New Orleans, Louisiana **General Dentistry** Merger Purchase FINANCIAL DATA SUMMARY FOR PRACTICE 9542 The following statistics are based on assumptions that the subject practice will continue to be operated as it has been in the past. Variation from past performance are 1) increase in fees for each year; 2) no production increase occurs; and 3) overhead expenses increase each year. Fee and overhead increases are based on estimates of inflation and can be adjusted. The purpose of this summary is to demonstrate the individual practice revenues and profitability of this particular practice. PRACTICE FINANCIAL SUMMARY AMOUNT OF INCOME PERSONALLY GENERATED BY PURCHASER \$589.981 PURCHASER COMPENSATION AT 35% FOR PRODUCTION. \$206,493 NOW CONSIDER THE PRACTICE PROFIT. THIS IS AN AMOUNT OVER AND ABOVE PURCHASER'S PRODUCTION COMPENSATION. THE PROFIT IS A BENEFIT OF OWNERSHIP OF THE PRACTICE. ONLY PRACTICE OWNERS REALIZE THIS PRACTICE PROFIT. IN THIS PRACTICE, THE PROFIT, AFTER ALL EXPENSES AND PURCHASER SALARY COMPENSATION HAVE BEEN PAID IS \$170,209 THE PROFIT - NOT INCLUDING PURCHASER SALARY, DIVIDED BY THE TOTAL LOAN FOR THE PRACTICE PRICE AND WORKING CAPITAL, RESULTS IN A RATE OF TO COMPARE THIS OPPORTUNITY TO OTHER OPPORTUNITIES, WHETHER THEY ARE ASSOCIATESHIPS OR OTHER PRACTICES TO PURCHASE, LOOK AT SEVERAL KEY DATA POINTS. SUBJECT PRACTICE 1. HOW DOES THE ALTERNATIVE COMPARE WITH AFTER DEBT SERVICE AND BEFORE TAX NET INCOME \$281,116 WHAT ARE EXPECTED TAX SAVINGS AND EQUITY INCREASES FOR THE PURCHASER \$85,013 4. TOTAL ECONOMIC BENEFIT - NET CASH FLOW (AFTER DEBT SERVICE), EQUITY, AND TAX SAVINGS \$366,128

New Orleans, Louisiana General Dentistry Merger Purchase FINANCIAL DATA FOR PRACTICE Merger Purchase The following summary illustrates a projected year's income and expenses for the subject practice which incorporates an increase in fees and overhead expense but no increase in production. This summary is not a representation or warranty of future practice performance. Purchasers should obtain qualified legal and accounting counsel prior to any purchase decisions. NOTE: Practice price does not include accounts receivable. PRACTICE INCOME % EXPECTED GROSS COLLECTIONS \$941,349 100.0% HYGIENE COMPONENT \$351,368 37.3% DENTIST COMPONENT \$589.981 62.7% RETAINED SELLER ASSOCIATE PURCHASER \$589 981 62 7% VARIABLE EXPENSES % WAGES, PAYROLL TAX, ETC. \$310,935 33.0% LABORATORY \$27,915 3.0% CLINICAL SUPPLIES \$112,881 12.0% OTHER VARIABLE EXPENSE \$45,035 4.8% TOTAL VARIABLE EXPENSE \$496,767 52.8% % FIXED EXPENSES \$ PHONE, UTILITIES \$3,000 0.3% LEGAL & ACCOUNTING \$3,500 0.4% INSURANCE \$1,500 0.2% OTHER FIXED EXPENSE \$59,880 6.4% **TOTAL FIXED EXPENSE** \$67,880 7.2% PRACTICE DEBT SERVICE 3.7% INTEREST \$34.834 PRINCIPAL \$60,752 6.5% TOTAL DEBT SERVICE \$95,586 