Northern Adirondacks General Dentistry	
FINANCIAL DATA SUMMARY FOR PRACTICE 9440	
The following statistics are based on assumptions that the subject practice will continue to be operated a	s it has been
in the past. Vartiation from past performance are 1) increase in fees for each year; 2) no production increase	
and 3) overhead expenses increase each year. Fee and overhead increases are based on estimates of inf	lation and
can be adjusted.	
The purpose of this summary is to demonstrate the individual practice revenues and profitability of this particular terms of the provide the provided of the p	articular practice.
PRACTICE FINANCIAL SUMMARY	
AMOUNT OF INCOME PERSONALLY GENERATED BY PURCHASER \$574,809	
COMPENSATION FOR PURCHASER FOR HIS/HER PRODUCTION.	
CONSIDER A GENEROUS COMMISSION RATE OF 35% \$201,183	
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.	
ONLY PRACTICE OWNERS REALIZE PRACTICE PROFIT.	
IN THIS PRACTICE, THE PROFIT, AFTER ALL EXPENSES AND SALARY	
COMPENSATION TO THE PURCHASER IS PAID AMOUNTS TO \$343,771	
THE PROFIT - NOT INCLUDING PURCHASER SALARY, DIVIDED BY THE TOTAL LOAN	
FOR THE PRACTICE PRICE AND WORKING CAPITAL, REPRESENTS THE RATE OF 31	%
TO COMPARE THIS OPPORTUNITY TO OTHER OPPORTUNITIES. WHETHER THEY ARE ASSOCIATESHIPS	S OR
TO COMPARE THIS OPPORTUNITY TO OTHER OPPORTUNITIES, WHETHER THEY ARE ASSOCIATESHIPS OTHER PRACTICES TO PURCHASE, LOOK AT SEVERAL KEY DATA POINTS.	S OR SUBJECT PRACTICE
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Northern Adirondacks General Dentistry						
FINANCIAL D	ATA FOR	PRACTICE	9440			
The following su	mmary illustra	tes a projected	year's income an	d expenses for the subject practice whic	h	
				increase in production. This summary i		
•				hasers should obtain qualified legal and	laccounting	
· ·		decisions. NC	TE: Practice price	e does not include accounts receivable.		
PRACTICE INCO	-					
EXPECTED GR					\$845,308	100.0%
	HYGIENE CO				\$270,499	32.0%
	DENTIST CO				\$574,809	68.0%
		RETAINED SI	ELLER			
		ASSOCIATE			* = 7 4,000	00.00/
ARIABLE EXP		PURCHASER			\$574,809	68.0%
		ROLL TAX, ET	-C		\$172,795	20.4%
	LABORATOR		0.		\$172,795	3.1%
	CLINICAL SU				\$131,461	15.6%
			L SE		\$24,563	2.9%
				TOTAL VARIABLE EXPENSE	\$354,708	42.0%
FIXED EXPENS	ES				<i>t</i>	10 /0
	PHONE, UTIL	ITIES			\$13,266	1.6%
	LEGAL & ACC				\$6,695	0.8%
	INSURANCE				\$7,725	0.9%
	OTHER FIXEI	D EXPENSE			\$35,798	4.2%
				TOTAL FIXED EXPENSE	\$63,483	7.5%
DEBT SERVICE	FOR PRACT	ICE AND BULI	DING		. ,	
	INTEREST				\$28,004	3.3%
	PRINCIPAL				\$55,342	6.5%
				TOTAL DEBT SERVICE	\$83,345	9.9%
SUMMARY EXPECTED CO					\$845,308	100.0%
EXPECTED EXP					\$418,192	49.5%
PRACTICE DEB					\$83,345	9.9%
EXPCTD NET IN	COME AFTE	R EXPENSES	AND DEBT & PE	RCENT OF PERSONAL PROD.	\$343,771	60%
PURCHASER P					\$574,809	68.0%
	ASE & PERCE	NT OF PERSO	DNAL PRODUCTI	ON	\$55,342	9.6%
TAX SAVINGS F	ROM DEPRE	CIATION & PE	RCENT OF PERS	SONAL PRODUCTION	\$24,828	4.3%
TOTAL	ECONOMIC	BENEFIT-CAS	H, TAX SAVINGS	6, EQUITY & % PERSONAL PROD.	\$423,940	74%
THIS CASH FLO	OW EXAMPLE	IS BASED ON	THE FOLLOWIN	NG ASSUMPTIONS:		
			PRACTICE SA	LES PRICE & PERCENT OF GROSS	\$485,000	59%
				WORKING CAPITAL	\$41,000	
TOTAL PRACTICE LOAN				\$526,000		
PRACTICE LOAN INTEREST RATE				3.60%		
PRACTICE LOAN TERM (MONTHS)				120		
				MONTHLY PRACTICE PAYMENT	\$5,226	7%
BUILDING PRICE				\$290,000		
MONTHLY BUILDING MORTGAGE PAYMENTS			\$1,719	2%		
PURCHASER C	ASH FLOW C	ONSIDERATIO	SNC			
MONTHLY PRACTICE AND BUILDING PAYMENTS				\$6,945	10%	
ESTIMATED MONTHLY HYGIENE AND ASSOCIATE PROFIT				HYGIENE AND ASSOCIATE PROFIT	\$15,884	23%
PURCHASER SALARY BASED ON 35% OF PERSONAL PRODUCTION					\$201,183	
		PRACT	ICE PROFIT - IN A	ADDITION TO PURCHASER SALARY	\$250,761	48%
TOTAL PURCHASER SALARY AND PRACTICE PROFIT					\$451,944	
LESS DEBT SERVICE FOR PRACTICE AND BULDING				(\$83,345)		
		OFP OAL ADV	DROFIT AND TO	AX SAVINGS AFTER DEBT SERVICE	\$368,599	

