mile	age Depreciation				
12	Amortization/0	Casualty Loss (only if noted): page 2, part V				
	SUBTOTAL				\$ 54,155.00	

# 2 types of depreciation





### Vehicle depreciation



### Actual expenses vs. standard deduction Depreciation Actual No further is included expenses add-backs in line 13 **Business Depreciation** Standard miles x Add back is reflected deduction depreciation depreciation on line 9 rate mortgage guaranty insurance corporation

Sche	edu	ıle	C
<b>Part</b>	IV,	44	(a)

are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.  See Additional Vehicle Information  When did you place your vehicle in service for business purposes? (month/day/year)  Of the total number of miles you drove your vehicle during 2023, enter the number of miles you used your vehicle for:  Business		Cost of Goods Sold (see instructions)			
Was there any change in determining quantities, costs, or valuations between opening and closing inventory?  If "Yes," attach explanation  Inventory at beginning of year. If different from last year's closing inventory, attach explanation  Jone 15,000.  Purchases less cost of items withdrawn for personal use  Jone 10,000.  See 10,000.  Materials and supplies  Cher costs.  Line 44 (a) is blank  Add lines 35 through 39  Inventory at end of year  Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.  When did you place your vehicle in service for business purposes? (month/day/year)  Of the total number of miles you drove your vehicle during 2023, enter the number of miles you used your vehicle for:  Business b Commuting (see instructions) c Other  Was your vehicle available for personal use during off-duty hours?   Yes   No  Do you (or your spouse) have another vehicle available for personal use?   Yes   No  If "Yes," is the evidence written?   Yes   No  Other Expenses. List below business expenses not included on lines 8–26, line 27b, or line 30.	33	Method(s) used to			
Inventory at beginning of year. If different from last year's closing inventory, attach explanation   35	34			lanation)	
Purchases less cost of items withdrawn for personal use  Cost of labor, Do not include any amounts paid to yourself.  37 12,000.  Materials and supplies  Cher costs.  Line 44 (a) is blank  Add lines 35 through 39  Inventory at end of year  Line 41 17,200.  Cost of goods seld. Subtract line 41 from line 40. Enter the result here and on line 4  25,000.  Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.  When did you place your vehicle in service for business purposes? (month/day/year)  Of the total number of miles you drove your vehicle during 2023, enter the number of miles you used your vehicle for:  Business  b Commuting (see instructions)  c Other  Was your vehicle available for personal use during off-duty hours?  Yes No  Do you (or your spouse) have another vehicle available for personal use?  yes No  If "Yes," is the evidence written?  Yes No  Therefore, is the evidence written?  Yes No  Line 41 17,200.  S 200.  S	54			☐ Yes	⊠ No
Cost of labor. Do not include any amounts paid to yourself	35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		15,000.
Other costs	36	Purchases less cost of items withdrawn for personal use	36		10,000.
Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	37	Cost of labor. Do not include any amounts paid to yourself	37		12,000.
Inventory at end of year	38		20		
Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	10	Cither costs. Line 44 (a)	is	bla	ank
Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.  When did you place your vehicle in service for business purposes? (month/day/year)  Of the total number of miles you drove your vehicle during 2023, enter the number of miles you used your vehicle for:  Business	H	Inventory at end of year	41		17,200.
Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.  When did you place your vehicle in service for business purposes? (month/day/year)  Of the total number of miles you drove your vehicle during 2023, enter the number of miles you used your vehicle for:  Business	12	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42		25,000.
When did you place your vehicle in service for business purposes? (month/dgy/year)  Of the total number of miles you drove your vehicle during 2023, enter the number of miles you used your vehicle for:  Business	art	Information on Your Vehicle. Complete this part only if you are claiming car or are not required to file Form 4562 for this business. See the instructions for line 1	truck		line 9 and
Do you (or your spouse) have another vehicle available for personal use?.	a 15	Business b Commuting (see instructions) c C			
Do you have evidence to support your deduction?  If 'Yes,' is the evidence written?  Yes No  Yes No  Yes No  Yes No  Ano  No  If 'Yes,' is the evidence written?  Yes No	16				
If "Yes," is the evidence written?					_
es 100.  undry 400.	17a	Do you have evidence to support your deduction?	41.3	. L Yes	∐ No
es 100. undry 400.	art		27b. c		□ No
undry 400.					100
	Due	.5			
	Lau	indry			400.
37					
	******				
Total other expenses. Enter here and on line 27a	В	Total other expenses. Enter here and on line 27a	48		500.

### Where to find business miles

### 1 business vehicle **Schedule C** – Part IV, Line 44(a)

Part	Cost of Goods Sold (see instructions)	Page
33	Method(s) used to value closing inventory:  a  Cost b Lower of cost or market c Other (attach explanation)	
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation	No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation   35   26.	000
36	Purchases less cost of items withdrawn for personal use	000
37	Cost of labor. Do not include any amounts paid to yourself	
38	Materials and supplies	000
39	Other costs	
40	Add lines 35 through 39	000
41	Inventory at end of year	000
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	000
Part	are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you mu Form 4562.	
43	When did you place your vehicle in service for business purposes? (month/day/year) 01/01/2019	
44	Of the total number of miles you drove your vehicle during 2022, enter the number of miles you used your vehicle for:	
a	Business 12,000 b Commuting (see instructions) c Other 8	2.500
45	Was your vehicle available for personal use during off-duty hours?	) <b>,</b>
46	Do you (or your spouse) have another vehicle available for personal use?	) <b>,</b>
47a	Do you have evidence to support your deduction?	

# Up to 6 business vehicles IRS Form 4562 – Section B, Line 30

Total commuting miles driven during the year .							cle 4	V.0(i)	de 5	veni	cle 6
Total other personal (noncommuting) miles driven Total miles driven during the year. Add lines 30 through 32	res No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
use during off-duty hours?.  5 Was the vehicle used primarily by a more than 5% owner or related person?.											

Can also be found on separate statement

### Form 4562

OMB No. 1545-0172 Depreciation and Amortization **4562** (Including Information on Listed Property) 2023 Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest informatio ttachment sequence No. 179 mes Johnson Part I Election To Expe Page 2 Note: If you have Part V
Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Maximum amount (see instr 2 Total cost of section 179 pe 3 Threshold cost of section 17 Reduction in limitation. Subl Dollar limitation for tax y separately, see instructions. Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) Section A - Depreciation and Other Information (Gaution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? \( \begin{align\*}{c} \) Yes \( \begin{align\*}{c} \) No 2 bit \( \begin{align\*}{c} \) Yes, \( \begin{align\*}{c} \) See-def-ower within \( \begin{align\*}{c} \) Yes \( \begin{align\*}{c} \) No 2 bit \( \begin{align\*}{c} \) Yes, \( \begin{align\*}{c} \) See-def-ower within \( \begin{align\*}{c} \) Yes \( \begin{align\*}{c} \) No 2 bit \( \begin{align\*}{c} \) Yes \( \begin{align\*}{c} \) No 2 bit \( \begin{align\*}{c} \) Yes \( \begin{align\*}{c} \) No 2 bit \( \begin{align\*}{c} \) Yes \( \begin{align\*}{c} \) No 2 bit \( \begin{align\*}{c} \) Yes \( \begin{align\*}{c} \) No 2 bit \( \begin{align\*}{c} \) Yes \( \begin{align\*}{c} \) No 2 bit \( \begin{align\*}{c} \) Yes \( \begin{align\*}{c} \) No 2 bit \( \begin{align\*}{c} \) Yes \( \begin{align\*}{c} \) No 2 bit \( \begin{align\*}{c} \) Yes \( \begin{align\*}{c} \) No 2 bit \( \begin{align\*}{c} \) Yes \( \begin{align\*}{c} \) No 2 bit \( \begin{align\*}{c} \) Yes \( \begin{align\*}{c} \) No 2 bit \( \begin{align\*}{c} \) Yes \( \begin{align\*}{c} \) No 2 bit \( \begin{align\*}{c} \) Yes \( \begin{align\*}{c} \) No 2 bit \( \begin{align\*}{c} \) Yes \( \begin{align\*}{c} \) No 2 bit \( \beg 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions 7 Listed property. Enter the a 26 Property used more than 50% in a qualified busines use: FORG F350 01/01/2019 100 % GMC Sierra 2500HD 05/30/2023 100 % 9 Tentative deduction Enter the 10 Carryover of disallowed dedu 11 Business income limitation. 27 Property used 50% or less in a qualified business use 12 Section 179 expense deduc 13 Carryover of disallowed ded Note: Don't use Part II or Part III b 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 . . . during the tax year. See instr Section B - Information on Use of Vehicles 15 Property subject to section Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. Part III MACRS Depreci Total business/investment miles driven during the year (don't include commuting miles)

