Lake Norman	GENERAL DENTISTRY	Merger Purchase
FINANCIAL DATA SUMMARY FOR PRACTICE		9545

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 $192,661

PURCHASER COMPENSATION AT 35% FOR PRODUCTION. $67,432

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 $109,973

THE PROFIT - NOT INCLUDING PURCHASER SALARY, DIVIDED BY THE TOTAL LOAN FOR THE PRACTICE PRICE AND WORKING CAPITAL, RESULTS IN A RATE OF 38%

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	$140,876
3. WHAT ARE EXPECTED TAX SAVINGS AND EQUITY INCREASES FOR THE PURCHASER	$32,454
4. TOTAL ECONOMIC BENEFIT - NET CASH FLOW (AFTER DEBT SERVICE), EQUITY, AND TAX SAVINGS	$173,330

Lake Norman	**GENERAL DENTISTRY**	**Merger Purchase**	
Practice #9545	**Price $275,000**		

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	$250,210	100.0%
HYGIENE COMPONENT	$57,548	23.0%
DENTIST COMPONENT	$192,661	77.0%
RETAINED SELLER		
ASSOCIATE		
PURCHASER	$192,661	77.0%
VARIABLE EXPENSES	**$**	**%**
WAGES, PAYROLL TAX, ETC.	$25,340	10.1%
LABORATORY	$3,125	1.2%
CLINICAL SUPPLIES	$456	0.2%
OTHER VARIABLE EXPENSE	$38,383	15.3%
TOTAL VARIABLE EXPENSE	**$67,305**	**26.9%**
FIXED EXPENSES	**$**	**%**
RENT		
PHONE, UTILITIES	$3,000	1.2%
LEGAL & ACCOUNTING		
INSURANCE	$1,500	0.6%
OTHER FIXED EXPENSE	$1,000	0.4%
TOTAL FIXED EXPENSE	**$5,500**	**2.2%**
PRACTICE DEBT SERVICE	**$**	**%**
INTEREST	$13,312	5.3%
PRINCIPAL	$23,217	9.3%
TOTAL DEBT SERVICE	**$36,529**	**14.6%**
SUMMARY	**$**	**%**
EXPECTED COLLECTIONS	$250,210	100.0%
EXPECTED EXPENSES	$72,805	29.1%
PRACTICE DEBT SERVICE	$36,529	14.6%
EXPCTD NET INCOME AFTER EXPENSES AND DEBT & PERCENT OF PERSONAL PROD.	**$140,876**	**73%**
THIS CASH FLOW EXAMPLE IS BASED ON THE FOLLOWING ASSUMPTIONS:	**$**	**%**
PRACTICE SALES PRICE & PERCENT OF GROSS	$275,000	113%
WORKING CAPITAL	$12,000	
TOTAL PRACTICE LOAN	$287,000	
PRACTICE LOAN INTEREST RATE	5.00%	
PRACTICE LOAN TERM (MONTHS)	120	
MONTHLY PRACTICE PAYMENT	$3,044	15%
MONTHLY PRACTICE PAYMENTS	$3,044	15%
ESTIMATED MONTHLY HYGIENE AND ASSOCIATE PROFIT	$2,686	13%
PURCHASER SALARY BASED ON 35% OF PERSONAL PRODUCTION	$67,432	
PRACTICE PROFIT - IN ADDITION TO PURCHASER SALARY	$109,973	38%
PURCHASER TAX SAVINGS AND 1ST YEAR EQUITY INCREASE	$32,454	
LESS PRACTICE DEBT SERVICE	($36,529)	
SALARY + PROFIT +TAX SAVINGS + EQUITY - DEBT SERVICE / % OF PERSONAL PRODUCTIO	**$173,330**	**90%**

Lake Norman	**GENERAL DENTISTRY**
Practice #9545 **Price $275,000**	**Merger Purchase**

