

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 <div style="font-size: 24pt; font-weight: bold; text-align: center;">2024</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A This return/report is for: a multiemployer plan a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)

a single-employer plan a DFE (specify) _____

B This return/report is: the first return/report the final return/report

an amended return/report a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here.

D Check box if filing under: Form 5558 automatic extension the DFVC program

special extension (enter description)

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.

Part II	Basic Plan Information—enter all requested information
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1a Name of plan <u>DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN</u>	1b Three-digit plan number (PN) ▶ <u>501</u>
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>DENTAL PRACTICE CONSORTIUM</u> <u>550 WEST NORTH STREET</u> <u>SUITE 300</u> <u>INDIANAPOLIS, IN 46202</u>	1c Effective date of plan <u>01/01/2024</u> 2b Employer Identification Number (EIN) <u>93-2728089</u> 2c Plan Sponsor's telephone number <u>317-634-2610</u> 2d Business code (see instructions) <u>525920</u>

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2025	BRIAN HENRY
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	3b Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN	
	4d PN	
5 Total number of participants at the beginning of the plan year	5	2803
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1)	2803
	6a(2)	2740
	6b	0
	6c	0
	6d	2740
	6e	
	6f	
	6g(1)	
6g(2)		
6h		
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:
4A 4B 4D 4E 4F 4H

9a Plan funding arrangement (check all that apply)	9b Plan benefit arrangement (check all that apply)
(1) <input checked="" type="checkbox"/> Insurance	(1) <input checked="" type="checkbox"/> Insurance
(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts	(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts
(3) <input checked="" type="checkbox"/> Trust	(3) <input checked="" type="checkbox"/> Trust
(4) <input type="checkbox"/> General assets of the sponsor	(4) <input type="checkbox"/> General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules	b General Schedules
(1) <input type="checkbox"/> R (Retirement Plan Information)	(1) <input checked="" type="checkbox"/> H (Financial Information)
(2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) <input type="checkbox"/> I (Financial Information – Small Plan)
(3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(3) <input checked="" type="checkbox"/> A (Insurance Information) – Number Attached <u>1</u>
(4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____	(4) <input checked="" type="checkbox"/> C (Service Provider Information)
(5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)	(5) <input type="checkbox"/> D (DFE/Participating Plan Information)
	(6) <input type="checkbox"/> G (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) Yes No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) Yes No

11c Enter the Receipt Confirmation Code for the 2024 Form M-1 annual report. If the plan was not required to file the 2024 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code 161588077

<p style="text-align: center;">SCHEDULE A (Form 5500)</p> <p style="text-align: center; font-size: small;">Department of the Treasury Internal Revenue Service</p> <hr/> <p style="text-align: center; font-size: small;">Department of Labor Employee Benefits Security Administration</p> <hr/> <p style="text-align: center; font-size: small;">Pension Benefit Guaranty Corporation</p>	<p>Insurance Information</p> <p>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</p> <p>▶ File as an attachment to Form 5500.</p> <p>▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).</p>	<p>OMB No. 1210-0110</p> <hr/> <p style="font-size: 24pt;">2024</p> <hr/> <p>This Form is Open to Public Inspection</p>
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

<p>A Name of plan DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN</p>	<p>B Three-digit plan number (PN) ▶</p>	<p>501</p>
<p>C Plan sponsor's name as shown on line 2a of Form 5500 DENTAL PRACTICE CONSORTIUM</p>	<p>D Employer Identification Number (EIN) 93-2728089</p>	

Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
ANTHEM INSURANCE COMPANIES INC.