Total commuting miles driven during the year. 17 MACRS deductions for ass 6000 18 If you are electing to gro asset accounts, check here . 32 Total other personal (noncommuting) Section B (a) Classification of propert 19a 3-year property Yes No Yes No X Yes No Yes No Yes No use during off-duty hours? . . . . . . . . . . . . b 5-year property c 7-year property 35 Was the vehicle used primarily by a more than 5% owner or related person?..... d 10-year property e 15-year property 36 Is another vehicle available for personal use? X f 20-year property Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees g 25-year property Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons. See instructions. h Residential rental property 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by Yes No I Nonresidential rea property 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your Section C - As employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners . . . . . 20a Class life b 12-year 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? c 30-year 41 Do you meet the requirements concerning qualified automobile demonstration use? See instructions . . . . . . . Part IV Summary (See i Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization 21 Listed property. Enter amou 22 Total. Add amounts from here and on the appropriate 23 For assets shown above a 42 Amortization of costs that begins during your 2023 tax year (see instructions): portion of the basis attribut For Paperwork Reduction Act N JSA 3W8656 1.000 43 Amortization of costs that began before your 2023 tax year. 43
44 Total. Add amounts in column (f). See the instructions for where to report 44 Form 4562 (2023) 54 3X2310 1.000

# Checking for standard deduction MGIC

### Form 4562, Line 30

	T. 11		a) ide 1		b) icle 2		c) icle 3		d) icle 4		e) ide 5		f) ide 6
30	Total business/investment miles driven during the year (don't include commuting miles)	1	2000		6000	_							
31 32													
33	Total miles driven during the year. Add lines 30 through 32	1	2000		6000		0		0		0		0
34	Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35	Was the vehicle used primarily by a more than 5% owner or related person?	Х		Х									
36	Is another vehicle available for personal use?	х		Х									

Year	Standard Deduction	Depreciation
2021	56.0¢	26¢
1/1/22 through 6/30/22	58.5¢	26¢
7/1/22 through 12/31/22	62.5¢	26¢
2023	65.5¢	28¢

Checking the math: 18,000 (business miles) x .655 (2023 factor) = \$11,790

#### Schedule C. Line 9

Part	Expenses enter ex	penses for	business use of yo	our ho	me only on line 30.		
8	Advertising	8		18	Office expense (see instructions) .	18	520.
9	Car and truck expenses (see instructions)	9	11,790.	19 20	Pension and profit-sharing plans . Rent or lease (see instructions):	19	
10	Commissions and fees .	10		a	Vehicles, machinery, and equipment	20a	
11	Contract labor (see instructions)	11		b	Other business property	20b	
12	Depletion	12		21	Repairs and maintenance	21	
13	Depreciation and section 179			22	Supplies (not included in Part III) .	22	
	expense deduction (not included in Part III) (see instructions)	13	2,300.	23 24	Taxes and licenses	23	-
14	Employee benefit programs			a	Travel	24a	
	(other than on line 19) .	14		b	Deductible meals (see instructions)	24b	1,200.
15	Insurance (other than health)	15	1,200.	25	Utilities	25	1,850.
16	Interest (see instructions):			26	Wages (less employment credits)	26	24,000.
a	Mortgage (paid to banks, etc.)	16a	3,800.	27a	Other expenses (from line 48)	27a	500.
b	Other	16b		b	Energy efficient commercial bldgs		
17	Legal and professional services	17	750.		deduction (attach Form 7205)	27b	

	Note: For a 24b, column	ny vehicle for which ns (a) through (c) o	you are us f Section A.	ing the	standa Section	rd mile B, and	age rat Section	e or d C if a	feducting pplicable.	lease e	expense	compl	ete only	24a,	
		- Depreciation and													
24a E	o you have eviden	ce to support the bus		ent use	claimed?	XY		No	24b If "Y	res," is t	he evider	nce writt	en? X	Yes	No
Ту	(a) pe of property (list vehicles first)	(b) Date placed in service	Business/ investment us percentage	e Cost	(d) or other ba	Bar (bu	(e) sis for depressinessinve use only	stment	(f) Recovery period	Met	g) hod/ rention	Depre	(h) eciation uction	Elected s	i) section 179 ost
		ition allowance fi sed more than 50%	for qualifie				placed		service	during	25				
6 F	roperty used mo	re than 50% in a qu	ualified busin	ess us	e:										
For	1 F350	01/01/2019	100												
SMC 5	Sierra 2500HD	05/30/2023	100	%											
				%											
27 F	roperty used 50°	% or less in a qualifi	ied business	use:		_		_	_	0.0					
				%		-		_		S/L -		_			
				76		_		_		S/L -				1	
8 A	dd amounts in o	olumn (h), lines 25		_	here an	d on lie	ne 21 n	age 1		0/2	28				
		olumn (i), line 26. E					~ Z1, p	age I			. 20	20072.00	29		
			Sectio				n Hea	of Vo	hiclos				.   25		
omp	lete this section fe	or vehicles used by								er," or r	elated p	erson.	If you p	rovided	vehicle
		nswer the questions in													
				(1	1)	(	b)		(c)		d)		(0)		ŋ
0 T	otal business/inv	estment miles drive	en during	veni	cie 1	ven	icie z	Ve	enicie 3	Veh	icle 4	Veh	ride 5	Veh	ide 6
ti	ne year (don't inc	lude commuting m	iles)	1	2000		6000								
1 T	otal commuting r	miles driven during	the year							-					
2 T		personal (nonco	mmuting)												
	niles driven									-				_	_
		en during the y			0000				0						
		2		Yes	2000 No	Yes	6000 No	Yes	No	Yes	0	V	No.	W	
		available for pers		X	NO	X	NO	Tes	NO	res	No	Yes	No	Yes	No
		y hours? used primarily by		^		_^	_		+	-			_		_
		related person?		х		x							1		
C.	iali 576 Owlier Of	related persons, .							+				_		
16 b	another vehicle	available for pers	sonal use?	x		x									
		ection C - Question	-	nlove	e Who	Provi	de Vet	iclos	for Hee	by Th	oir Em	nlove	ne .		
		Busine	ess M	lile	s x	De	pro	eci	iatio	on I	Rat	е			
9 E	o you treat all us	e of vehicles by em	plovees as	persona	l use?										
		more than five vel													
		s, and retain the info													
		equirements conce ver to 37, 38, 39, 4													
Part	VI Amortizat	tion									_				
	(a) Description	of costs	(b) Date amorti begins		Am	(c)	amount		(d) Code se	ection	Amortiz perio	tation d or	Amortiza	(f)	nis year
	mortization of co	sts that begins duri			rear (se	e instr	ictions)	_	100000		percer	tage			
12 4		ow was boging duri	Jour 20	LU IOA	car (se	- moti	)					Т			
2 A															
12 A								$\neg$							

# **MGIC**

### SAM Cash Flow Analysis Worksheet

	Name:	Property Maintenance Minjas - James			2023	
4	Net Profit (Loss	: LINE 31			\$ 52,655.00	
5	Deduct nonrect	urring income/add nonrecurring loss or expense: LINE 6				
6	Depletion: LINE	12				
7	Depreciation: L	INE 13			\$ 2,300.00	
8	Non-Deductible	e Meals and Entertainment Exclusion: LINE 24b	1	(	\$ 1,200.00	
9	Business Use of	Home: LINE 30			\$ 400.00	
10	Business Miles	Page 2, Part IV, LINE 44a OR Related 4562, Line 30	•	*Miles	18,000	
11a	x Depreciati	on Rate 2023: \$0.28, 2022: \$0.26, 2021: \$0.26			\$ 0.28	
11b	=Total Mile	age Depreciation			\$ 5,040.00	
12	Amortization/C	asualty Loss (only if noted): page 2, part V				
	SUBTOTAL				\$ 59,195.00	

