

Suburban Charlotte NC General Dentistry
FINANCIAL DATA SUMMARY FOR PRACTICE 9477

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	\$348,987
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COMPENSATION FOR PURCHASER FOR HIS/HER PRODUCTION. CONSIDER A GENEROUS COMMISSION RATE OF 35%	\$122,146
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NOW CONSIDER THE PRACTICE PROFIT. THIS IS AN AMOUNT OVER AND ABOVE THE COMPENSATION FOR PURCHASER'S PRODUCTION.

THE PROFIT IS THE BENEFIT OF OWNERSHIP OF THE PRACTICE.
ONLY PRACTICE OWNERS REALIZE PRACTICE PROFIT.

IN THIS PRACTICE, THE PROFIT, AFTER ALL EXPENSES AND SALARY COMPENSATION TO THE PURCHASER IS PAID AMOUNTS TO	\$124,764
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THE PROFIT - NOT INCLUDING PURCHASER SALARY, DIVIDED BY THE TOTAL LOAN FOR THE PRACTICE PRICE AND WORKING CAPITAL, REPRESENTS THE RATE OF	17%
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TO COMPARE THIS OPPORTUNITY TO OTHER OPPORTUNITIES, WHETHER THEY ARE ASSOCIATESHIPS OR OTHER PRACTICES TO PURCHASE, LOOK AT SEVERAL KEY DATA POINTS.

	SUBJECT PRACTICE
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1. HOW DOES THE ALTERNATIVE COMPARE WITH BEFORE TAX DOLLARS (AFTER DEBT SERVICE)	\$124,764
2. WHAT IS PERCENT OF PERSONAL PRODUCTION OF PRACTICE NET INCOME	36%
3. ARE THERE TAX SAVINGS AND EQUITY INCREASES FOR THE PURCHASER	\$57,971
4. TOTAL ECONOMIC BENEFIT - NET CASH FLOW (AFTER DEBT SERVICE), EQUITY, AND TAX SAVINGS	\$182,735
5. WHAT IS PERCENT OF TOTAL ECONOMIC BENEFIT VERSUS PURCHASER PERSONAL PRODUCTION	52%

Suburban Charlotte NC General Dentistry

FINANCIAL DATA FOR PRACTICE 9477

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				\$581,646	100.0%
HYGIENE COMPONENT				\$232,658	40.0%
DENTIST COMPONENT				\$348,987	60.0%
RETAINED SELLER					
ASSOCIATE					
PURCHASER				\$348,987	60.0%
VARIABLE EXPENSES					
WAGES, PAYROLL TAX, ETC.				\$166,127	28.6%
LABORATORY				\$924	0.2%
CLINICAL SUPPLIES				\$82,284	14.1%
OTHER VARIABLE EXPENSE				\$21,912	3.8%
TOTAL VARIABLE EXPENSE				\$271,247	46.6%
FIXED EXPENSES					
RENT				\$79,653	13.7%
PHONE, UTILITIES				\$2,614	0.4%
LEGAL & ACCOUNTING				\$6,695	1.2%
INSURANCE				\$7,725	1.3%
OTHER FIXED EXPENSE				\$37,704	6.5%
TOTAL FIXED EXPENSE				\$134,390	23.1%
PRACTICE DEBT SERVICE					
INTEREST				\$13,084	2.2%
PRINCIPAL				\$38,160	6.6%
TOTAL DEBT SERVICE				\$51,244	8.8%
SUMMARY					
EXPECTED COLLECTIONS				\$581,646	100.0%
EXPECTED EXPENSES				\$405,638	69.7%
PRACTICE DEBT SERVICE				\$51,244	8.8%
EXPCTD NET INCOME AFTER EXPENSES AND DEBT & PERCENT OF PERSONAL PROD.				\$124,764	36%
PURCHASER PRODUCED PRODUCTION				\$348,987	60.0%
EQUITY INCREASE & PERCENT OF PERSONAL PRODUCTION				\$38,160	10.9%
TAX SAVINGS FROM DEPRECIATION & PERCENT OF PERSONAL PRODUCTION				\$19,811	5.7%
TOTAL ECONOMIC BENEFIT-CASH, TAX SAVINGS, EQUITY & % PERSONAL PROD.				\$182,735	52%
THIS CASH FLOW EXAMPLE IS BASED ON THE FOLLOWING ASSUMPTIONS:					
PRACTICE SALES PRICE & PERCENT OF GROSS				\$409,000	72%
WORKING CAPITAL				\$28,000	
TOTAL PRACTICE LOAN				\$437,000	
PRACTICE LOAN INTEREST RATE				3.25%	
PRACTICE LOAN TERM (MONTHS)				120	
MONTHLY PRACTICE PAYMENT				\$4,270	9%
PURCHASER CASH FLOW CONSIDERATIONS					
MONTHLY PRACTICE PAYMENTS				\$4,270	9%
ESTIMATED MONTHLY HYGIENE AND ASSOCIATE PROFIT				\$12,360	25%
PURCHASER SALARY BASED ON 35% OF PERSONAL PRODUCTION				\$122,146	
PRACTICE PROFIT - IN ADDITION TO PURCHASER SALARY				\$73,673	17%
TOTAL PURCHASER SALARY AND PRACTICE PROFIT				\$195,819	
LESS PRACTICE DEBT SERVICE				(\$51,244)	
PURCHASER SALARY, PROFIT AND TAX SAVINGS AFTER DEBT SERVICE				\$144,575	