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
35-0781558	28207	00241691	2740	01/01/2024	12/31/2024

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
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3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

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(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
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(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

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(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information
 Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b Premiums paid to carrier **6b**

c Premiums due but unpaid at the end of the year **6c**

d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. **6d**
 Specify nature of costs ▶

e Type of contract: (1) individual policies (2) group deferred annuity
 (3) other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

- a** Type of contract: (1) deposit administration (2) immediate participation guarantee
 (3) guaranteed investment (4) other ▶

b Balance at the end of the previous year			7b	
c Additions: (1) Contributions deposited during the year	7c(1)			
	7c(2)			
	7c(3)			
	7c(4)			
	7c(5)			
	(6) Total additions			
d Total of balance and additions (add lines 7b and 7c(6))			7d	0
e Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)		
	(2) Administration charge made by carrier.....	7e(2)		
	(3) Transferred to separate account	7e(3)		
	(4) Other (specify below)	7e(4)		
(5) Total deductions		7e(5)	0	
f Balance at the end of the current year (subtract line 7e(5) from line 7d).....			7f	0

Part III Welfare Benefit Contract Information
 If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** Health (other than dental or vision)
- b** Dental
- c** Vision
- d** Life insurance
- e** Temporary disability (accident and sickness)
- f** Long-term disability
- g** Supplemental unemployment
- h** Prescription drug
- i** Stop loss (large deductible)
- j** HMO contract
- k** PPO contract
- l** Indemnity contract
- m** Other (specify) ▶

9 Experience-rated contracts:

a	Premiums: (1) Amount received	9a(1)		
	(2) Increase (decrease) in amount due but unpaid	9a(2)		
	(3) Increase (decrease) in unearned premium reserve	9a(3)		
	(4) Earned ((1) + (2) - (3))		9a(4)	0
b	Benefit charges (1) Claims paid	9b(1)		
	(2) Increase (decrease) in claim reserves	9b(2)		
	(3) Incurred claims (add (1) and (2))		9b(3)	0
	(4) Claims charged		9b(4)	
c	Remainder of premium: (1) Retention charges (on an accrual basis) --			
	(A) Commissions	9c(1)(A)		
	(B) Administrative service or other fees	9c(1)(B)		
	(C) Other specific acquisition costs	9c(1)(C)		
	(D) Other expenses	9c(1)(D)		
	(E) Taxes	9c(1)(E)		
	(F) Charges for risks or other contingencies	9c(1)(F)		
	(G) Other retention charges	9c(1)(G)		
	(H) Total retention		9c(1)(H)	0
	(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.)		9c(2)	
d	Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
	(2) Claim reserves		9d(2)	
	(3) Other reserves		9d(3)	
e	Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a	Total premiums or subscription charges paid to carrier	10a		1211027
b	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.	10b		

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? Yes No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

A Name of plan DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN	B Three-digit plan number (PN) ▶	501
C Plan sponsor's name as shown on line 2a of Form 5500 DENTAL PRACTICE CONSORTIUM	D Employer Identification Number (EIN) 93-2728089	

Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)... Yes No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

ANTHEM INSURANCE COMPANIES, INC.

35-0781558

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
12 49 13 62 15	SERVICE PROVIDER	1146389	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

IDA INSURANCE SERVICE

35-1976087

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
13 14 72	ADMIN & MARKETING SERVICE	241340	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

EMPYREAN BENEFIT SOLUTIONS INC

20-3029813

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
13	SERVICE PROVIDER	157120	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

RISK STRATEGIES CONSULTING INC

92-0904333

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16	CONSULTING	97220	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

NONPROFIT FINANCIAL SOLUTIONS PC

20-0257445

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
12 62 13 15	SERVICE PROVIDER	72705	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

BROWN & BROWN OF INDIANA INC

35-1785187

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
12 62 13 15	SERVUICE PROVIDER	64416	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

BOSE MCKINNEY & EVANS LLP

35-0957980

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29	LEGAL	52590	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

JONATHAN MAYO

27-3904040

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
17	NONE	45000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

FIRST STOP HEALTH LLC

45-1542956

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	MEDICAL	32778	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

BARNES & THORNBURG LLP

35-0900596

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
17	NONE	32000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

BRADY WARE & SCHOENFELD INC

35-1476702

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	AUDIT/TAX SERVICES	21420	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

MARKS NELSON ADVISORY LLC

92-1368147

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	NONE	5850	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN	B Three-digit plan number (PN) ▶ 501
C Plan sponsor's name as shown on line 2a of Form 5500 DENTAL PRACTICE CONSORTIUM	D Employer Identification Number (EIN) 93-2728089

Part I	Asset and Liability Statement
---------------	--------------------------------------