10.2% SUMMARY \$ % 100.0% EXPECTED COLLECTIONS \$941.349 EXPECTED EXPENSES \$564,647 60.0% PRACTICE DEBT SERVICE \$95,586 10.2% EXPCTD NET INCOME AFTER EXPENSES AND DEBT & PERCENT OF PERSONAL PROD. \$281,116 48% THIS CASH FLOW EXAMPLE IS BASED ON THE FOLLOWING ASSUMPTIONS: \$ % PRACTICE SALES PRICE & PERCENT OF GROSS \$705,000 77% WORKING CAPITAL \$46,000 TOTAL PRACTICE LOAN \$751,000 PRACTICE LOAN INTEREST RATE 5.00% PRACTICE LOAN TERM (MONTHS) 120 MONTHLY PRACTICE PAYMENT \$7,966 10% MONTHLY PRACTICE PAYMENTS \$7,966 10% ESTIMATED MONTHLY HYGIENE AND ASSOCIATE PROFIT \$19.512 25% PURCHASER SALARY BASED ON 35% OF PERSONAL PRODUCTION \$206,493 PRACTICE PROFIT - IN ADDITION TO PURCHASER SALARY \$170,209 23% PURCHASER TAX SAVINGS AND 1ST YEAR EQUITY INCREASE \$85,013 LESS PRACTICE DEBT SERVICE SALARY + PROFIT +TAX SAVINGS + EQUITY - DEBT SERVICE / % OF PERSONAL PRODUCTION \$366,128 62%

New Orleans, Louisiana	General Dentistry					
DATA FOR PRACTICE NUMBER	Merger Purchase					
The following data is provided by the owner of the practice. It is be	——————————————————————————————————————					
to be a true and accurate representation of the facts of the practice. It is the responsibility of any purchaser to						
verify all information contained herein and to seek qualified counsel in the interpretation and verification thereof.						
OFFICE DATA						
SQUARE FOOTAGE OF OFFICE	1,850					
EXPANDABLE FOOTAGE						
TOTAL MO. RENT EXP.						
PRICE PER SQUARE FOOT						
IS OFFICE HANDICAPPED ACCESSIBLE?						
NUMBER OF PARKING SPACES						
PROXIMITY OF PARKING PLACES						
# EQUIPPED OPS						
NUMBER OF PLUMBED BUT UNEQUIPPED OPERATORIES						
NUMBER OF OPERATORIES USED PRIMARILY BY DENTIST(S)						
NUMBER OF OPERATORIES USED PRIMARILY BY HYGIENIST(S)						
NUMBER OF UNPLUMBED AND EMPTY OPERATORIES						
DO YOU OWN YOUR BUILDING? YES OR NO	YES					
DO YOU WISH TO SELL THE BUILDING? YES OR NO	NO I					
IENOTADDDAIGED FOTHATED DAIL DISCUSSION						
IF NOT APPRAISED, ESTIMATED BUILDING PRICE						
IF NOT SOLD, MONTHLY RENTAL AMOUNT						
ANNUAL REAL ESTATE TAXES						
ANNUAL REAL ESTATE INSURANCE COST DATE OF LEASE i.e. "6/1/2016"	\$5,826					
DATE LEASE ENDS - i.e. "1/1/2020"						
IS THERE AN OPTION TO PURCHASE? RENEWAL OPTIONS						
BUILDING VALUE TO BE USED						
PURCHASER MORTGAGE INTEREST RATE						
PURCHASER MORTGAGE TERM - YEARS						
PURCHASER MONTHLY PAYMENT						
PURCHASER CURRENT MONTHLY RENT						
PRICE PER SQUARE FOOT	\$25.30					
WORK SCHEDULE						
PLANS AFTER SALE OF PRACTICE	Continue working					
DAYS/WEEK CURRENTLY WORKED	4.0					
HOW MANY DAYS WOULD YOU PREFER TO WORK FOR BUYER						
DESIRED WORK DAYS/WEEK 1ST YR						
DESIRED WORK DAYS/WEEK 2ND YR						
DESIRED WORK DAYS/WEEK 3RD YR						
DESIRED WORK DAYS/WEEK 4TH YR						
DESIRED WORK DAYS/WEEK 5TH YR						