Northern Adirondacks DATA FOR PRACTICE NUMBER	9440
The following data is provided by the owner of the practice. It is	believed to the best of the owner's knowledge
o be a true and accurate representation of the facts of the prac	ctice. It is the responsibility of any purchaser to
erify all information contained herein and to seek qualified cou	insel in the interpretation and verification thereof.
OFFICE DATA	
SQUARE FOOTAGE OF OFFICE	2,200
EXPANDABLE FOOTAGE	Add second level or finish basement
CURRENT MONTHLY RENTAL i.e. "1200"	
PRICE PER SQUARE FOOT	
IS OFFICE HANDICAPPED ACCESSIBLE?	Yes
NUMBER OF PARKING SPACES	16-20
PROXIMITY OF PARKING PLACES	Back of building
# EQUIPPED OPS	4
NUMBER OF PLUMBED BUT UNEQUIPPED OPERATORIES	0, but could easily be done
NUMBER OF OPERATORIES USED PRIMARILY BY DENTIST(S)	2
NUMBER OF OPERATORIES USED PRIMARILY BY HYGIENIST(S)	2
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	YES
IF NOT APPRAISED, ESTIMATED BUILDING PRICE	\$290,000
IF NOT SOLD, MONTHLY RENTAL AMOUNT	
ANNUAL REAL ESTATE TAXES	\$5,112
ANNUAL REAL ESTATE INSURANCE COST	
DATE OF LEASE i.e. "6/1/2016"	
DATE LEASE ENDS - i.e. "1/1/2020"	
IS THERE AN OPTION TO PURCHASE?	
RENEWAL OPTIONS BUILDING VALUE TO BE USED	\$200.000
PURCHASER MORTGAGE INTEREST RATE	
PURCHASER MORTGAGE TERM - YEARS	20
PURCHASER MONTHLY PAYMENT	\$1,719
PURCHASER CURRENT MONTHLY RENT	
PRICE PER SQUARE FOOT	\$9.38
VORK SCHEDULE	
	Retirement
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	
OVID INFORMATION	
DATE CLOSED FOR COVID	March 15, 2020
DATE REOPENED FOR COVID	June 1, 2020
DATE OF LATEST PRACTICE REVENUE	December 31, 2020
AMOUNT OF LATEST PRACTICE REVENUES	\$827,723
ANNUALIZED 2020 COLLECTIONS ADJUSTED FOR TIME CLOSED	\$1,052,679
AMOUNT OF ANY OUTSTANDING PPP OR EIDL LOANS	