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

		(a) Beginning of Year	(b) End of Year
Assets			
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	9269
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	0	770355
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	1178036
(2) U.S. Government securities	1c(2)	0	4170205
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	0	1032472
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	0	4400987
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	0	11561324
Liabilities			
g Benefit claims payable.....	1g	0	1196125
h Operating payables.....	1h	0	12710
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	0	1211969
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	0	2420804
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	0	9140520

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)	14509292	
(B) Participants.....	2a(1)(B)	550325	
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		15059617
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)		
(B) U.S. Government securities.....	2b(1)(B)		
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		0
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		0
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)		
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		184264
d Total income. Add all income amounts in column (b) and enter total.....	2d		15243881

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	11964579	
(2) To insurance carriers for the provision of benefits	2e(2)	1393339	
(3) Other.....	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		13357918
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)	1875513	
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	21420	
(5) Investment advisory and investment management fees	2i(5)	25388	
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)	97220	
(8) Legal fees	2i(8)	52590	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses.....	2i(11)	40579	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		2112710
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		15470628

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-226747
l Transfers of assets:			
(1) To this plan.....	2l(1)		9367267
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) Unmodified (2) Qualified (3) Disclaimer (4) Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) DOL Regulation 2520.103-8 (2) DOL Regulation 2520.103-12(d) (3) neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: **BRADY, WARE & SCHOENFELED**

(2) EIN: **35-1476702**

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) This form is filed for a CCT, PSA, DCG or MTIA. (2) It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
e Was this plan covered by a fidelity bond?	X		1000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? Yes No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) Yes No Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

**DENTAL PRACTICE CONSORTIUM, INC.
HEALTH PLAN**

**FINANCIAL STATEMENTS
AND SUPPLEMENTARY INFORMATION**

Year Ended December 31, 2024

TABLE OF CONTENTS

	Page
INDEPENDENT AUDITORS' REPORT	1 - 3
FINANCIAL STATEMENTS	
Statement of Net Assets Available for Benefits	4
Statement of Changes in Net Assets Available for Benefits	5
Notes to Financial Statements	6 - 12
SUPPLEMENTARY INFORMATION	
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)	13 - 17
Schedule H, Line 4j - Schedule of Reportable Transactions	18



INDEPENDENT AUDITORS' REPORT

Board of Trustees
Dental Practice Consortium, Inc. Health Plan
Indianapolis, Indiana

Opinion

We have audited the accompanying financial statements of **Dental Practice Consortium, Inc. Health Plan** (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statement of net assets available for benefits as of December 31, 2024, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of **Dental Practice Consortium, Inc. Health Plan** as of December 31, 2024, and the changes in its net assets available for benefits for the year then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of **Dental Practice Consortium, Inc. Health Plan** and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about **Dental Practice Consortium, Inc. Health Plan's** ability to continue as a going concern for one year after the date the financial statements are available to be issued.

INDEPENDENT AUDITORS' REPORT - CONTINUED

Management is also responsible for maintaining a current plan instrument, including all Plan amendments; administering the Plan; and determining that the Plan's transactions that are presented and disclosed in the financial statements are in conformity with the Plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditors' Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of **Dental Practice Consortium, Inc. Health Plan's** internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the **Dental Practice Consortium, Inc. Health Plan's** ability to continue as a going concern for a reasonable period of time.

INDEPENDENT AUDITORS' REPORT - CONTINUED

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Supplemental Schedules Required by ERISA

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental Schedule of Assets (Held at End of Year) on pages 13 - 17 and the supplemental Schedule of Reportable Transactions on page 18 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, including their form and content, are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion, the information in the accompanying schedules are fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.