Suburban Charlotte NC	
DATA FOR PRACTICE NUMBER	9477
The following data is provided by the owner of the practice. It is believed to the best of the owner's knowledge 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	3,217
EXPANDABLE FOOTAGE	
CURRENT MONTHLY RENTAL i.e. "1200"	\$6,638
PRICE PER SQUARE FOOT	\$24.76
IS OFFICE HANDICAPPED ACCESSIBLE?	Yes
NUMBER OF PARKING SPACES	Many; 4 Story Office Building
PROXIMITY OF PARKING PLACES	Next to parking
# EQUIPPED OPS	5
NUMBER OF PLUMBED BUT UNEQUIPPED OPERATORIES	1
NUMBER OF OPERATORIES USED PRIMARILY BY DENTIST(S)	2
NUMBER OF OPERATORIES USED PRIMARILY BY HYGIENIST(S)	3
NUMBER OF UNPLUMBED AND EMPTY OPERATORIES	
DO YOU OWN YOUR BUILDING? YES OR NO	NO
DO YOU WISH TO SELL THE BUILDING? YES OR NO	NO
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"	May 31, 2019
DATE LEASE ENDS - i.e. "1/1/2020"	January 31, 2027
IS THERE AN OPTION TO PURCHASE?	
RENEWAL OPTIONS	None
BUILDING VALUE TO BE USED	
PURCHASER MORTGAGE INTEREST RATE	3.75%
PURCHASER MORTGAGE TERM - YEARS	20
PURCHASER MONTHLY PAYMENT	
PURCHASER CURRENT MONTHLY RENT	
PRICE PER SQUARE FOOT	
WORK SCHEDULE	
PLANS AFTER SALE OF PRACTICE	Practice in Charlotte
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	
COVID INFORMATION	
DATE CLOSED FOR COVID	March 18, 2020
DATE REOPENED FOR COVID	May 11, 2020
DATE OF LATEST PRACTICE REVENUE	December 31, 2020
AMOUNT OF LATEST PRACTICE REVENUES	\$487,700
ANNUALIZED 2020 COLLECTIONS ADJUSTED FOR TIME CLOSED	\$572,381
AMOUNT OF ANY OUTSTANDING PPP OR EIDL LOANS	