Part	Cost of Goods Sold (see instructions)			
33	Method(s) used to value closing inventory:  a 🗶 Cost b Lower of cost or market c Other (atta	ich exp	lanation)	
34	Was there any change in determining quantities, costs, or valuations between opening and closing invento if "Yes," attach explanation	ry? 	☐ Yes	× N
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		15,00
36	Purchases less cost of items withdrawn for personal use	36		10,00
37	Cost of labor. Do not include any amounts paid to yourself	37		12,00
38	Materials and supplies	38		5,20
39	Other costs.	39		
40	Add lines 35 through 39	40		42,20
41	Inventory at end of year	41		17,20
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42		25,00
43	When did you place your vehicle in service for business purposes? (month/day/year)  Of the total number of miles you drove your vehicle during 2023, enter the number of miles you used your		for:	
a	Business b Commuting (see instructions) c C	ther _		
a 45		other .		
	Business b Commuting (see instructions) c c	Other		
45 46	Business b Commuting (see instructions) c C  Was your vehicle available for personal use during off-duty hours?	Other	. 🗌 Yes	
45 46 47a	Business b Commuting (see instructions) c c C Was your vehicle available for personal use during off-duty hours?  Do you (or your spouse) have another vehicle available for personal use?.  Do you have evidence to support your deduction?  If "Yes," is the evidence written?			 
45 46 47a b	Business b Commuting (see instructions) c c C Was your vehicle available for personal use during off-duty hours?  Do you (or your spouse) have another vehicle available for personal use?.  Do you have evidence to support your deduction?  If "Yes," is the evidence written?  V Other Expenses. List below business expenses not included on lines 8–26, line	27b, c		N
45 46 47a b Par	Business b Commuting (see instructions) c c C Was your vehicle available for personal use during off-duty hours?  Do you (or your spouse) have another vehicle available for personal use?.  Do you have evidence to support your deduction?  If "Yea," is the evidence written?  Other Expenses. List below business expenses not included on lines 8–26, line	27b, c		N
45 46 47a b Par	Business b Commuting (see instructions) c c C Was your vehicle available for personal use during off-duty hours?  Do you (or your spouse) have another vehicle available for personal use?.  Do you have evidence to support your deduction?  If "Yes," is the evidence written?  V Other Expenses. List below business expenses not included on lines 8–26, line	27b, c		N
45 46 47a b Par	Business b Commuting (see instructions) c c C Was your vehicle available for personal use during off-duty hours?  Do you (or your spouse) have another vehicle available for personal use?.  Do you have evidence to support your deduction?  If "Yea," is the evidence written?  Other Expenses. List below business expenses not included on lines 8–26, line	27b, c		
45 46 47a b Part	Business b Commuting (see instructions) c c C  Was your vehicle available for personal use during off-duty hours?  Do you (or your spouse) have another vehicle available for personal use?.  Do you have evidence to support your deduction?  If "Yes," is the evidence written?  Other Expenses. List below business expenses not included on lines 8–26, line es	27b, c		N
45 46 47a b Part	Business b Commuting (see instructions) c C Was your vehicle available for personal use during off-duty hours?  Do you (or your spouse) have another vehicle available for personal use?.  Do you have evidence to support your deduction?  If "Yes," is the evidence written?  Vother Expenses. List below business expenses not included on lines 8–26, line ess	27b, c		N
45 46 47a b Part Du	Business b Commuting (see instructions) c C Was your vehicle available for personal use during off-duty hours?  Do you (or your spouse) have another vehicle available for personal use?.  Do you have evidence to support your deduction?  If "Yes," is the evidence written?  Violatine Expenses. List below business expenses not included on lines 8–26, line est	27b, c		N
45 46 47a b Part Du	Business b Commuting (see instructions) c C Was your vehicle available for personal use during off-duty hours?  Do you (or your spouse) have another vehicle available for personal use?.  Do you have evidence to support your deduction?  If "Yes," is the evidence written?  Other Expenses. List below business expenses not included on lines 8-26, line es	227b, c		N
45 46 47a b Part Du	Business b Commuting (see instructions) c C C Was your vehicle available for personal use during off-duty hours?  Do you (or your spouse) have another vehicle available for personal use?.  Do you have evidence to support your deduction?  If "Yes," is the evidence written?  V Other Expenses. List below business expenses not included on lines 8–26, line es  unday.	227b, c		N   N   100   400
45 46 47a b Part Du	Business b Commuting (see instructions) c C Was your vehicle available for personal use during off-duty hours?  Do you (or your spouse) have another vehicle available for personal use?.  Do you have evidence to support your deduction?  If "Yes," is the evidence written?  W Other Expenses. List below business expenses not included on lines 8–26, line est	227b, c		N   N   N   N   N   N   N   N   N   N
45 46 47a b Part Du	Business b Commuting (see instructions) c C C Was your vehicle available for personal use during off-duty hours?  Do you (or your spouse) have another vehicle available for personal use?.  Do you have evidence to support your deduction?  If "Yes," is the evidence written?  V Other Expenses. List below business expenses not included on lines 8–26, line es  unday.	227b, c		

# **MGIC**

### SAM Cash Flow Analysis Worksheet

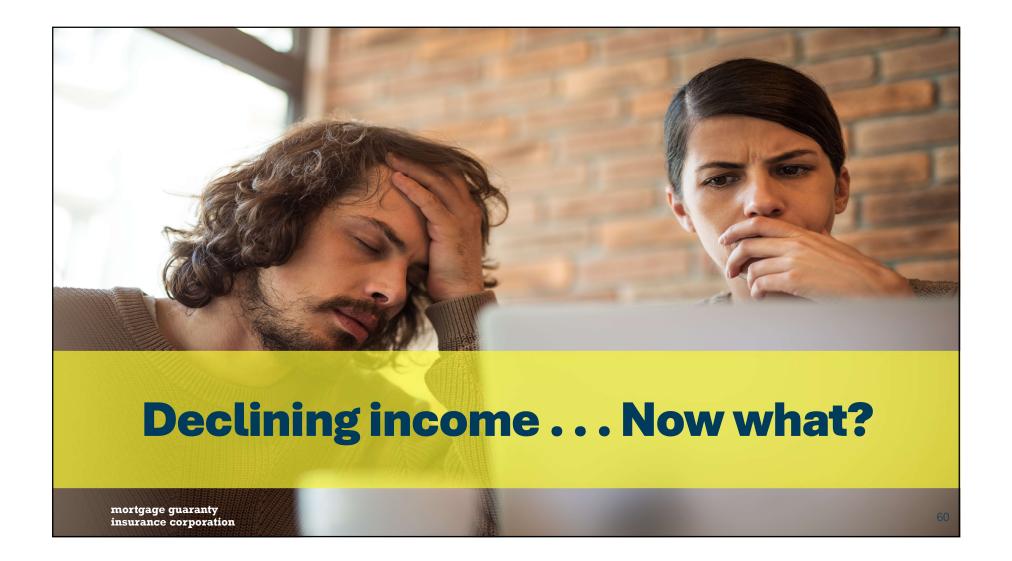
Name: Property Maintenance Minjas - James

4	Net Profit (Loss): LINE 31		\$	52,655.00
5	Deduct nonrecurring income/add nonrecurring loss or expense: LINE $\boldsymbol{6}$	•		
6	Depletion: LINE 12			
7	Depreciation: LINE 13	10	\$	2,300.00
8	Non-Deductible Meals and Entertainment Exclusion: LINE 24b	A	15	1 200 00 1
	2023 cash flow is co			
10	2023 CASH TIOW IS CO	mpu		18,000
10 11a				
	business wines. Page 2, Part IV, Line 44a On Related 4502, Line 30			18,000
11a	x Depreciation Rate 2023: \$0.28, 2022: \$0.26, 2021: \$0.26			0.28