Richmond, Indiana
April 23, 2025

DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN

STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2024

ASSETS

Cash - interest bearing	\$ 1,155,245
Investments at fair value	9,626,455
Stop loss and rebates receivable	750,484
Employer contribution receivable	9,269
Prepaid expenses	<u>19,871</u>
Total Assets	<u>11,561,324</u>

LIABILITIES

Accounts payable	12,710
Premiums received in advance	<u>1,211,969</u>
Total Liabilities	<u>1,224,679</u>

NET ASSETS AVAILABLE FOR BENEFITS

\$ 10,336,645

DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Year Ended December 31, 2024

ADDITIONS TO NET ASSETS ATTRIBUTED TO	
Contributions - employer	\$ 14,509,292
Investment income	
Net appreciation in fair value of investments	184,264
Interest and dividends	<u>550,325</u>
	734,589
Less investment expenses	<u>(25,388)</u>
Net investment income	<u>709,201</u>
Total additions	<u>15,218,493</u>
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO	
Benefit expenses	13,159,584
Reinsurance premiums, net	1,393,339
Administrative expenses	<u>2,087,322</u>
Total deductions	<u>16,640,245</u>
NET DECREASE	(1,421,752)
TRANSFER FROM OTHER PLAN	11,758,397
NET ASSETS AVAILABLE FOR BENEFITS	
Beginning of year	<u>-</u>
End of year	<u>\$ 10,336,645</u>

DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN

NOTES TO FINANCIAL STATEMENTS

NOTE 1 - DESCRIPTION OF PLAN

The following description of the **Dental Practice Consortium, Inc. Health Plan** (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General - The Plan provides health and other benefits covering all eligible employees of participating dentists located in the State of Indiana (Employers). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Board of Trustees oversees governance of the Plan.

Contributions - Employers and participating employees are required to make monthly contributions to the Plan based on established rates for elected coverage. Contribution rates are determined annually by the Board of Trustees.

Benefits - The Plan provides health benefits (medical and prescription drugs) for employees of the Employers and their eligible dependents. A third-party administrator administers all claims.

Stop Loss Coverage - The Plan has entered into a stop loss insurance arrangement in an effort to limit its exposure for self-insured benefits (individual participant claims over a specific dollar amount, as well as its aggregate exposure for all claims). Premiums for stop loss insurance are included in the accompanying statement of changes in net assets available for benefits. The Plan recognized \$531,442 of stop loss reimbursements during the year ended December 31, 2024, which have been netted against benefit expenses on the statement of changes in net assets available for benefits.

Self-insured Benefits - All other Plan benefits are self-insured. The claims for self-insured benefits are processed by the Plan's third-party claims processors under administrative services only (ASO) arrangements. The claims processors pay claims directly on behalf of participants, and are then reimbursed by the Plan. Despite the Plan's utilization of third-party processors, ultimate responsibility for payments to providers and participants is retained by the Plan.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting - The financial statements of the Plan are prepared using the accrual method of accounting.

Financial Estimates - The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the Plan's administrator to make estimates and assumptions that affect the reported amounts of net assets, and disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN

NOTES TO FINANCIAL STATEMENTS

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - CONTINUED

Investment Valuation and Income Recognition - Investments are reported at fair value. Fair value is the price that would be received to sell an asset, or paid to transfer a liability, in an orderly transaction between market participants at the measurement date. See Note 3 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the Plan's gains and losses on investments bought and sold, as well as held during the year.

Concentrations - Financial instruments that potentially subject the Plan to credit risk consist principally of cash. At December 31, 2024, the recorded amount of the Plan's checking account was \$1,155,245. The bank balances of these deposits were \$866,389. At December 31, 2024, only \$748,139 of the Plan's bank balances were insured by the FDIC. Uninsured amounts were \$118,250 at December 31, 2024 due to the timing of the investment of sweep activity.

The Plan's investments in money market funds and other securities are not insured by the FDIC and are subject to custodial credit risk. The Plan's U.S. Treasury bills are guaranteed by the United States government.

Stop Loss and Rebates Receivable - Stop loss receivables represent amounts due to the Plan from its reinsurance carrier for reimbursement of claims paid that exceed the stop loss limit. Rebate receivables represent prescription rebates for prior claims paid.

Payment of Benefits - Premiums paid by the Plan are recorded as premium payments in the accompanying statement of changes in net assets available for benefits. Claim payments are recorded when paid.

Administrative Expenses - Plan expenses are paid by the Plan, as provided by the Plan document. Expenses incurred in connection with the general administration of the Plan are recorded as deductions in the accompanying statement of changes in net assets available for benefits.