PRACTICE DATA	
MANAGEMENT CONSULTANT IN LAST 5 YRS? IF SO WHO?	No
RESULTS	
DESCRIBE INTERNAL MARKETING	Revenue Well
DESCRIBE EXTERNAL MARKETING	Website, SEO, PPC, and social media all managed by WEO
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	Revenue Well
WHAT TYPE COMPUTER SYSTEM	Eaglesoft
PURCHASER MUST PERSONALLY VERIFY PATIENT POPULATION DATA & REDUCED FEE PLANS	
ESTIMATE NUMBER OF PTS LAST 18 MONTHS	1,979
AVERAGE NUMBER OF NEW PATIENTS PER MONTH	49
AVERAGE NUMBER PTS TREATED PER DAY BY DENTIST(S)	12
AVERAGE NUMBER PTS TREATED PER DAY BY HYGIENIST(S)	8
HOW FAR AHEAD IS DENTIST SCHEDULED?	Associated scheduled out for 2 weeks
HOW FAR AHEAD IS HYGIENIST SCHEDULED?	4-6 Weeks
PRACTICE DATA	
% INCOME FROM CASH	11%
% OF PATIENTS PAYING CASH	11%
% INCOME FROM INSURANCE	56%
% OF PATIENTS WITH INSURANCE	49%
% PRACTICE INCOME FROM CAPTITATION	
% OF PATIENTS WITH CAPITATION	
% PRACTICE INCOME FROM MEDICAID	33%
% OF PATIENTS WITH MEDICAID	40%
% PRACTICE INCOME FROM REDUCED FEE PLANS	89%
% OF PATIENTS WITH REDUCED FEE PLANS	89%
SCHEDULING DATA	
MONDAY	8 AM - 1 PM; 2 PM - 5 PM
TUESDAY	8 AM - 1 PM; 2 PM - 5 PM
WEDNESDAY	8 AM - 1 PM; 2 PM - 5 PM
THURSDAY	8 AM - 1 PM; 2 PM - 5 PM
FRIDAY	Closed
SATURDAY	Closed
	43908
OWNER HOURS WORKED PER WEEK	
ASSOCIATE HOURS WORKED PER WEEK	32
HYGIENIST HOURS WORKED PER WEEK	32
DENTIST PATIENT VISITS PER YEAR	2,400
HYGIENE PATIENT VISITS PER YEAR	1,600
NUMBER OF DAYS WORKED PER YEAR	192
NUMBER OF WEEKS WORKED PER YEAR	48
COLLECTION DATA	
WHAT IS YOUR COLLECTION PERCENTAGE	89%
ACTUAL ACCOUNTS RECEIVABLE BALANCE	\$144,116
WHAT IS YOUR PATIENT CREDIT BALANCE	\$52,460
ACCOUNTS RECEIVABLES - CURRENT	\$91,323
ACCOUNTS RECEIVABLES - 31-60 DAYS	\$1,860
ACCOUNTS RECEIVABLE - 61-90 DAYS	\$5,712
ACCOUNTS RECEIVABLE >90 DAYS	\$41,525

WHAT PERCENTAGE OF THE PRACTICE INCOME IS:

HYGIENIST PRODUCTION	45%
OPERATIVE	37%
PEDODONTICS	2%
ORTHODONTICS	
IMPLANTS	
REMOVABLE PROSTHETICS	2%
FIXED PROSTHETICS	
ENDODONTICS	1%
PERIODONTICS	7%
ORAL SURGERY	5%
COSMETIC	
TMJ TREATMENT	
SOFT TISSUE MANAGEMENT	
OTHER	1%
TOTAL	100%

WHAT SERVICES ARE REFERRED OUT? Ortho, Endo, Perio, Implant, Third Molars

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	\$96
TWO SURFACE ANTERIOR COMPOSITE 02331	\$205
CORE BUILD-UP 02950	\$275
CROWN - GOLD/PORCELAIN 02750	\$1,209
ANTERIOR CANAL ROOT CANAL 03310	\$814
PANORAMIC X-RAY 00330	\$120
TWO SURFACE POSTERIOR COMPOSITE 02392	\$247
CROWN - PORCELAIN CERAMIC 02740	\$1,225
LABIAL PORCELAIN VENEER 02962	\$1,350
BICUSPID ROOT CANAL 03320	\$950
AVERAGE OF FEES	\$649
PERCENT OF FEE PARITY	119%

DEMOGRAPHIC DATA

WHAT IS APPROX. POPULATION OF YOUR CITY OR TOWN	50,000
WHAT IS APPROX. POPULATION OF YOUR DRAWING AREA	186,693
APPROXIMATE NUMBER OF GENERAL DENTAL PRACTICES WITHIN	
MAJOR EMPLOYERS IN AREA	Lowes Corporate Center, Iredell County School District
DESCRIBE ANY MAJOR ECONOMIC CHANGES IN DRAWING AREA	