# Please cash flow tax year 2022 Ready You can do this! Set mortgage guaranty 58 insurance corporation

(Forn	EDULE C n 1040) ment of the Treasury Revenue Service				instru			OMB No. 1545-007  2022  Attachment Sequence No. 09
Name	of proprietor						Social se	curity number (SSN)
Jame	es Johnson						000-0	0-0000
A	Principal busines	s or profession	on, incl	uding product or service (se	e instr	uctions)	B Enter o	code from instructions
	Property N	Maintenar	ice a	and Repair Service	es		9	9 9 0 0 0
С	Business name.	If no separate	busin	ess name, leave blank.			D Employ	yer ID number (EIN) (see in
	Property N	Maintenar	ice 1	Vinjas				
E	Business addres	s (including si	uite or	room no.) 800 W Co	mme:	ccial Ave		220220000000000000000000000000000000000
	City, town or po	st office, state	, and	ZIP code Jackson,	TN	38305		
F	Accounting meti					Other (specify)	. 5000,000,000	
G	Did you "materia	ally participate	" in th	e operation of this business	during	2022? If "No," see instructions for I	imit on loss	es . X Yes
н	If you started or	acquired this	busine	ess during 2022, check here				🗆
1	Did you make ar	ny payments i	n 2022	that would require you to fil	e Forn	n(s) 1099? See instructions	0 19 KI N	🗙 Yes 🗌
J	If "Yes," did you	or will you file	e requi	red Form(s) 1099?				🗙 Yes 🗌
Par	Income							
1	Gross receipts of	r sales. See in	nstruct	ions for line 1 and check the	box it	this income was reported to you or		
				yee" box on that form was ch			1	117,20
2	Returns and allo	wances	13.0			* * * * * * * * * * * * * * * * * * *	. 2	
3	Subtract line 2 fr	rom line 1 .					. 3	117,20
4	Cost of goods s	old (from line	42) .				. 4	28,00
5	Gross profit. St	btract line 4 f	rom lin	ю3			. 5	89,20
6				state gasoline or fuel tax cre			. 6	4,500
7	Gross income.						. 7	93,70
Part			pense	es for business use of yo	ur ho	me only on line 30.		
8	Advertising	2 2 2 2	8		18	Office expense (see instructions)	. 18	50
9	Car and truck				19	Pension and profit-sharing plans	. 19	
	(see instructions		9	7,260.	20	Rent or lease (see instructions):		
10	Commissions ar		10		a	Vehicles, machinery, and equipmen		
11	Contract labor (see		11		ь	Other business property		
12	Depletion Depreciation and		12		21	Repairs and maintenance	. 21	
13	expense dedu				22	Supplies (not included in Part III)		
	included in Pa	rt III) (see			23	Taxes and licenses	. 23	
	instructions) .		13	2,400.	24	Travel and meals:		
14	Employee benef				a	Travel	. 24a	
	(other than on lir		14	1.000	b	Deductible meals (see		2 00
15	Insurance (other		15	1,000.		instructions)		1,00
16	Interest (see inst				25	Utilities	. 25	1,65
a	Mortgage (paid to		16a	3,800.	26	Wages (less employment credits)	26	800
17	Other		16b	600.	27a	Other expenses (from line 48) .  Reserved for future use	. 27a	800
28	Legal and profess					8 through 27a	. 28	24,56
29						s through 27a	29	69,14
							-	03,14
30				See instructions.	expe	nses elsewhere. Attach Form 8829	, l	
				r the total square footage of	(a) vo	ir home:		
	and (b) the part				,	. Use the Simplified	-	
				s to figure the amount to ent	eron		. 30	
31	Net profit or (lo						- 30	
				1 (Form 1040), line 3, and o	o Cab	adula SE line 2 (if you		
				1 (Form 1040), line 3, and outtions.) Estates and trusts, of			31	69,140
	• If a loss, you n					100000000000000000000000000000000000000		
32	If you have a los	s, check the b	box tha	t describes your investment	in this	activity. See instructions.		
	If you checked	32a, enter th	e loss	on both Schedule 1 (Form 1	040).	line 3, and on Schedule	10.0	
	SE, line 2. (If you	checked the		line 1, see the line 31 instruc				All investment is at ri
	Form 1041, line	3.					32b	Some investment is r
				ch Form 6198. Your loss ma				