Actuarial Present Value of Benefit Obligations - Plan obligations at December 31 for medical and prescription claims incurred by active participants, but not reported at December 31, are estimated by the Plan's actuary in accordance with accepted actuarial principles. The actuarial present value of claims incurred but not reported (IBNR) is based on past paid claims data in order to develop an estimate of the percentage unpaid. Such estimated amounts are reported in Notes 4 and 5.

The foregoing assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of the benefit obligation.

Subsequent Events - In preparing these financial statements, the Plan has evaluated events and transactions for potential recognition or disclosure through April 23, 2025, the date the financial statements were available to be issued.

DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN

NOTES TO FINANCIAL STATEMENTS

NOTE 3 - FAIR VALUE MEASUREMENTS

Accounting standards provide a framework for measuring fair value. This framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements), and the lowest priority to unobservable inputs (Level 3 measurements).

The three levels of the fair value hierarchy under the accounting standards are described as follows:

Level 1 - Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 - Inputs to the valuation methodology include:

- quoted prices for similar assets or liabilities in active markets;
- quoted prices for identical or similar assets or liabilities in inactive markets;
- inputs other than quoted prices that are observable for the asset or liability;
- inputs that are derived principally from, or corroborated by, observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 - Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs, and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2024.

Money market funds, U.S. Treasury bills, fixed income funds, equities, balanced funds and alternative investments: Fair values are determined by reference to quoted market prices.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN

NOTES TO FINANCIAL STATEMENTS

NOTE 3 - FAIR VALUE MEASUREMENTS - CONTINUED

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2024:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Fair Value</u>
Money market funds	\$ 22,791	\$ -	\$ -	\$ 22,791
U.S. Treasury bills	4,170,205	-	-	4,170,205
Fixed income funds	3,656,096	-	-	3,656,096
Equities	1,032,472	-	-	1,032,472
Balanced funds	643,097	-	-	643,097
Alternative investments	101,794	-	-	101,794
	<u>\$ 9,626,455</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 9,626,455</u>

NOTE 4 - SUMMARY OF PLAN BENEFIT OBLIGATIONS

Amounts payable for claims incurred but not yet reported and claims payable are as follows:

Claims incurred but not yet reported	\$ 837,000
Claims payable	<u>359,125</u>
Plan's Total Benefit Obligations	<u>\$ 1,196,125</u>

NOTE 5 - SUMMARY OF CHANGES IN PLAN BENEFIT OBLIGATIONS

Amounts payable for claims incurred but not yet reported and claims payable are as follows:

Balance, beginning of year	\$ -
Transfer from other plan	2,391,130
Net change during the year	<u>(1,195,005)</u>
Balance, end of year	<u>\$ 1,196,125</u>
Plan's Total Benefit Obligations	<u>\$ 1,196,125</u>

DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN

NOTES TO FINANCIAL STATEMENTS

NOTE 6 - TRANSFER FROM OTHER PLAN

In August 2023, the Dental Practice Consortium, Inc. was formed. Effective December 31, 2023, the IDA Insurance Trust Plan was terminated. Effective January 1, 2024, the existing IDA Insurance Trust net assets, obligations and insurance coverages were transferred to the Dental Practice Consortium, Inc. Health Plan.

NOTE 7 - PARTY-IN-INTEREST TRANSACTIONS

As described in Note 2, the Plan paid certain expenses related to plan operations to various service providers. These transactions are party-in-interest transactions under ERISA.

NOTE 8 - PLAN TERMINATION

Although the Employers have not expressed any intention to do so, they have the right to discontinue participation in the Plan subject to provisions set forth in the Plan document and ERISA. In the event the Plan is terminated, the net assets of the Plan must first be distributed to pay claims of participants of the Plan and any and all obligations of the Plan. Remaining funds, if any, shall be distributed to the Employers pro rata based upon premiums paid to the Plan during the six month period prior to the termination action.

NOTE 9 - TAX STATUS

The Trust established under the Plan to hold the Plan's assets is not intended to qualify for a tax exemption under the Internal Revenue Code. The Plan has not been established to provide post-retirement medical benefits, and the Plan shall be construed and administered in a manner that it will not be subject to any tax imposed by Section 4976 of the Internal Revenue Code.