DESIRED WORK DAYS/WEEK 6TH YR						

PRACTICE DATA				
MANAGEMENT CONSULTANT IN LAST 5 YRS? IF SO WHO?	No			
RESULTS				
DESCRIBE INTERNAL MARKETING	/ord of Mouth; \$20 Referral Credit			
DESCRIBE EXTERNAL MARKETING	Website, Doctible Review Service, DexYP, Postcard Mania, Google, Facebook Ads			
HAS GROSS CHANGED SIGNIFICANTLY? WHY?	No			
LIST SEDATIONS USED - NITROUS, DOCS, IV SEDATION	Nitrous Oxide			
IS YOUR PRACTICE MERCURY FREE - NO AMALGAM?	No			
WHAT TYPE RECALL SYSTEM	SolutionReach			
WHAT TYPE COMPUTER SYSTEM	PracticeWorks			
PURCHASER MUST PERSONALLY VERIFY PATIENT POPULATION DA	TA & REDUCED FEE PLANS			
ESTIMATE NUMBER OF DIFFERENT PATIENTS IN LAST 18 MONTHS	692			
AVERAGE NUMBER OF NEW PATIENTS PER MONTH	18			
AVERAGE NUMBER PATIENTS TREATED PER DAY BY DENTIST(S)	6			
AVERAGE NUMBER PATIENTS TREATED PER DAY BY HYGIENISTS	8			
HOW FAR AHEAD IS DENTIST SCHEDULED?	1 1/2 Weeks			
HOW FAR AHEAD IS HYGIENIST SCHEDULED?	2 1/2 Weeks			
PRACTICE DATA				
% INCOME FROM CASH	49%			
% OF PATIENTS PAYING CASH	51%			
% INCOME FROM FEE FOR SERVICE INSURANCE	51%			
% OF PATIENTS WITH FEE FOR SERVICE INSURANCE	49%			
0/ INCOME FROM DISCOUNT FEE INCURANCE				
% INCOME FROM DISCOUNT FEE INSURANCE % OF PATIENTS WITH DISCOUNT FEE INSURANCE				
% PRACTICE INCOME FROM MEDICAID				
% OF PATIENTS WITH MEDICAID				
% PRACTICE INCOME FROM REDUCED FEE PLANS				
% OF PATIENTS WITH REDUCED FEE PLANS				
SCHEDULING DATA				
MONDAY	8:00 AM - 5:00 PM (No patients)			
TUESDAY	8:00 AM - 5:00 PM			
WEDNESDAY	8:00 AM - 5:00 PM			
THURSDAY	8:00 AM - 5:00 PM			
FRIDAY	8:00 AM - 5:00 PM			
SATURDAY	Closed			
DAYS WORKED PER WEEK	4			
OWNER HOURS WORKED PER WEEK	32			
ASSOCIATE HOURS WORKED PER WEEK	24			
HYGIENIST HOURS WORKED PER WEEK	32			
DENTIST PATIENT VISITS PER YEAR	983			
HYGIENE PATIENT VISITS PER YEAR	578			
NUMBER OF DAYS WORKED PER YEAR	192			
NUMBER OF WEEKS WORKED PER YEAR	48			
COLLECTION DATA				
AOTHAL ACCOUNTS DECEMABLE DAY ANSE	99%			
ACTUAL ACCOUNTS RECEIVABLE BALANCE	\$81,180			
WHAT IS YOUR PATIENT CREDIT BALANCE	\$58,893			
ACCOUNTS RECEIVABLES - CURRENT	\$16,491			
ACCOUNTS RECEIVABLES - 31-60 DAYS	\$7,908			
ACCOUNTS RECEIVABLE - 61-90 DAYS ACCOUNTS RECEIVABLE >90 DAYS	\$15,999 \$40,782			
ACCOUNTS RECEIVABLE 250 DATS	ντυ,1 ΟΣ			

WHAT PERCENTAGE OF THE PRACTICE INCOME IS:					
HYGIENIST PRODUCTION	35%				
OPERATIVE	21%				
PEDODONTICS					
ORTHODONTICS					
IMPLANTS	2%				
REMOVABLE PROSTHETICS	3%				
FIXED PROSTHETICS					
ENDODONTICS					
PERIODONTICS					
ORAL SURGERY					
COSMETIC					
TMJ TREATMENT DIAGNOSTIC					
OTHER					
TOTAL					
WHAT SERVICES ARE REFERRED OUT?	Complicated Endo, Perio, OS and Ortho				
REVENUES SOURCES					
IS ANY OF YOUR REPORTED INCOME FROM ANY OTHER					
SOURCE THAN PATIENT TREATMENT FROM THIS PRACTICE?	No				
IF SO HOW MUCH IN CURRENT PERIOD?					
