

At a minimum, estimate monthly income and expenses for your business's first 90 days of operation.

Schedule C: Business Operating Costs (First 90 Days)					
<i>Estimated business income</i>	<i>Month 1</i>	<i>Month 2</i>	<i>Month 3</i>	<i>Total</i>	<i>Notes</i>
Total Income	\$	\$	\$	\$	
<i>Monthly expenses</i>	<i>Month 1</i>	<i>Month 2</i>	<i>Month 3</i>	<i>Total</i>	<i>Notes</i>
Advertising	\$	\$	\$	\$	
Bank service charges	\$	\$	\$	\$	
Business insurance	\$	\$	\$	\$	Exclude the amount from Schedules A or B
Credit card fees	\$	\$	\$	\$	
Delivery charges	\$	\$	\$	\$	
Dues and subscriptions	\$	\$	\$	\$	
Health insurance	\$	\$	\$	\$	Exclude the amount from Schedules A or B
Inventory	\$	\$	\$	\$	
Lease payments	\$	\$	\$	\$	Exclude the amount from Schedules A or B
Loan payments	\$	\$	\$	\$	Principal and interest payments
Miscellaneous	\$	\$	\$	\$	
Office expenses	\$	\$	\$	\$	
Payroll other than manager	\$	\$	\$	\$	
Payroll taxes	\$	\$	\$	\$	
Professional fees	\$	\$	\$	\$	
Rent	\$	\$	\$	\$	Exclude the amount from Schedules A or B
Repairs and maintenance	\$	\$	\$	\$	
Salary of owner or manager	\$	\$	\$	\$	Only if applicable first 90 days
Sales tax	\$	\$	\$	\$	
Supplies	\$	\$	\$	\$	
Telephone	\$	\$	\$	\$	
Utilities	\$	\$	\$	\$	
Other	\$	\$	\$	\$	
Total Expenses	\$	\$	\$	\$	
Net Cash Remaining (Needed)	\$	\$	\$	\$	Total Schedule C