Method(s) used to value closing inventory:    Nethod(s) used to value closing inventory:   Nethod(s) used to value closing inventory:   Nethod(s) used to value closing inventory:   Nethod(s) used to value closing inventory:   Ves	Method(s) used to value closing inventory: a	Method(s) used to value closing inventory:    Mas there any change in determining quantities, costs, or valuations between opening and closing inventory?   Ves		ule C (Form 1040) 2022  Cost of Goods Sold (see instructions)			Page 2
was there any change in determining quantities, costs, or valuations between opening and closing inventory?  If "Yes," attach explanation  was there any change in determining quantities, costs, or valuations between opening and closing inventory?  If "Yes," attach explanation    Yes	value closing inventory: a	walus closing inventory:  a					
If "Yes," attach explanation   Yes   No   Inventory at beginning of year. If different from last year's closing inventory, attach explanation   36	If "Yes," attach explanation .	If Yes, a tach explanation   vest   v	3	Method(s) used to value closing inventory: a ☒ Cost b ☐ Lower of cost or market c ☐ Other (att	ach explan	ation)	
Purchases less cost of items withdrawn for personal use  Cost of labor. Do not include any amounts paid to yourself.  37  Materials and supplies  38  2,000.  Other costs.  39  Add lines 35 through 39  40  43,000.  Inventory at end of year  41  15,000.  Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4  42  28,000.  It VI  Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.  When did you place your vehicle in service for business purposes? (month/day/year)  Of the total number of miles you drove your vehicle during 2022, enter the number of miles you used your vehicle for:  a Business  12,000 b Commuting (see instructions)  Ves No  Do you (or your spouse) have another vehicle available for personal use?  Yes No  10 b H-Yes, "is the evidence to support your deduction?  Yes No  TUV Other Expenses. List below business expenses not included on lines 8–26 or line 30.	Purchases less cost of items withdrawn for personal use  36	Purchases less cost of items withdrawn for personal use 36 15,000.  Cost of labor. Do not include any amounts paid to yourself. 37  Materials and supplies 38 2,000.  Other costs. 39  Add lines 35 through 39 40 43,000.  Inventory at end of year 41 15,000.  Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4 42 28,000.  IV Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.  When did you place your vehicle in service for business purposes? (month/day/year) 01/01/2019  Of the total number of miles you drove your vehicle during 2022, enter the number of miles you used your vehicle for:  Business 12,000 b Commuting (see instructions) c Other 8,000  Was your vehicle available for personal use during off-duty hours? \ \Rightarrow Yes \ No  Do you have evidence to support your deduction? \ \Rightarrow Yes \ No  If "Yes," is the evidence written? \ \Rightarrow Yes \ No  The Borrrower used standard deduction  The borrrower used standard deduction  The borrrower used standard deduction	34		ory?	☐ Yes	⊠ No
Cost of labor. Do not include any amounts paid to yourself	37 Cost of labor. Do not include any amounts paid to yourself	Cost of labor. Do not include any amounts paid to yourself.  Materials and supplies  36 2,000.  Other costs.  36 2,000.  Add lines 35 through 39 40 43,000.  Inventory at end of year  Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4 42 28,000.  If Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.  When did you place your vehicle in service for business purposes? (month/day/year) 01/01/2019  Of the total number of miles you drove your vehicle during 2022, enter the number of miles you used your vehicle for:  Business 12,000 b Commuting (see instructions) c Other 8,000  Was your vehicle available for personal use during off-duty hours? \ X Yes \ No  Do you have evidence to support your deduction? \ X Yes \ No  Of the Tyes, 'is the evidence written? \ X Yes \ No  The Borrrower used standard deduction  The borrrower used standard deduction  The borrrower used standard deduction	35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		26,000.
Materials and supplies  Other costs.  Other costs.  Add lines 35 through 39 Inventory at end of year  Inventory at end of year  Osst of goods seld. Subtract line 41 from line 40. Enter the result here and on line 4  Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 9 and are no resulted to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.  When did you place your vehicle in service for business purposes? (month/day/year)  Of the total number of miles you drove your vehicle during 2022, enter the number of miles you used your vehicle for:  a Business  12,000 b Commuting (see instructions)  Was your vehicle available for personal use during off-duty hours?  Ves No  Do you (or your spouse) have another vehicle available for personal use?  Yes No  The Yes, "is the evidence to support your deduction?  Yes No  Other Expenses. List below business expenses not included on lines 8–26 or line 30.	38	Materials and supplies  Other costs	36	Purchases less cost of items withdrawn for personal use	36		15,000.
Other costs	39 Other costs	Other costs	37	Cost of labor. Do not include any amounts paid to yourself	37		
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Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4.   42   28,000.	41	Cost of goods sold, Subtract line 41 from line 40. Enter the result here and on line 4.   42   28,000.	39	Other costs.	39		
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Business 12,000 b Commuting (see instructions) c Other 8,000  Was your vehicle available for personal use during off-duty hours? System No  Do you (or your spouse) have another vehicle available for personal use? System No  a Do you have evidence to support your deduction? System No  b If "Yes," is the evidence written? System No  other Expenses. List below business expenses not included on lines 8-26 or line 30.	a Business 12,000 b Commuting (see instructions) c Other 8,000  45 Was your vehicle available for personal use during off-duty hours?	Business 12,000 b Commuting (see instructions) c Other 8,000  Was your vehicle available for personal use during off-duty hours?	43	When did you place your vehicle in service for business purposes? (month/day/year) 01/01/2019			
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Do you (or your spouse) have another vehicle available for personal use?.    Yes   No	16 Do you (or your spouse) have another vehicle available for personal use?	Do you (or your spouse) have another vehicle available for personal use?.   No   No   No   No   No   No   No   N		The state of the s	Volume ion		
a Do you have evidence to support your deduction?	47a Do you have evidence to support your deduction?	Do you have evidence to support your deduction?	a				8,000
b If "Yes," is the evidence written?	b If "Yes," is the evidence written?  Other Expenses. List below business expenses not included on lines 8-26 or line 30.	If "Yes," is the evidence written?  V Other Expenses. List below business expenses not included on lines 8–26 or line 30.  25.  100.  26.  27.  28.  100.  29.  20.  20.  20.  20.  20.  20.		Business 12,000 b Commuting (see instructions) c		_	
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oues 100.	200	The borrower used standard deduction	45 46	Business 12,000 b Commuting (see instructions) c 6  Was your vehicle available for personal use during off-duty hours?  Do you (or your spouse) have another vehicle available for personal use?.		⊠ Yes	□ No
	Dues 100.	The borrower used standard deduction	45 46 47a b	Business 12,000 b Commuting (see instructions) c G  Was your vehicle available for personal use during off-duty hours?  Do you (or your spouse) have another vehicle available for personal use?.  Do you have evidence to support your deduction?	Other	<ul><li>X Yes</li><li>X Yes</li><li>X Yes</li></ul>	□ No □ No □ No
aundry 400.		The borrower used standard deduction	45 46 47a b	Business 12,000 b Commuting (see instructions) c c  Was your vehicle available for personal use during off-duty hours?  Do you (or your spouse) have another vehicle available for personal use?.  Do you have evidence to support your deduction?  If "Yes," is the evidence written?  Other Expenses. List below business expenses not included on lines 8–26 or line	Other	<ul><li>X Yes</li><li>X Yes</li><li>X Yes</li></ul>	No No No No
	Laundry 400.	The borrower used standard deduction	45 46 47a b	Business 12,000 b Commuting (see instructions) c c  Was your vehicle available for personal use during off-duty hours?  Do you (or your spouse) have another vehicle available for personal use?.  Do you have evidence to support your deduction?  If "Yes," is the evidence written?  Vother Expenses. List below business expenses not included on lines 8–26 or line.	Other	<ul><li>X Yes</li><li>X Yes</li><li>X Yes</li></ul>	No No No No
Casualty Loss 300.	Casualty Loss 300.		45 46 47a b	Business 12,000 b Commuting (see instructions) c c  Was your vehicle available for personal use during off-duty hours?  Do you (or your spouse) have another vehicle available for personal use?.  Do you have evidence to support your deduction?  If "Yes," is the evidence written?  VOther Expenses. List below business expenses not included on lines 8–26 or lines.	Other	<ul><li>X Yes</li><li>X Yes</li><li>X Yes</li></ul>	No
			45 46 47a b	Business 12,000 b Commuting (see instructions) c 6  Was your vehicle available for personal use during off-duty hours?  Do you (or your spouse) have another vehicle available for personal use?.  Do you have evidence to support your deduction?  If "Yea," is the evidence written?  W Other Expenses. List below business expenses not included on lines 8–26 or lines.	Other	<ul><li>X Yes</li><li>X Yes</li><li>X Yes</li></ul>	No
The borrower used standard deduction		Total other expenses. Enter here and on line 27a	45 46 47a b	Business 12,000 b Commuting (see instructions) c 6 6  Was your vehicle available for personal use during off-duty hours?  Do you (or your spouse) have another vehicle available for personal use?.  Do you have evidence to support your deduction?  If "Yes," is the evidence written?  Other Expenses. List below business expenses not included on lines 8–26 or lines  undry.  sualty_Loss	Other	∀es     ∀es     ∀es     ∀es     Yes     Yes	No No No No 100.
The borrower used standard deduction		Total other expenses. Enter here and on line 27a	45 46 47a b	Business 12,000 b Commuting (see instructions) c 6 6  Was your vehicle available for personal use during off-duty hours?  Do you (or your spouse) have another vehicle available for personal use?.  Do you have evidence to support your deduction?  If "Yes," is the evidence written?  Other Expenses. List below business expenses not included on lines 8–26 or lines  undry.  sualty_Loss	Other	∀es     ∀es     ∀es     ∀es     Yes     Yes	No No No No 100.
The borrower used standard deduction			45 46 47a b	Business 12,000 b Commuting (see instructions) c 6 6  Was your vehicle available for personal use during off-duty hours?  Do you (or your spouse) have another vehicle available for personal use?.  Do you have evidence to support your deduction?  If "Yes," is the evidence written?  Other Expenses. List below business expenses not included on lines 8–26 or lines  undry.  sualty_Loss	Other	∀es     ∀es     ∀es     ∀es     Yes     Yes	No No No No 100.
			Was Doy Doy If Y	s your vehicle available for personal use during off-duty hours?  you (or your spouse) have another vehicle available for personal use?  you have evidence to support your deduction?  Other Expenses. List below business expenses not included on lines 8–26 or lines.  EX.  The borrower used standard default of the borrower used standard	edu	⊠ Yes ⊠ Yes ⊠ Yes ⊠ Yes	No



# Word bank:

higher averaged

lower disregarded

- 1. If the trend in the amount of income is stable or increasing, the income amount should be <u>averaged</u>.
- 2. If the trend is declining but has since stabilized and there's no reason to believe the borrower will not continue to be employed at the current level, the <u>lower</u> amount of income must be used.
- 3. If the trend is declining, the income may not be stable.

  Additional analysis must be conducted to determine if any income should be used, but in no instance may it be

  averaged over the period when the decline occurred.

# Submission from Borrower

### **Letter of Explanation**

To whom it may concern,

Please accept this letter as an explanation of the declining 2023 income for Property Maintenance Ninjas. Last year was a year of expansion for us. We hired an additional technician and purchased a new work vehicle. Because of this additional staffing, we were able to obtain a new service contract, see attached. We expect for 2024 to exceed prior earnings history and, in fact, our YTD P&L shows an increase of about 25% from 2022.