IF SO , HOW MUCH FOR LAST YEAR?					
IF SO HOW MUCH FOR THE PREVIOUS YEAR?					
WHAT IS THE SOURCE OF THIS OTHER INCOME?					
FEE SCHEDULE					
ADULT PROPHY 01110	\$113				
TWO SURFACE ANTERIOR COMPOSITE 02331	\$245				
CORE BUILD-UP 02950	\$324				
CROWN - GOLD/PORCELAIN 02750	\$1,426				
ANTERIOR CANAL ROOT CANAL 03310	\$969				
PANORAMIC X-RAY 00330	\$137				
TWO SURFACE POSTERIOR COMPOSITE 02392	\$279				
CROWN - PORCELAIN CERAMIC 02740	\$1,461				
LABIAL PORCELAIN VENEER 02962	\$1,532				
BICUSPID ROOT CANAL 03320	\$1,093				
AVERAGE OF FEES	\$758				
PERCENT OF FEE PARITY	77%				
DEMOGRAPHIC DATA					
WHAT IS APPROX. POPULATION OF YOUR CITY OR TOWN	357,767				
WHAT IS APPROX. POPULATION OF YOUR DRAWING AREA	1,285,000				
APPROXIMATE NUMBER OF GENERAL DENTAL PRACTICES					
WITHIN					
MAJOR EMPLOYERS IN AREA	Touro Hospital				
III. CO. L.III. EO LEIO III MELI	100001100001001				
DESCRIBE ANY MAJOR ECONOMIC CHANGES IN DRAWING AREA					
SESSIONE FIRST INFRIENCE EGONOMIC CHARGES IN DIANVING AICEN					
YEAR BEGINNING PRACTICE IN CITY					
YEAR BEGINNING PRACTICE IN CURRENT LOCATION					
RIGHT OR LEFT HANDED					
PURCHASE OR SCRATCH START	Purchase				

STAFF DATA						
POSITION	YEAR HIRED	STAY	BENEFITS	ANNUAL SALARY	HOURLY SALARY	ANNUAL COST OF BENEFITS
FRONT OFFICE	2000	Yes		\$41,090		
PATIENT COORDINATOR	2020	?		\$34,925		
FRONT OFFICE						
FRONT OFFICE						
FRONT OFFICE						
ASSISTANT	2025	Yes		\$28,288		
ASSISTANT	2025	Yes		\$36,608		
ASSISTANT						
ASSISTANT						
ASSISTANT						
HYGIENIST	2002	Yes		\$103,470		
HYGIENIST						
HYGIENIST						
HYGIENIST						
LAB TECHNICIAN						
LAB TECHNICIAN						
ASSOCIATE						
ASSOCIATE						
ASSOCIATE						
WHAT BENEFITS DO YOU	PROVIDE FO	R THE S	TAFF?			
				vs. AFLAC Accid	ental & Vision is	offered (Paid 100%)
COST OF BENEFITS PROV) -, -		(
DOOL OF BEILEFIED FROM						
DO YOU HIRE ANY UNPAIL	FAMILY ME	MBERS?)	No		
WHAT POSITION DO THEY	WHAT POSITION DO THEY HOLD?					
WHAT IS FAIR MARKET WAGE FOR THEIR JOB?						
