



CYGNET TAX

Small Business & Self Employed

2017

Business Information

Name: _____

Business Name: _____

Business Address: _____

Employer Identification Number: _____

Income

Gross Receipts or Sales: \$ _____

Beginning Inventory: \$ _____

Purchases: \$ _____

Ending Inventory: \$ _____

Other Income (1099's):
_____ \$ _____
_____ \$ _____

CYGNET TAX

Worksheet for Schedule
C of Form 1040

251 Pawtuxet Avenue
Warwick, RI 02888

Email
Info@CygnetTax.Com

Phone: 401-942-1040

CYGNET TAX

WORKSHEET FOR SCHEDULE C OF FORM 1040

Expenses

Advertising: \$ _____
 Bank Service Charges: \$ _____

Car and Truck Expenses:
 Total Miles (1/1-12/31): _____
 Total Business Miles: _____
 Parking Fees & Tolls: \$ _____
 Fuel: \$ _____
 Maintenance: \$ _____

Commissions and Fees: \$ _____
 Education: \$ _____

Insurance:
 Automobile: \$ _____
 Liability: \$ _____
 Other: \$ _____

Interest: \$ _____
 Legal and Professional Fees: \$ _____
 Office Expense: \$ _____
 Rent or Lease: \$ _____
 Repairs and Maintenance: \$ _____
 Supplies: \$ _____
 Taxes and Licenses: \$ _____
 Travel: \$ _____
 Meals and Entertainment: \$ _____

Utilities:
 Gas: \$ _____
 Electric: \$ _____
 Telephone: \$ _____
 Water: \$ _____
 Internet Fees: \$ _____

Other:
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____

		Equipment Purchased and Sold	
Date	Type	Amount	
_____	_____	\$ _____	P/S
_____	_____	\$ _____	P/S
_____	_____	\$ _____	P/S
_____	_____	\$ _____	P/S
_____	_____	\$ _____	P/S