#### YTD P&L

#### Property Maintenance Ninjas

Income Statement Date: 3/31/24

Income:

 Services rendered
 \$46,850

 Other income
 \$ 500

 Cost of materials
 \$ 6,750

GROSS PROFITS	\$40,600
Expenses:	
Salaries	\$ 15,500
Licenses	\$ 500
Insurance	\$ 400
Maintenance	\$ 250
Meals	\$ 375
Depreciation	\$ 975
Mortgage	\$ 950
Auto	\$ 1,895
TOTAL EXPENSES	\$20,845

NET PROFIT \$19,75

# Comparison

			m 1040, 1040	Profit or Los (Sole P SR, 1040-SS, 1040-N s.gov/ScheduleC fo	Form 1065.	OMB No. 1545-0074  2023  Attachment Sequence No. 09		
Name of	f proprietor						Social sec	curity number (SSN)
	s Johnson						000-00	0000
				product or service (se		uctions)		ode from instructions
				Repair Servic	es	0194-0140	9 9	9 0 0 0
				me, leave blank.			D Employe	er ID number (EIN) (see instr.)
	Property M	laintenan	ce Ninj	3.5		~~~		
	Business addres City, town or por					cial Ave		
	Accounting met					Other (specify)		
				ation of this business	during	2023? If "No," see instructions for I	mit on losse	s X Yes No
						(s) 1099? See instructions		. X Yes □ No
	If "Yes." did you				io rom	ita) 10097 See instructions		Yes No
Part		or war you me	required ro	iiina) rosst	-			20.00
		s sales Cr.	eteretlee . *	a fine 4 and about 1	- hau 2	Marie Services Company of the Compan		
1	Form W-2 and the	r sales, see it	amployee" b	or line 1 and check the ox on that form was o	becker	this income was reported to you or	1	125,965.
	Returns and allo			on on man form was c			2	-20,000.
	Subtract line 2 fr				0.00		3	125,965.
- 3	Cost of goods s		42)		2.5		4	25,000.
	Gross profit. Su				8 3		5	100,965.
				annoline or fuel tay on	adit or r	refund (see instructions)	6	100,000.
	Gross income.			jasoline or ruel tax on	Balt or I	eluna (see instructions)	7	100,965.
Part I				hueinage uga of vi	our ho	me only on line 30.		100,965.
	Advertising		8	business use of y	18	Office expense (see instructions)	18	520.
			8		19	Pension and profit-sharing plans		320.
	Car and truck		9	11,790.	20		19	
	(see instructions		10	11,790.	-	Rent or lease (see instructions):	20a	
	Commissions an		11		a	Vehicles, machinery, and equipment		
	Contract labor (see		12			Other business property		
	Depletion Depreciation and		12		21	Repairs and maintenance		
	expense dedu				22	Supplies (not included in Part III)		
	included in Pa	rt III) (see	No.	2,300.	23	Taxes and licenses	23	
			13	2,300.	24	Travel and meals:		
	Employee benef				a	Travel	24a	
	(other than on lin		14	1,200.	ь	Deductible meals (see instructions)	24b	1,200.
	Insurance (other		15	1,200.	-00	Maria di Cara	00	24,000.
100	Interest (see inst		400	2 000	26	Wages (less employment credits)	26	
	Mortgage (paid to		16a	3,800.	2/8		2/8	500.
	Other		17	750.	ь	Energy efficient commercial bldgs	27b	
	Legal and profess				I Hanne	deduction (attach Form 7205) .	27b	47,910.
				om line 7			29	53,055.
	Expenses for bu unless using the				e expe	nses elsewhere. Attach Form 8829	S	
				otal square footage of	(a) you	r home:		
	and (b) the part				24,300	. Use the Simplified		
				ure the amount to en	ter or l		30	400.
	Net profit or (lo						- T	400.
						edule SE, line 2. (If you	188	22 22
				.) Estates and trusts,	enter o	n Form 1041, line 3.	31	52,655.
	<ul> <li>If a loss, you n</li> </ul>					J		
32	If you have a los	s, check the t	ox that desc	ribes your investmen	t in this	activity. See instructions.		
	· If you checked	32a, enter th	e loss on bot	h Schedule 1 (Form	1040).	line 3, and on Schedule	_	
	SE, line 2. (If you	checked the				Estates and trusts, enter on		All investment is at risk.
	Form 1041, line	3					32h	Some investment is not
				m 6198. Your loss m		contractor.		at risk.

(Forn	EDULE C n 1040)			(Sole P	roprie	om Business torship) actions and the latest information partnerships must generally file i		OMB No. 1545-0074  2022  Attachment Sequence No. 09
	of proprietor							curity number (SSN)
	es Johnson							0-0000
A				ng product or service (se		uctions)		ode from instructions
				Repair Servic	es			9 9 0 0 0
С	Business name. If n						D Employ	er ID number (EIN) (see instr.
	Property Mai				-			
E	Business address (it	ncluding su	ite or roo	m no.) 800 W Co	omme:	rcial Ave		
F	City, town or post o							
G	Accounting method			(2) Accrual (3	9 🗀	Other (specify) 2022? If "No," see instructions for		es . X Yes  No
H						20227 If "No," see instructions for		es . K Tes L No
						n(s) 1099? See instructions		
	If "Yes," did you or				e Porn	n(s) 10997 See instructions		Yes No
Pari		Will you file	required	Form(s) 1099?	•			M 165   NO
				and the second second second second				
1				for line 1 and check the box on that form was c		this income was reported to you o	1 1	117,200.
2	Returns and allowar				- NOW KEE	•	2	-17,200.
3	Subtract line 2 from						3	117,200.
4	Cost of goods sold		0.00		0000		4	28,000.
5					200		5	89,200.
6						refund (see instructions)	6	4,500.
7	Gross income. Add			-			7	93,700.
Part				or business use of yo	our ho	ome only on line 30.		307.001
8	Advertising		8		18	Office expense (see instructions)	. 18	50.
9	Car and truck e				19	Pension and profit-sharing plans		
-	(see instructions) .	xperiaea	9	7.260.	20	Rent or lease (see instructions):		
10	Commissions and fe		10		a	Vehicles, machinery, and equipmer	t 20a	
11	Contract labor (see ins	structions)	11		b	Other business property	. 20b	
12	Depletion		12		21	Repairs and maintenance	. 21	
13	Depreciation and sec	ction 179			22	Supplies (not included in Part III)		
	expense deduction included in Part	in (not			23	Taxes and licenses	. 23	
			13	2,400.	24	Travel and meals:		
14	Employee benefit p	rograms			a	Travel	. 24a	
	(other than on line 1		14		b	Deductible meals (see		
15	Insurance (other tha		15	1,000.		instructions)	. 24b	1,000.
16	Interest (see instruc		1		20	Oninos , , , , ,	- 20	2,000.
a	Mortgage (paid to ba		16a	3,800	26	Wages (less employment credits)		6,000.
ь	Other		16b		27a		. 27a	800.
17	Legal and professions		17	600.			. 27b	24 550
28				siness use of home. Add			28	24,560.
				from line 7				69,140.
30	Expenses for busin unless using the sin				e expe	nses elsewhere. Attach Form 882	9	
				total square footage of	(a) une	w home:		
	and (b) the part of y				fal kor	. Use the Simplified	-1	
				figure the amount to en	toron		. 30	
31	Net profit or (loss).				rei on	mio 30	30	
31					n Sch	edule SE, line 2. (If you		
	checked the box on	line 1, see	instruction	ens.) Estates and trusts,	enter o	on Form 1041, line 3.	31	69,140.
	If a loss, you mus					]		
32						activity. See instructions.		
						line 3, and on Schedule	no. [	All investment is at risk.
		ecked the I	oox on line	1, see the line 31 instruc	ctions.)	Estates and trusts, enter on		All investment is at risk. Some investment is not
	Form 1041, line 3.	b. vou eco	d attack	orm 6198. Your loss ma	ny ba "	mitort	320	Some investment is not at risk.

# **Submission from Borrower**

### **Letter of Explanation**

To whom it may concern,

Please accept this letter as an explanation of the declining 2023 income for Property Maintenance Ninjas. Last year was a year of expansion for us. We hired an additional technician and purchased a new work vehicle. Because of this additional staffing, we were able to obtain a new service contract, see attached. We expect for 2024 to exceed prior earnings history and, in fact, our YTD P&L shows an increase of about 25% from 2022.