STAFF DATA						
POSITION	YEAR HIRED	STAY	BENEFITS	ANNUAL SALARY	HOURLY SALARY	ANNUAL COST OF BENEFITS
RECEPTIONIST	2020	Yes		\$26,500		
OFFICE MANAGER	2021	No				
INSURANCE						
OTHER FRONT DESK						
BOOKKEEPER						
ASSISTANT - TEMP						
ASSISTANT	2019	Yes		\$31,600		
ASSISTANT	2021	Yes		\$12,288		
ASSISTANT						
ASSISTANT						
HYGIENIST	2020	Yes		\$74,000		
HYGIENIST						
HYGIENIST						
HYGIENIST						
LAB TECHNICIAN						
LAB TECHNICIAN						
ASSOCIATE	2019			\$150,000		
ASSOCIATE						
ASSOCIATE						
	6					
WHAT BENEFITS DO YOU PROVIDE FOR THE STAFF?				None		
COST OF BENEFITS PROVIDED FOR EACH EMPLOYEE						
DO YOU HIRE ANY UNPAID FAMILY MEMBERS?				No		
WHAT POSITION DO THEY HOLD?						
WHAT IS THE ESTIMATED MARKET VALUE OF THEIR JOB?						
ARE THERE ANY EMPLOYEES WHO ARE PAID MORE OR LESS THAN THE NORMAL SALARY FOR THEIR POSITION?						
WHAT POSITIONS AND WHAT IS AMOUNT OF OVER/UNDER COMPENSATION FOR EACH						
COLLECTION CENTERS						
	1/1/2021 - 10/28/2021	2020	2019			
GROSS COLLECTIONS	\$470,596	\$484,323	\$570,865			
OWNER COLLECTIONS						
HYGIENIST COLLECTIONS	\$127,058	\$133,867				
ASSOCIATE COLLECTIONS	\$343,538	\$350,456				
ASSOCIATE COLLECTIONS						
ASSOCIATE COLLECTIONS						
ASSOCIATE COLLECTIONS						
ASSOCIATE - SALARY IN DOLLARS / COMMISSION PERCENT	\$0	\$0				
HYGIENIST - SALARY IN DOLLARS / COMMISSION PERCENT	\$0					

CONFORMITY DATA			
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	No		
DESCRIBE ANY HEALTH PROBLEMS WHICH WOULD AFFECT YOUR PRACTICE OF DENTISTRY?	No		
INSURANCE EXPLANATION			
TOTAL EXPENSE FOR INSURANCE IN CURRENT PERIOD	\$1,048		
HOW MUCH OF TOTAL IS FOR OWNER HEALTH INSURANCE?			
HOW MUCH OF TOTAL IS FOR STAFF HEALTH INSURANCE?			
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?	\$1,048		
TAXES AND LICENSES EXPLANATION			
TOTAL EXPENSE FOR TAXES	\$16,321		
HOW MUCH OF TOTAL IS FOR PAYROLL TAXES?	\$15,120		
HOW MUCH OF TOTAL IS FOR STAFF PAYROLL TAX?	\$15,120		
HOW MUCH OF TOTAL IS FOR OWNER PAYROLL TAX?			
HOW MUCH OF TOTAL IS AD VALOREM (PRACTICE EQUIP)?	\$1,201		
HOW MUCH OF TOTAL IS FOR REAL ESTATE TAXES?			
PENSION EXPLANATION AND 401k COMBINED			
TOTAL EXPENSES FOR PENSION PLAN			
HOW MUCH OF TOTAL IS FOR STAFF			
HOW MUCH OF TOTAL IS FOR OWNER?			
BENEFITS EXPLANATION			
TOTAL EXPENSE FOR EMPLOYEE BENEFITS			
HOW MUCH OF TOTAL IS FOR STAFF?			
HOW MUCH OF TOTAL IS FOR OWNER?			
PLAN NAME - BE SURE TO LIST DELTA PREMIERE IF YOU HAVE	% OF PRX INCOME FROM THIS PLAN	% OF YOUR FEE THIS PLAN PAYS	
Delta Dental	14%		
Cigna	9%		
BCBS	6%		
Aetna	3%		
Ameritas	4%		
Metlife	7%		
UHC	4%		
Guardian (through Careington)	2%		
Medicaid NC	33%		
Others	9%		
	89%		