

Instructions Page

Purpose

Servicers of conventional MPF Traditional loans must use this form when recommending a workout option for the Borrower.

Preparation

- **When** – The Servicer must complete the form when recommending a workout option for a Borrower.
- **Who** - This form must be completed by an employee of the Servicer who has responsibilities that would cause such individual to be knowledgeable of the facts and processes needed to complete this form and has authority to certify to the truthfulness and accuracy of the information on this form
- **How** – The attached form is provided as a job aid and should be used for informational purposes only. To complete this form Servicers must access it through eMAQCS® Plus.
- **Attachments** – The completed form must be accompanied by the following documentation:
 1. Workout Worksheet
 2. Insurer Approval Letter, if applicable
 3. Borrower Hardship Certification (Form SG402)
 4. Pay Stubs
 5. Bank Statements
 6. Tax Returns
 7. Credit Report
 8. 4506-T and Tax Transcripts from IRS* (*for Temporary Loan Payment Modifications only*)
 9. Any other documentation to support the Borrower's financial information
 10. Brokers Price Opinion/property valuation ("as is" value) (*for short sales and deeds-in-lieu of foreclosure only*)
 11. Contract of Sale (*for short sales only*)
 12. Payoff Statement (*for short sales only*)
 13. Listing Agreement (*for short sales only*)
 14. Title Search/Report (*for deeds-in-lieu of foreclosure only*)

* Effective February 1, 2021, PFIs must ensure a properly completed IRS Form 4506-C, instead of a Form 4506-T, is in every mortgage loan file delivered into the program. (See Exhibit T-X for an example of a completed 4506-C).

Submission

- **When** – The Servicer must submit the completed form when all supporting documentation is obtained.
- **How** – The official form must be completed and any supporting documentation must be submitted through eMAQCS Plus at <https://eMAQCS.covius.com>.
- **To Whom** – The completed form and supporting documentation must be submitted to the MPF Provider. The Servicer should retain a copy of the completed form and supporting documentation for their own records.

Assistance

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Please email the MPF Provider at MPFdefaultservicing@fhlbc.com for any questions or assistance needed in completing the form.

Helpful Hints

- Servicers are required to provide express consent from the taxpayers as permitted by applicable law, this includes the Taxpayer First Act.
- Any form that is incomplete or not submitted with all supporting documentation will be promptly returned to the Servicer.
- Under Sale Offer, the accrued interest is through the projected closing date. The Servicer must provide the date interest is figured through.
- For temporary loan modifications, the eligibility requirements in MPF Traditional Servicing Guide Chapter 9 must be met.
- For COVID-19 payment deferral plans, Servicers must complete a COVID-19 Payment Deferral Plan Worksheet and must be uploaded as an attachment to this form.

Workout Worksheet (Form SG354)



PFI/Servicer Information

PFI Number: _____ Servicer Name: _____

Loan Information

MPF Loan Number: _____ Borrower Name: _____

Property Address: _____

Loan Status: Current Delinquent In Foreclosure

If loan is in Foreclosure, provide the Foreclosure sale date (if one has been scheduled): _____

Occupancy Status: Owner Occupied Tenant Vacant/Abandoned

PMI Company: _____

Unpaid Principal Balance: _____ Last Payment Received: _____

Product Information

This form is for the MPF Traditional product only.

Borrower Hardship

Date Servicer Received Request Package from Borrower: _____

Workout Option Requested (select one):

- Forbearance Plan Repayment Plan
 Temporary Loan Payment Modification Short Sale Deed-in-Lieu COVID-19 Payment Deferral Plan

Hardship Reason (select one):