#### YTD P&L

### Property Maintenance Ninjas

Income Statement Date: 3/31/24

CO	

Services rendered	\$46,850
Other income	\$ 500
Cost of motorials	¢ c 750

GROSS PROFITS	\$40,600
Expenses:	
Salaries	\$ 15,500
Licenses	\$ 500
Insurance	\$ 400
Maintenance	\$ 250
Meals	\$ 375
Depreciation	\$ 975
Mortgage	\$ 950
Auto	\$ 1,895
TOTAL EXPENSES	\$20,845

NET PROFIT

### Cash flow of YTD P&L

### Cash Flow P&L

### **Profit and Loss Statement Analysis**

X	SOL	E PROPRIETORSHIP	P	rop	erty Maintenance	N	inja	as
		Time Frame (i.e., YTD, quarterly):			YTD			
		Date From:			1/1/2024			
		Date Paid Through:			3/31/2024			
Net	Prof	it (Loss):		\$	19,755.00			
Ded	luct n	nonrecurring income:	(	\$	500.00	)	(	
Add	non	recurring loss:						
Dep	letio	n:						
Dep	recia	ation:		\$	975.00			
Amo	ortiza	ation/Casualty Loss:						
Oth	er:	meals		\$	(375.00)			
		Total Income:		\$	19,855.00			\$
		Monthly Income:		\$	6,618.33			\$

#### YTD P&L

#### Property Maintenance Ninjas

Income Statement Date: 3/31/24

Income:

**NET PROFIT** 

 Services rendered
 \$46,850

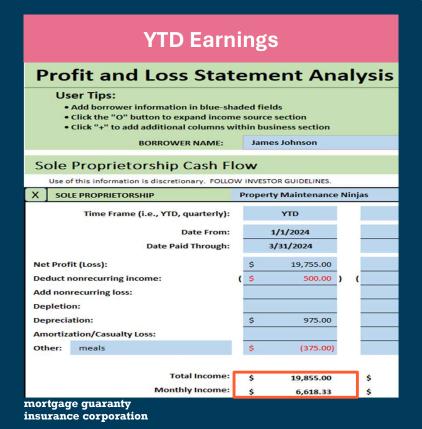
 Other income
 \$ 500

 Cost of materials
 \$ 6,750

**GROSS PROFITS** \$40,600 Expenses: Salaries \$15,500 Licenses \$ 500 Insurance \$ 400 Maintenance \$ 250 Meals \$ 375 \$ 975 Depreciation Mortgage \$ 950 \$ 1,895 TOTAL EXPENSES \$20,845

mortgage guaranty insurance corporation

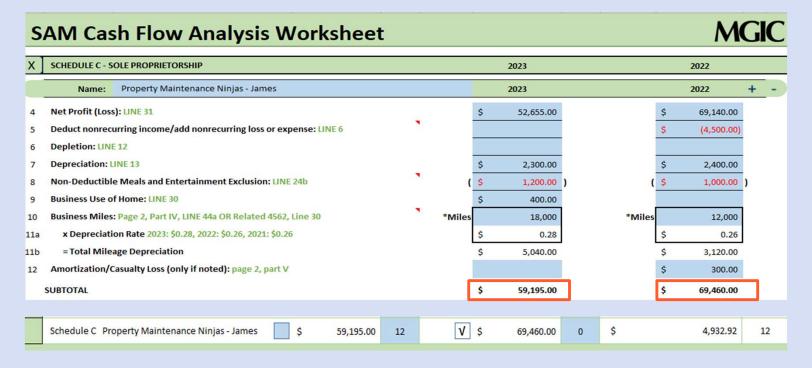
# What is the earnings trend with YTD?





#### **Determining qualifying income MGIC SAM Cash Flow Analysis Worksheet** SCHEDULE C - SOLE PROPRIETORSHIP + -Property Maintenance Ninjas - James Net Profit (Loss): LINE 31 52,655.00 69,140.00 Deduct nonrecurring income/add nonrecurring loss or expense: LINE 6 (4,500.00) Depletion: LINE 12 Depreciation: LINE 13 2,300.00 2,400.00 Non-Deductible Meals and Entertainment Exclusion: LINE 24b 1,200.00 1,000.00 **Business Use of Home: LINE 30** 400.00 Business Miles: Page 2, Part IV, LINE 44a OR Related 4562, Line 30 18,000 \*Miles 12,000 x Depreciation Rate 2023: \$0.28, 2022: \$0.26, 2021: \$0.26 11a 0.28 0.26 3,120.00 = Total Mileage Depreciation 5,040.00 11b Amortization/Casualty Loss (only if noted): page 2, part V 300.00 59,195.00 69,460.00 Schedule C Property Maintenance Ninjas - James 5,360.63 59,195.00 12 69,460.00 Schedule C Property Maintenance Ninjas - James 4,932.92 59,195.00 12 69,460.00 Schedule C Property Maintenance Ninjas - James 59,195.00 69,460.00 0 mortgage guaranty 67 insurance corporation

