| Taxpayer Statement | Taxable Housing Allowance Supplement to Schedules C and SE | | 20 |
|---|--|--|------------------------|
| Taxpayer Name | | | Social Security Number |
| | | | |
| | | | |
| Housing Allowance for service as minister | | | |
| less Housing Expense | | | |
| Taxes & Insurance | | | |
| Utilities | | | |
| House Repair & Improvements | | | |
| Furnishings & Repair | | | |
| l | | | |
| Unused Housing Allowance (taxable on schedule C) | | | |
| | | | |
| | | | |
| Housing Allowance for service as minister not taxed | | | |
| | | | |
| Profit from schedule C for ministry | | | |
| Loss from schedule C for ministry | | | |
| | | | |
| Total income subject to self-employment tax | | | |