<input type="checkbox"/> Death of Borrower/Family Member	<input type="checkbox"/> Incarcerated	<input type="checkbox"/> Catastrophe/Natural Disaster
<input type="checkbox"/> Illness of Borrower/Family Member	<input type="checkbox"/> Relocation (personal or job related)	<input type="checkbox"/> Environmental Hazard
<input type="checkbox"/> Permanent Disability	<input type="checkbox"/> Business Failure	<input type="checkbox"/> Other _____
<input type="checkbox"/> Unemployment	<input type="checkbox"/> Excessive Credit Obligation	
<input type="checkbox"/> Permanent Reduced Income	<input type="checkbox"/> Domestic Difficulties	
<input type="checkbox"/> Temporary Reduced Income	<input type="checkbox"/> Property Devaluation	

Has Borrower filed for bankruptcy? Yes No

- If "yes", which one? Chapter 7 Chapter 13 Other: _____

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- Bankruptcy status: Active Dismissed (Date: _____) Discharged (Date: _____)
- Has loan been reaffirmed?: Yes No
- If applicable, has bankruptcy trustee agreed to the terms? Yes No

Review of Borrower's Financial Information

Monthly Household Income

Income Type	Amount
Gross Wages	\$
Tips/Commission/Bonus/Overtime Income	\$
Self-Employment Income	\$
Rental Income	\$
Taxable Income from Social Security, Annuities, or Retirement Plan	\$
Child Support/Alimony (This income is not required to be provided if Borrower chooses not have it considered.)	\$
Other Income: _____	\$
Total Monthly Income	\$

Monthly Household Expenses and Debts

Expense Type	Amount
First Mortgage PITIA*	\$
Second Mortgage PITIA, if applicable	\$
Installment Loans/Credit Card Payments (total minimum payment per month)	\$
Child Support/Alimony Payments (This liability is not required to be provided if Borrower chooses not to have it considered.)	\$
Car Lease Payments	\$
Mortgage PITIA for Other Properties Owned	\$
Other Expenses/Debts: _____	\$
Total Monthly Household Expenses and Debts	\$

Total debt-to-income ratio: _____%

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*Any escrow shortage currently included as part of the full monthly contractual payment should also be included as part of a borrower's pre-modification monthly housing expense when calculating the housing expense-to-income ratio.

Household Assets

Asset Type	Amount
Checking Account(s)	\$ _____ \$ _____
Savings/Money Market Account	\$ _____
CD(s)	\$ _____
Stocks/Bonds	\$ _____
Other Cash on Hand	\$ _____
Estimated Value of Other Real Estate Owned	\$ _____
Other Assets: _____	\$ _____
Total Assets	\$ _____

Market Value – Short Sale and Deed-in-Lieu of Foreclosure Only

For short sale and deed-in-lieu of foreclosure requests, complete the following information:

Broker's Price Opinion (BPO) \$ _____

Date of BPO: _____

Original Appraised Value: \$ _____

Date of Appraisal: _____

Property Listing

Property Listed: Yes No How Long Has Property Been Listed: _____

Sales Offer – Short Sale

For short sale requests only, complete the following information:

Date of Offer: _____

Amount of Offer: \$ _____

Date Offer Expires: _____

Projected Closing Date: _____

Unpaid Principal Balance	+ _____
Accrued Interest	+ _____
As of Date: _____	
Total Closing Costs	+ _____

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• Commission: \$ _____ and _____ %	
• Discount Points: _____	
• Other Costs: _____	
Expenses Advanced by Servicer	+
Subtotal	= _____
Borrower Contribution	- _____
Net Proceeds (Sale) as listed on Closing Disclosure	- _____
Estimated MI Claim Amount	- _____
Estimated Loss	= _____

Servicer's Comments and Recommendations

The Servicer makes the following workout recommendation: _____

Recommended Workout Terms (e.g. monthly payment amount, length of plan, borrower contribution amount):

Additional comments: _____

Attachments/Supporting Documentation

Are supporting documents attached? Yes No

List any supporting documents and/or any missing documents and provide an explanation for any missing documents:

Employee Information

By submitting this form, I certify that the information contained herein is true and accurate.

Printed Name of Employee Submitting Form: _____

Title: _____

Email: _____

Phone Number: _____

Date Completed: _____