# Final determination of qualifying income



mortgage guaranty insurance corporation

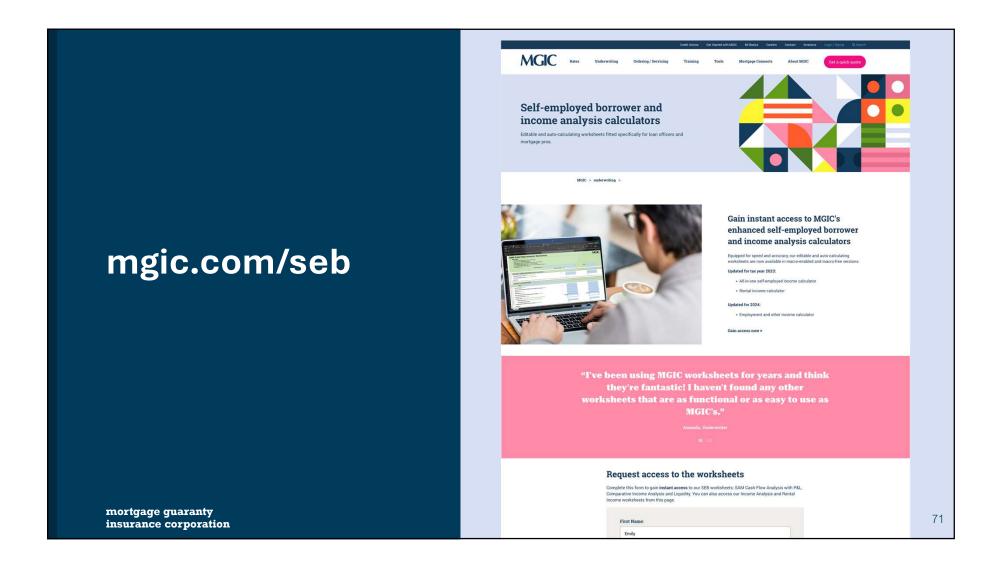
# Purpose of cash flow analysis

### Verify qualifying income that is:

- Stable
- Likely to continue

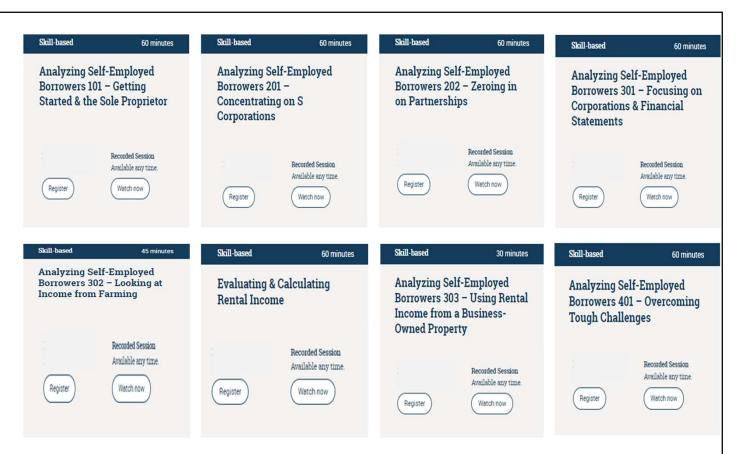




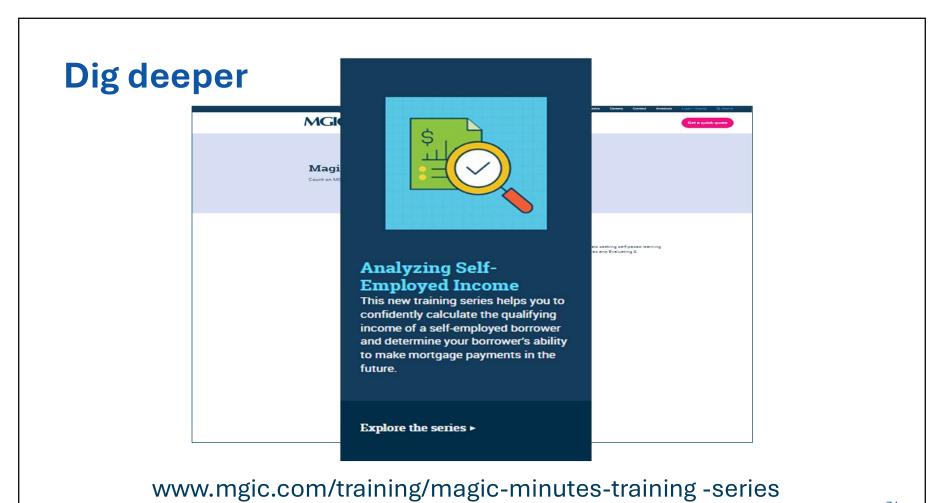








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LinkedIn: mgic.com/linkedin



YouTube: mgic.com/youtube



Facebook: mgic.com/facebook



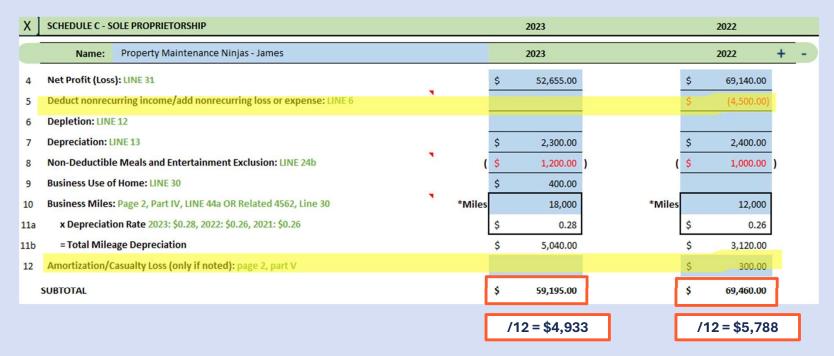


# **Answer key**

(Sole Proprietorship)  Go to www.irs.gov/ScheduleC for instructions and the latest information.  Western 1040, 1040-SR, 1040-NR, or 1041; partnerships must generally file Form 1065.  Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships must generally file Form 1065.		
wenue Service Attach to Form 1040, 1040-SR, 1040-NR, or 1041; partnerships must generally file Form 1065. Sequence No. 09 proprietor Social security number (SSN)		
Johnson 000-00-0000		
rincipal business or profession, including product or service (see instructions)  Property Maintenance and Repair Services  9 9 9 0 0 0		
usiness name. If no separate business name, leave blank.  D Employer ID number (EIN) (see instr.)		
Property Maintenance Ninjas		
Ausiness address (including suite or room no.) 800 W Commercial Ave		
counting method: (1) Cash (2) Accrual (3) Other (specify)		
old you "materially participate" in the operation of this business during 2022? If "No," see instructions for limit on losses . 🗵 Yes 📗 No	CANA Cook Flour Analysis Workshoot	
you started or acquired this business during 2022, check here	SAM Cash Flow Analysis Worksheet	
"Yes," did you or will you file required Form(s) (1997)		
Income	No. of Maintain Ministra	
Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on form W-2 and the "Statutory employee" box on that form was checked	Name: Property Maintenance Ninjas	2022
telums and allowances		
subtract line 2 from line 1	4 Net Profit (Loss): LINE 31	ć 60.140.00
Cost of goods sold (from line 42)	4 Net Profit (Loss): LINE 31	\$ 69,140.00
Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	5. Deduction and a few field and anti-class and a few field an	4 (************************************
Forest Income. Add lines 5 and 6	5 Deduct nonrecurring income/add nonrecurring loss or expense: LINE 6	\$ (4,500.00)
devertising 8 18 Office expense (see instructions) . 18 50.		
car and truck expenses 19 Pension and profit-sharing plans . 19	6 Depletion: LINE 12	
see instructions) 9 7,260 . 20 Rent or lease (see instructions):		
commissions and fees . 10 a Vehicles, machinery, and equipment 20a b Other business property 20b	7 Depreciation: LINE 13	\$ 2,400.00
Depletion		
22 Supplies (not included in Part III) . 22	8 Non-Deductible Meals and Entertainment Exclusion: LINE 24b	(\$ 1,000.00)
noticuted in Part III) (see natructions)		
mployee benefit programs a Travel	9 Business Use of Home: LINE 30	
other than on line 19) . 14 b Deductible meals (see instructions)	, Same as a second seco	
instructions): 125 1,650.	10 Business Miles: Page 2, Part IV, LINE 44a OR Related 4562, Line 30 *Mile	
fortgage (paid to banks, etc.) 16a 3,800. 26 Wages (less employment credits) 26 6,000.	10 Danies Miles, rage 2, raitiv, that 440 Officiated 4502, thie 50	3
27a   27a	11a x Depreciation Rate 2023: \$0.28, 2022: \$0.26, 2021: \$0.26	
otal expenses before expenses for business use of home. Add lines 8 through 27a	11a x Depreciation Rate 2023: \$0.28, 2022: \$0.26, 2021: \$0.26	
entative profit or (loss). Subtract line 28 from line 7	and Table 19 and the	()
expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 inless using the simplified method. See instructions.	11b = Total Mileage Depreciation	
implified method filers only: Enter the total square footage of (a) your home:		
nd (b) the part of your home used for business: Use the Simplified	12 Amortization/Casualty Loss (only if noted): page 2, part V	
Aethod Worksheet in the instructions to figure the amount to enter on line 30		
If a profit, enter on both Schedule 1 (Form 1040), line 3, and on Schedule SE, line 2, (if you	CURTOTAL	¢ 66 040 00
thecked the box on line 1, see instructions.) Estates and trusts, enter on Form 1041, line 3. 31 69, 140.	SUBTOTAL	\$ 66,040.00
If a loss, you must go to line 32.  you have a loss, check the box that describes your investment in this activity. See instructions.		
If you checked 32a, enter the loss on both Schedule 1 (Form 1040), line 3, and on Schedule		
IE, line 2. (If you checked the box on line 1, see the line 31 instructions.) Estates and trusts, enter on 32a L All investment is at risk.		
form 1041, line 3.  If you checked 32b, you must attach Form 6198. Your loss may be limited.  32b Some investment is not at risk.		

Part III Cost of Goods Sold (see instructions)	Page 2		
1987 - 19	SAM Cash Flow Analysis Worksheet		
	43,000. Name: Property Maintenance Ninjas	2022	
42 Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4. 42 Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on 1 are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you reform 4562. When did you place your vehicle in service for business purposes? (month/day/year) 01/01/2019  43 When did you place your vehicle in service for business purposes? (month/day/year) 01/01/2019  44 Of the total number of miles you drove your vehicle during 2022, enter the number of miles you used your vehicle for:  a Business 12,000 b Commuting (see instructions) c Other	Net Profit (Loss): LINE 31     Deduct nonrecurring income/add nonrecurring loss or expense: LINE 6   Depletion: LINE 12     No	\$ 69,140.00 \$ (4,500.00) \$ 2,400.00 \$ 1,000.00 }	
Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30.  Dues	9 Business Use of Home: UNE 30		
Laundry	10 Business Miles: Page 2, Part IV, LINE 44a OR Related 4562, Line 30 *Miles	12,000	
Casualty Loss	11a x Depreciation Rate 2023: \$0.28, 2022: \$0.26, 2021: \$0.26	\$ 0.26	
	11b = Total Mileage Depreciation	\$ 3,120.00	
	12 Amortization/Casualty Loss (only if noted): page 2, part V	\$ 300.00	

# **Analyzing earnings trends**



mortgage guaranty insurance corporation

# Word bank:

higher averaged

lower disregarded

- 1. If the trend in the amount of income is stable or increasing, the income amount should be \_\_\_\_\_\_.
- 2. If the trend is declining but has since stabilized and there's no reason to believe the borrower will not continue to be employed at the current level, the \_\_\_\_\_ amount of income must be used.
- 3. If the trend is declining, the income may not be stable.

  Additional analysis must be conducted to determine if any income should be used, but in no instance may it be \_\_\_\_\_ over the period when the decline occurred.