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	2,085
EXPANDABLE FOOTAGE	
TOTAL MO. RENT EXP.	$5,000
PRICE PER SQUARE FOOT	$28.78
IS OFFICE HANDICAPPED ACCESSIBLE?	Yes
NUMBER OF PARKING SPACES	10+
PROXIMITY OF PARKING PLACES	Adjacent to building
# EQUIPPED OPS	3
NUMBER OF PLUMBED BUT UNEQUIPPED OPERATORIES	2
NUMBER OF OPERATORIES USED PRIMARILY BY DENTIST(S)	2
NUMBER OF OPERATORIES USED PRIMARILY BY HYGIENIST(S)	1
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"	July 8, 1905
DATE LEASE ENDS - i.e. "1/1/2020"	Unclear
IS THERE AN OPTION TO PURCHASE?	Yes
RENEWAL OPTIONS	Unclear
BUILDING VALUE TO BE USED	
PURCHASER MORTGAGE INTEREST RATE	6.00%
PURCHASER MORTGAGE TERM - YEARS	20
PURCHASER MONTHLY PAYMENT	
PURCHASER CURRENT MONTHLY RENT	
PRICE PER SQUARE FOOT	

WORK SCHEDULE

PLANS AFTER SALE OF PRACTICE	Moving from area
DAYS/WEEK CURRENTLY WORKED	3.0
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	Word of Mouth
DESCRIBE EXTERNAL MARKETING	None
HAS GROSS CHANGED SIGNIFICANTLY? WHY?	No
LIST SEDATIONS USED - NITROUS, DOCS, IV SEDATION	No
IS YOUR PRACTICE MERCURY FREE - NO AMALGAM?	No
WHAT TYPE RECALL SYSTEM	Schedule next visit at visit
WHAT TYPE COMPUTER SYSTEM	Eaglesoft
PURCHASER MUST PERSONALLY VERIFY PATIENT POPULATION DATA & REDUCED FEE PLANS	
ESTIMATE NUMBER OF DIFFERENT PATIENTS IN LAST 18 MONTHS	750
AVERAGE NUMBER OF NEW PATIENTS PER MONTH	5
AVERAGE NUMBER PATIENTS TREATED PER DAY BY DENTIST(S)	4
AVERAGE NUMBER PATIENTS TREATED PER DAY BY HYGIENISTS	8
HOW FAR AHEAD IS DENTIST SCHEDULED?	
HOW FAR AHEAD IS HYGIENIST SCHEDULED?	
PRACTICE DATA	
% INCOME FROM CASH	28%
% OF PATIENTS PAYING CASH	28%
% INCOME FROM FEE FOR SERVICE INSURANCE	72%
% OF PATIENTS WITH FEE FOR SERVICE INSURANCE	72%
% 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	Closed
TUESDAY	8 AM - 5 PM
WEDNESDAY	8 AM - 5 PM
THURSDAY	8 AM - 5 PM
FRIDAY	Closed
SATURDAY	Closed
DAYS WORKED PER WEEK	3
OWNER HOURS WORKED PER WEEK	24
ASSOCIATE HOURS WORKED PER WEEK	
HYGIENIST HOURS WORKED PER WEEK	24
DENTIST PATIENT VISITS PER YEAR	720
HYGIENE PATIENT VISITS PER YEAR	1,152
NUMBER OF DAYS WORKED PER YEAR	144
NUMBER OF WEEKS WORKED PER YEAR	48
COLLECTION DATA	
	82%
ACTUAL ACCOUNTS RECEIVABLE BALANCE	$41,719
WHAT IS YOUR PATIENT CREDIT BALANCE	
ACCOUNTS RECEIVABLES - CURRENT	$24,730
ACCOUNTS RECEIVABLES - 31-60 DAYS	$5,277
ACCOUNTS RECEIVABLE - 61-90 DAYS	$1,344
ACCOUNTS RECEIVABLE >90 DAYS	$10,368