PRACTICE DATA	
	N
MANAGEMENT CONSULTANT IN LAST 5 YRS? IF SO WHO?	No
RESULTS	
DESCRIBE INTERNAL MARKETING	Word of mouth
DESCRIBE EXTERNAL MARKETING	Limited local ads
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	Eaglesoft
WHAT TYPE COMPUTER SYSTEM	Eaglesoft
PURCHASER MUST PERSONALLY VERIFY PATIENT POPULATION DA	TA & REDUCED FEE PLANS
ESTIMATE NUMBER OF PTS LAST 18 MONTHS	
AVERAGE NUMBER OF NEW PATIENTS PER MONTH	20
AVERAGE NUMBER PTS TREATED PER DAY BY DENTIST(S)	8
AVERAGE NUMBER PTS TREATED PER DAY BY HYGIENIST(S)	8
HOW FAR AHEAD IS DENTIST SCHEDULED?	three weeks
HOW FAR AHEAD IS HYGIENIST SCHEDULED?	six months
PRACTICE DATA	
% INCOME FROM CASH	35%
	35%
% OF PATIENTS PAYING CASH % INCOME FROM INSURANCE	65%
% OF PATIENTS WITH INSURANCE	65%
% PRACTICE INCOME FROM CAPTITATION	
% OF PATIENTS WITH CAPITATION % PRACTICE INCOME FROM MEDICAID	
% OF PATIENTS WITH MEDICAID	
% PRACTICE INCOME FROM REDUCED FEE PLANS	
% OF PATIENTS WITH REDUCED FEE PLANS	
SCHEDULING DATA	
MONDAY	8 AM - 5 PM
TUESDAY	8 AM - 5 PM
WEDNESDAY	8 AM - 5 PM
THURSDAY	8 AM - 5 PM
FRIDAY	
SATURDAY	
	43905
OWNER HOURS WORKED PER WEEK	32
ASSOCIATE HOURS WORKED PER WEEK	
HYGIENIST HOURS WORKED PER WEEK	36
DENTIST PATIENT VISITS PER YEAR	
HYGIENE PATIENT VISITS PER YEAR	
NUMBER OF DAYS WORKED PER YEAR	178
NUMBER OF WEEKS WORKED PER YEAR	46
COLLECTION DATA	
WHAT IS YOUR COLLECTION PERCENTAGE	97%
ACTUAL ACCOUNTS RECEIVABLE BALANCE	\$38,891
WHAT IS YOUR PATIENT CREDIT BALANCE	
ACCOUNTS RECEIVABLES - CURRENT	\$41,465
ACCOUNTS RECEIVABLES - 31-60 DAYS	\$3,015
ACCOUNTS RECEIVABLE - 61-90 DAYS	\$377
ACCOUNTS RECEIVABLE >90 DAYS	-\$5,966
	40,000

WHAT PERCENTAGE OF THE PRACTICE INCOME IS:	
HYGIENIST PRODUCTION	32%
OPERATIVE	46%
PEDODONTICS	
ORTHODONTICS	
IMPLANTS	3
REMOVABLE PROSTHETICS	
FIXED PROSTHETICS	
ENDODONTICS	
PERIODONTICS	
ORAL SURGER	
COSMETIC	
SOFT TISSUE MANAGEMENT	
OTHEF	11%
TOTAI	100%
NHAT SERVICES ARE REFERRED OUT?	Endo, Perio Surgery, Most Oral Surgery, Most Ortho
REVENUES SOURCES	
S ANY OF YOUR REPORTED INCOME FROM ANY OTHER	
SOURCE THAN PATIENT TREATMENT FROM THIS PRACTICE?	No
F SO HOW MUCH IN CURRENT PERIOD?	
F SO , HOW MUCH FOR LAST YEAR?	
F SO HOW MUCH FOR THE PREVIOUS YEAR?	
WHAT IS THE SOURCE OF THIS OTHER INCOME?	
FEE SCHEDULE	
ADULT PROPHY 01110	\$89
TWO SURFACE ANTERIOR COMPOSITE 02331	\$215
CORE BUILD-UP 02950	ψ2 10
CROWN - GOLD/PORCELAIN 02750	\$1,095
ANTERIOR CANAL ROOT CANAL 03310	
PANORAMIC X-RAY 00330	\$135
TWO SURFACE POSTERIOR COMPOSITE 02392	\$215
CROWN - PORCELAIN CERAMIC 02740	\$1,095
ABIAL PORCELAIN VENEER 02962	\$1,095
BICUSPID ROOT CANAL 03320	
AVERAGE OF FEES	\$563
PERCENT OF FEE PARITY	108%
DEMOGRAPHIC DATA	
WHAT IS APPROX. POPULATION OF YOUR CITY OR TOWN	5,000
WHAT IS APPROX. POPULATION OF YOUR DRAWING AREA	20,000
APPROXIMATE NUMBER OF GENERAL DENTAL PRACTICES	eight
MAJOR EMPLOYERS IN AREA	Prisons, Sunmount, Hospital, Local Businesses, Olympic Venues
DESCRIBE ANY MAJOR ECONOMIC CHANGES IN DRAWING AREA	Many new residents escaping the big cities from Covid

