Instructions for Declaring Self Employment Income

If you are self-employed, please refer to the categories below to determine what supporting documentation you need to supply in addition to filling out the Declaration of Self Employment Income Form on the following page. Seattle Department of Education & Early Learning (DEEL) does not intend to create barriers in accessing programs. Please contact DEEL if you have questions or need clarification.

Is your business a partnership?
- Fill out the *Self Employment Form (below)*
- Please also submit one (1) of the following:
    - Tax Form 1040, Schedule 1, Form 1065 and Schedule K-1 (submit all four forms)
    - Profit & Loss Statement for the last 3 months

Do you own the business or are you an independent contractor?
- Fill out the *Self Employment Form (below)*
- Please also submit one (1) of the following:
    - Tax Form 1040, Schedule 1, and Schedule C or EZ (submit all three forms)
    - Profit & Loss Statement for the last 3 months
    - If you are a driver or delivery person for an app-based company, submit monthly statements for the last 3 months of income

Is your business an LLC?
- Fill out the *Self Employment Form (below)*
- Please also submit one (1) of the following:
    - If owner: Tax Form 1040, Schedule 1, and Schedule C or EZ (submit all three forms)
    - If partner: Tax Form 1040, Schedule 1, Form 1065 and Schedule K-1 (submit all four forms)
    - If owner or partner: Profit & Loss Statement for the last 3 months

Do you work odd jobs or are you a cash laborer?
- Fill out the *Self Employment Form (below)* only

Are you a shareholder in a corporation?
- *No Self Employment Form* is needed
- Please submit the following:
    - Paystubs from earned income for the past 3 months, Tax form 1040, Schedule 1, Form 1120 (or S), and Schedule K- 1 (submit all four forms and paystubs)

Started your business less than 3 months ago?
- Fill out the *Self Employment Form (below)*
- Submit a projection what your income will be for the next 3 months

Self-Employment Form

Directions: Please indicate income for the past three months. For example: If you are applying in August, please tell us how much you made in gross income for May, June, July. If you started your business less than three months ago, please indicate projected income/deductions for the next three months.

Parent/Guardian Name:	
Name of Business:	
Business Address:	
Type of Business:	

Select which applies: I am...

☐ Owner ☐ Partner ☐ Cash Labor ☐ Other (specify):

Complete 3 Months	Total <u>Gross</u> Income Before Any Business Deductions	
Month:	A.	
Month:	B.	
Month:	C.	
Total Gross Amount	D.	
Business Deductions/Cost of Operations for reported <u>3 months</u>		**Amount**
1. Advertising		E.
2. Business Travel Expenses		F.
3. Business Insurance		G.
4. Legal and Professional Fees		H.
5. Office Supplies and Postage		I.
6. Rent (Business property only NOT home property)		J.
7. Utilities and Telephone (Business property only NOT home property)		K.
8. Cost of Goods		L.
9. Other (specify):		M.
Total Business Deductions (Add boxes E-M)		N.
Total Net Profit—Subtract box N (Business Deductions) from box D (Gross Income)		* $
Monthly income calculations will divide this amount by 3; Annual income calculations will multiply this amount by 4.		

Are your self-employment income and expenses for the last 3 months different from what they are normally? If yes, please explain:

Certification of Information and Permission to Verify Eligibility Information
- I certify that the information provided is true to the best of my knowledge.
- I am aware that the information I provided is subject to review and verification from City employees and that I may need to provide additional documents to support this application.
- I understand that if I receive assistance and have not truly disclosed all information that I will be terminated from the program.
- The City of Seattle may recover the actual cost(s) for the periods I was not eligible, and I may be prosecuted for fraud and/or perjury if I intentionally supplied inaccurate or misleading information.

Parent Signature:	
Date:	