WHAT PERCENTAGE OF THE PRACTICE INCOME IS:	
HYGIENIST PRODUCTION	58%
OPERATIVE	27%
PEDODONTICS	1%
ORTHODONTICS	
IMPLANTS	
REMOVABLE PROSTHETICS	2%
FIXED PROSTHETICS	5%
ENDODONTICS	2%
PERIODONTICS	1%
ORAL SURGERY	2%
COSMETIC	1%
TMJ TREATMENT	1%
DIAGNOSTIC	
OTHER	
TOTAL	100%
WHAT SERVICES ARE REFERRED OUT?	Some endo and surgery
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	$104
TWO SURFACE ANTERIOR COMPOSITE 02331	$232
CORE BUILD-UP 02950	$307
CROWN - GOLD/PORCELAIN 02750	$1,266
ANTERIOR CANAL ROOT CANAL 03310	$846
PANORAMIC X-RAY 00330	$125
TWO SURFACE POSTERIOR COMPOSITE 02392	$264
CROWN - PORCELAIN CERAMIC 02740	$1,255
LABIAL PORCELAIN VENEER 02962	$1,336
BICUSPID ROOT CANAL 03320	$978
AVERAGE OF FEES	$671
PERCENT OF FEE PARITY	88%
DEMOGRAPHIC DATA	
WHAT IS APPROX. POPULATION OF YOUR CITY OR TOWN	55,837
WHAT IS APPROX. POPULATION OF YOUR DRAWING AREA	55,837
APPROXIMATE NUMBER OF GENERAL DENTAL PRACTICES	
WITHIN	
MAJOR EMPLOYERS IN AREA	Lowes, Walmart
DESCRIBE ANY MAJOR ECONOMIC CHANGES IN DRAWING AREA	Rapid growth
YEAR BEGINNING PRACTICE IN CITY	2005
YEAR BEGINNING PRACTICE IN CURRENT LOCATION	2007
RIGHT OR LEFT HANDED	Right
PURCHASE OR SCRATCH START	Scratch

STAFF DATA						
POSITION	YEAR HIRED	STAY	BENEFITS	ANNUAL SALARY	HOURLY SALARY	ANNUAL COST OF BENEFITS
FRONT OFFICE	2023	Yes		$36,898		
PATIENT COORDINATOR						
FRONT OFFICE				$27,687		
FRONT OFFICE						
FRONT OFFICE						
ASSISTANT	2007	Yes		$18,199		
ASSISTANT						
ASSISTANT						
ASSISTANT						
ASSISTANT						
HYGIENIST	2024	Yes		$44,853		
HYGIENIST						
HYGIENIST						
HYGIENIST						
LAB TECHNICIAN						
LAB TECHNICIAN						
ASSOCIATE						
ASSOCIATE						
ASSOCIATE						

WHAT BENEFITS DO YOU PROVIDE FOR THE STAFF?	
COST OF BENEFITS PROVIDED FOR EACH EMPLOYEE	
DO YOU HIRE ANY UNPAID FAMILY MEMBERS?	No
WHAT POSITION DO THEY HOLD?	
WHAT IS FAIR MARKET WAGE FOR 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			
	1/1/2025 - 9/9/2025	2024	2023
GROSS COLLECTIONS	$185,172	$301,615	$313,223
OWNER COLLECTIONS	$185,172	$301,615	$313,223
HYGIENIST COLLECTIONS			
ASSOCIATE COLLECTIONS			
ASSOCIATE COLLECTIONS			
ASSOCIATE COLLECTIONS			
ASSOCIATE COLLECTIONS			
ASSOCIATE - SALARY IN DOLLARS / COMMISSION PERCENT			
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		
the 3rd or 4th dentist involved.			
DESCRIBE ANY HEALTH PROBLEMS WHICH WOULD AFFECT	No		
YOUR PRACTICE OF DENTISTRY?			
INSURANCE EXPLANATION			
TOTAL EXPENSE FOR INSURANCE IN CURRENT PERIOD	$1,727		
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?	$1,727		
HOW MUCH FOR TOTAL IS FOR BUILDING INSURANCE?			
TAXES AND LICENSES EXPLANATION			
TOTAL EXPENSE FOR TAXES			
HOW MUCH OF TOTAL IS FOR PAYROLL TAXES?			
HOW MUCH OF TOTAL IS FOR STAFF PAYROLL TAX?			
HOW MUCH OF TOTAL IS FOR OWNER PAYROLL TAX?			
HOW MUCH OF TOTAL IS AD VALOREM (PRACTICE EQUIP)?			
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?			
TEN HIGHEST INCOME SC	**% OF PRX INCOME**	**% OF YOUR FEE**	% OF PATIENTS ON
PLAN NAME - BE SURE TO LIST DELTA PREMIERE IF YOU HAVE	**FROM THIS PLAN**	**THIS PLAN PAYS**	THIS PLAN