STAFF DATA								
POSITION	YEAR HIRED	STAY	BENEFITS	ANNUAL SALARY	HOURLY SALARY	ANNUAL COST OF BENEFITS		
RECEPTIONIST	2013	Yes		\$51,214		\$7,000		
OFFICE MANAGER				•• ••,=••				
INSURANCE								
OTHER FRONT DESK								
BOOKKEEPER/PT	2019	Yes		\$3,188		\$500		
ASSISTANT	2019	Yes		\$24,570		\$3,000		
ASSISTANT				· /		• • • • • •		
ASSISTANT								
ASSISTANT								
ASSISTANT								
HYGIENIST	2018	Yes		\$19,145		\$1,200		
HYGIENIST (Wife)	2010	Yes		\$51,345		ψ1,200		
HYGIENIST		100		фо 1,0 10				
HYGIENIST								
LAB TECHNICIAN								
LAB TECHNICIAN								
ASSOCIATE	_							
ASSOCIATE								
ASSOCIATE								
WHAT BENEFITS DO YOU	J PROVIDE FO	R THE S	TAFF?	Christmas bonus, va	aries by year; vaca	tions		
DO YO	WHAT P	OSITION	AMILY MEMBERS? I DO THEY HOLD? JE OF THEIR JOB?					
ARE THERE ANY EMPLOY								
			THEIR POSITION?					
WHAT POSITIONS A								
		JMPENS	COMPENSATION FOR EACH					
	?S							
COLLECTION CENTER	25							
	2S			1/2/2021-3/12/2021		2018		
	?S		SS COLLECTIONS	\$174,306	\$704,256	\$784,993		
COLLECTION CENTER		OWN	ER COLLECTIONS	\$174,306 \$118,528	\$704,256 \$478,894	\$784,993 \$533,795		
COLLECTION CENTER		OWN		\$174,306 \$118,528	\$704,256	\$784,993		
COLLECTION CENTER		OWN HYGIENI	ER COLLECTIONS	\$174,306 \$118,528	\$704,256 \$478,894	\$784,993 \$533,795		
	A	OWN HYGIENI SSOCIA	ER COLLECTIONS ST COLLECTIONS	\$174,306 \$118,528 \$55,778	\$704,256 \$478,894	\$784,993 \$533,795		
COLLECTION CENTER	ا ۹ ۹	OWN HYGIENI SSOCIA SSOCIA	ER COLLECTIONS ST COLLECTIONS TE COLLECTIONS	\$174,306 \$118,528 \$55,778	\$704,256 \$478,894	\$784,993 \$533,795		
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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				
	•			
ANY PRACTICE LAWSUITS FILED IN PAST TEN YRS. EXPLAIN	No			
DESCRIBE ANY HEALTH PROBLEMS WHICH WOULD AFFECT	None			
YOUR PRACTICE OF DENTISTRY?				
INSURANCE EXPLANATION				
TOTAL EXPENSE FOR INSURANCE IN CURRENT PERIOD				
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?				
TAXES AND LICENSES EXPLANATION				
TOTAL EXPENSE FOR TAXES	\$55,441			
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?		\$50,328		
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	\$11,700			
HOW MUCH OF TOTAL IS FOR STAFF?	\$11,700			
HOW MUCH OF TOTAL IS FOR OWNER?				
	% OF PRX INCOME	% OF YOUR FEE		
PLAN NAME - BE SURE TO LIST DELTA PREMIERE IF YOU HAVE I	FROM THIS PLAN	THIS PLAN PAYS		
AARP		66%		
Addendum		29%		
Aetna		94%		
Aflac		92%		
Ameritus		71%		
Ameritus Group		46%		
Ameritus Physicians		93%		
BCBS		90%		
APWU		87%		
Bright Ideal Dental		45%		
Cigna				
More accepted				

DESCRIBE YOUR PRACTICE, STAFF, PATIENTS, COMMUNITY, PRACTICE PHILOSOPHY AND ITS STRENGTHS AND WEAKNESSES:

The practice is located in a beautiful, friendly town. The people are real. No judgement of others. My staff is as friendly as the town. They are extremely dedicated. We treat all patients as we would want to be treated. Patients are very receptive to trustworthy, honest treatment.

The largest complaint is the number of procedures I refer out. Most referrals are 2+ hours away.

COVID INFORMATION

 Date Closed for Covid: March 15, 2020
 Date Reopened: June 1, 2020

 what percent reduction in operational capacity in 2020 was there compared to 2019: 10%

 How does your schedule for 2020 compare to 2019: Similar

 Do you have adequate PPE inventory: Yes
 Do you pass cost of PPE on to patients? No

 How does you post Covid treatment mix compare to same period of 2019: Same

 Has your insured patient/cash patient ratio changed since reopening: No

 Have all staff members returned or been replaced:
 Yes
 What is your estimated monthly payroll expense:

 Did you receive a PPP Loan: Yes
 How much: \$103,000
 Was this loan included in your P&L and/or tax return: No

 Was this loan paid back or forgiven:
 Forgiven

 Did you receive a EIDL loan: No
 No