ARE THERE ANY EMPLOY	EES WHO AF	E PAID	MORE OR LESS			
			THEIR POSITION?			
WHAT POSITIONS AN				1		
	CC	MPENS	ATION FOR EACH			
COLLECTION CENTERS	1					
				2024	2023	2022
		GRO	SS COLLECTIONS	\$944,531	\$988,731	\$925,976
	OWNER COLLECTIONS			\$430,064	\$362,897	\$574,105
HYGIENIST COLLECTIONS			\$346,520	\$355,726	\$351,871	
ASSOCIATE COLLECTIONS			\$167,947	\$270,108		
ASSOCIATE COLLECTIONS						
ASSOCIATE COLLECTIONS						
ASSOCIATE COLLECTIONS						
ASSOCIATE - SALARY IN DOLLARS / COMMISSION PERCENT			\$252/day plus Com			
HYGIENIST - SALARY IN DOLLARS / COMMISSION PERCENT					0%	

CONFORMITY DATA	1					
DOES YOUR PRACTICE MEET OSHA STANDARDS? WHY NOT?	Yes					
DOES YOUR PRACTICE MEET HIPAA STANDARDS? WHY NOT?	Yes					
ANY DISCIPLINARY ACTION IN LAST 7 YRS? EXPLAIN	No					
	!					
ANY PRACTICE LAWSUITS FILED IN PAST TEN YRS. EXPLAIN	Yes but case was overt	urned. Patient was	s "doctor-shopping" and I was			
the 3rd or 4th dentist involved.			11 3			
DESCRIBE ANY HEALTH PROBLEMS WHICH WOULD AFFECT	Yes; Worsening eye pro	oblems				
YOUR PRACTICE OF DENTISTRY?	r co, rr crociming cyc pri					
INSURANCE EXPLANATION						
TOTAL EXPENSE FOR INSURANCE IN CURRENT PERIOD	Inc. 4. 774					
	\$24,771					
HOW MUCH OF TOTAL IS FOR OWNER HEALTH INSURANCE?	0.00					
HOW MUCH OF TOTAL IS FOR STAFF HEALTH INSURANCE?	\$1,666	51,666				
HOW MUCH OF TOTAL IS FOR OTHER OWNER BENEFITS?						
HOW MUCH OF TOTAL IS FOR MALPRACTICE INSURANCE?	. ,	· · ·				
HOW MUCH FOR TOTAL IS FOR BUILDING INSURANCE?	\$5,901	\$5,901				
TAXES AND LICENSES EXPLANATION						
TOTAL EXPENSE FOR TAXES	\$144,261					
HOW MUCH OF TOTAL IS FOR PAYROLL TAXES?						
HOW MUCH OF TOTAL IS FOR STAFF PAYROLL TAX?	\$81,450					
HOW MUCH OF TOTAL IS FOR OWNER PAYROLL TAX?	\$44,948					
HOW MUCH OF TOTAL IS AD VALOREM (PRACTICE EQUIP)?						
HOW MUCH OF TOTAL IS FOR REAL ESTATE TAXES?	\$11,598					
PENSION EXPLANATION AND 401k COMBINED						
TOTAL EXPENSES FOR PENSION PLAN	\$79,271					
HOW MUCH OF TOTAL IS FOR STAFF						
HOW MUCH OF TOTAL IS FOR OWNER?	\$23,581					
BENEFITS EXPLANATION	1					
TOTAL EXPENSE FOR EMPLOYEE BENEFITS						
HOW MUCH OF TOTAL IS FOR STAFF?						
HOW MUCH OF TOTAL IS FOR OWNER?						
TEN HIGHEST INCOME SC	% OF PRX INCOME	% OF YOUR FEE				
PLAN NAME - BE SURE TO LIST DELTA PREMIERE IF YOU HAVE		THIS PLAN PAYS				
AlwaysCare/Unum (29 Patients use Unum)	1%	85%				
, and jobalo, chain (201 aliono acc chain)	. 70	3370				
	1%					

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