Taxable income is determined by calculating investment income less certain Plan expenses. Accounting principles generally accepted in the United States of America require the Plan Administrator to evaluate tax positions taken by the Plan and recognize a tax liability for any uncertain position that more likely than not would not be sustained upon examination by the IRS. Based on the results of the Plan Administrator's evaluation, no liability has been recognized in the accompanying statements of net assets available for benefits for uncertain income tax positions. The Trust is subject to routine audits by tax authorities; however, there are currently no audits for any tax periods in progress.

NOTE 10 - RISKS AND UNCERTAINTIES

The actuarial IBNR calculation is reported based on certain assumptions pertaining to health care inflation rates and employee demographics, all of which are subject to change. In addition, the Plan invests in various investment securities which are exposed to risks such as interest rate, market, and credit risks. Due to uncertainties inherent in the estimations and assumptions process as well as the level of risk associated with certain investment securities, it is at least reasonably possible that changes in these estimates, assumptions, and risks in the near term would be material to the financial statements.

DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN

NOTES TO FINANCIAL STATEMENTS

NOTE 11 - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits and the net decrease in net assets available for benefits between the financial statements and the Form 5500 for 2024.

Net assets available for benefits per Form 5500	\$ 9,140,520
Benefit obligations	<u>1,196,125</u>
Net assets available for benefits per the financial statements	<u>\$ 10,336,645</u>
Net decrease in net assets available for benefits per Form 5500	\$ (226,747)
Change in benefit obligations	<u>(1,195,005)</u>
Net decrease in net assets available for benefits per the financial statements	<u>\$ (1,421,752)</u>

NOTE 12 - SUPPLEMENTAL CONTRIBUTION FUND

At December 31, 2024, the balance in the Plan's supplemental contribution fund was \$4,171,201. The projected premium income for 2025, plus the Plan's supplemental contribution fund balance at December 31, 2024, is sufficient to cover the projected claims liability plus expenses for the Plan for 2025.

DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN

NOTES TO FINANCIAL STATEMENTS

NOTE 13 - IDOI MINIMUM FUND BALANCE REQUIREMENT

The Indiana Department of Insurance (IDOI) requires multi-employer welfare plans to maintain a minimum fund balance of \$500,000 determined as follows for the year 2024:

Fund balance, as defined by IDOI regulations

Assets

Cash - interest bearing	\$ 1,155,245
Investments at fair value	9,626,455
Stop loss and rebates receivable	750,484
Employer contribution receivable	9,269
Prepaid expenses	<u>19,871</u>
	<u>11,561,324</u>

Liabilities

Accounts payable	12,710
Claims payable	359,125
Premiums received in advance	1,211,969
Obligation for claims incurred but not reported	<u>837,000</u>
	<u>2,420,804</u>

Fund balance, as defined by IDOI regulations \$ 9,140,520

The Plan met the required minimum fund balance of \$500,000 at December 31, 2024.

DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

PLAN'S EMPLOYER IDENTIFICATION NUMBER: 93-2728089

PLAN NUMBER: 501

December 31, 2024

<u>(a)</u>	<u>(b)</u>	<u>(c)</u>	<u>(d)</u>	<u>(e)</u>
Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	Cost	Current Value	
Money market funds				
Morgan Stanley Bank N.A.	Money market fund	\$ 22,791	\$ 22,791	
U.S. Treasury bills				
United States Treasury Bill	Dated 7/18/24; due 1/16/2025	2,259,687	2,267,256	
United States Treasury Bill	Dated 8/1/24; due 1/30/2025	943,867	944,889	
United States Treasury Bill	Dated 8/8/24; due 2/6/2025	957,327	958,060	
		4,160,881	4,170,205	
Fixed income funds				
JPMorgan Exchange-Traded Fund Trust Limited Duration	Exchange-traded & closed-end fund	336,821	334,880	
JPMorgan Ultra-Short Income ETF	Exchange-traded & closed-end fund	388,267	388,856	
PGIM Short Duration High Yield Income Fund - Class Z	Mutual fund	1,493,206	1,427,145	
Lord Abbett Bond-Debenture Fund Class I	Mutual fund	171,295	149,639	
Lord Abbett Short Duration Income Fund Class I	Mutual fund	974,666	942,284	
Lord Abbett Ultra Short Bond Fund Class I	Mutual fund	408,766	413,292	
		3,773,021	3,656,096	
Equities				
Vanguard Mid-Cap Index Fund ETF Shares	Exchange-traded & closed-end fund	162,004	245,377	
Vanguard Small-Cap Index Fund ETF Shares	Exchange-traded & closed-end fund	81,708	120,621	
Adidas AG	Stock	2,930	2,953	
Adobe Inc.	Stock	2,860	3,734	
Advanced Micro Devices	Stock	2,066	3,334	
Airbnb, Inc.	Stock	3,651	3,535	
Alphabet Inc.	Stock	6,201	14,012	
Amazon.com, Inc.	Stock	13,389	30,056	
Analog Devices, Inc.	Stock	2,152	2,127	

DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) - CONTINUED

PLAN'S EMPLOYER IDENTIFICATION NUMBER: 93-2728089

PLAN NUMBER: 501

December 31, 2024

<u>(a)</u>	<u>(b)</u>	<u>(c)</u>	<u>(d)</u>	<u>(e)</u>
Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	Cost	Current Value	
Equities - continued				
Apple Inc.	Stock	8,078	20,391	
AppLovin Corporation	Stock	2,743	2,711	
Astrazeneca	Stock	2,209	2,159	
Boeing Co	Stock	6,623	5,886	
Broadcom Inc	Stock	4,596	19,529	
Cadence Design System	Stock	3,900	5,369	
Costco Wholesale Corporation	Stock	3,137	7,900	
Crowdstrike Holdings, Inc.	Stock	1,933	5,012	
Datadog Inc	Stock	2,586	2,998	
Dexcom Inc	Stock	1,484	1,640	
Eaton Corporation plc	Stock	3,513	3,650	
Edward Lifesciences Corp	Stock	1,859	1,833	
Eli Lilly and Company	Stock	2,354	9,001	
Flutter Entertainment PLC	Stock	2,330	2,246	
GE Aerospace	Stock	3,317	3,262	
Hilton Worldwide	Stock	3,180	3,581	
The Home Depot, Inc.	Stock	2,276	2,954	
Industria de Diseno Textil	Stock	1,707	1,479	
Intuitive Surgical, Inc.	Stock	2,163	4,192	
Marriot International, Inc.	Stock	1,094	2,116	
Mastercard Incorporated	Stock	5,457	9,162	
Meta Platforms, Inc.	Stock	9,132	19,370	
Microsoft Corporation	Stock	10,136	24,412	
Moody's Corporation	Stock	2,351	3,499	
Netflix, Inc.	Stock	4,976	14,317	
Novo Nordisk A/S	Stock	2,823	4,607	
NVIDIA Corporation	Stock	2,392	32,767	
Palo Alto Networks, Inc	Stock	2,433	2,665	
Progressive Corp	Stock	3,666	4,031	
Salesforce, Inc.	Stock	3,245	4,514	
ServiceNow, Inc.	Stock	4,574	8,948	
Snowflake Inc.	Stock	2,485	2,575	
Spotify Technology	Stock	3,862	3,705	
Tesla, Inc.	Stock	1,036	11,479	
The TJX Companies, Inc	Stock	1,097	2,250	
The Trade Desk, Inc.	Stock	1,580	4,115	
Uber Technologies, Inc.	Stock	2,200	3,988	
Vertex Pharmaceuticals	Stock	4,311	5,214	
Vertiv Holdings	Stock	2,808	2,859	
Visa Inc.	Stock	3,916	6,716	
Walmart Inc.	Stock	5,592	6,374	

DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) - CONTINUED

PLAN'S EMPLOYER IDENTIFICATION NUMBER: 93-2728089

PLAN NUMBER: 501

December 31, 2024

<u>(a)</u>	<u>(b)</u>	<u>(c)</u>	<u>(d)</u>	<u>(e)</u>
Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	Cost	Current Value	
Equities - continued				
Walt Disney Co	Stock	5,566	5,616	
Abbott Laboratories	Stock	3,549	3,715	
AbbVie Inc.	Stock	4,263	5,992	
Accenture plc	Stock	899	1,574	
Air Products and Chemicals, Inc.	Stock	5,225	6,188	
American Express Company	Stock	2,333	6,843	
Analog Devices, Inc.	Stock	3,066	5,768	
Apple Inc.	Stock	280	1,053	
Ares Management Corp	Stock	2,999	3,773	
Bank of America Corporation	Stock	7,130	9,142	
Bank of New York Mellon	Stock	2,057	1,974	
Becton, Dickinson, and Company	Stock	3,084	2,842	
BlackRock, Inc.	Stock	1,976	4,100	
Blackstone, Inc	Stock	3,882	4,849	
Bristol-Myers Squibb Company	Stock	6,651	5,995	
Capital One Financial Corporation	Stock	3,576	4,341	
Cencora, Inc.	Stock	703	1,821	
The Charles Schwab Corporation	Stock	5,099	6,882	
Chevron Corporation	Stock	6,242	6,491	
Chubb Limited	Stock	1,569	2,935	
CME Group Inc.	Stock	1,708	2,083	
CMS Energy Corporation	Stock	1,894	2,095	
The Coca-Cola Company	Stock	2,736	3,041	
Comcast Corporation	Stock	6,189	5,404	
ConocoPhillips	Stock	4,126	7,208	
Corning Inc	Stock	2,231	3,005	
CVS Health Corporation	Stock	3,586	2,402	
Deere & Company	Stock	3,703	5,781	
Dominion Energy Inc	Stock	4,060	3,470	
Dover Corporation	Stock	3,082	5,068	
Eaton Corporation plc	Stock	1,139	4,718	
Eli Lilly and Company	Stock	242	1,594	
EOG Resources Inc.	Stock	2,360	4,845	
Exxon Mobil Corp	Stock	2,689	4,230	
Gallagher Arthur J & Co	Stock	890	2,710	
General Dynamics Corporation	Stock	3,715	5,174	
Goldman Sachs Group	Stock	2,324	2,237	
The Hartford Financial Services Group, Inc.	Stock	356	694	
The Hershey Company	Stock	2,640	2,184	
The Home Depot, Inc.	Stock	3,278	5,137	

DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) - CONTINUED

PLAN'S EMPLOYER IDENTIFICATION NUMBER: 93-2728089

PLAN NUMBER: 501

December 31, 2024

<u>(a)</u>	<u>(b)</u>	<u>(c)</u>	<u>(d)</u>	<u>(e)</u>
Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	Cost	Current Value	
Equities - continued				
Honeywell Intl Inc	Stock	3,420	3,799	
International Business Machines Corporation	Stock	1,068	1,904	
Johnson & Johnson	Stock	4,839	4,791	
Lowe's Company, Inc.	Stock	5,424	5,900	
Marsh & McLennan Companies, Inc.	Stock	788	1,487	
McDonald's Corporation	Stock	3,760	5,047	
Medtronic plc	Stock	3,429	2,719	
Merck & Co., Inc.	Stock	2,160	2,289	
MetLife, Inc.	Stock	953	1,623	
Microchip Technology Incorporated	Stock	4,086	2,725	
Microsoft Corporation	Stock	1,890	5,166	
Mondelez International, Inc.	Stock	1,991	2,257	
Morgan Stanley	Stock	3,017	7,543	
NextEra Energy, Inc.	Stock	3,146	3,723	
Norfolk Southern Corporation	Stock	5,436	6,060	
Northrop Grumman Corporation	Stock	967	1,531	
NXP Semiconductors NV	Stock	2,065	2,467	
Parker-Hannifin Corporation	Stock	1,146	3,677	
PepsiCo, Inc.	Stock	2,166	2,382	
Philip Morris International Inc.	Stock	4,506	6,366	
The PNC Financial Services Group, Inc.	Stock	3,952	5,339	
PPG Industries, Inc.	Stock	1,811	1,813	
The Procter & Gamble Company	Stock	3,705	4,682	
The Progressive Corporation	Stock	598	1,949	
Public Service Enterprise Group Incorporated	Stock	1,860	2,631	
Republic Services, Inc.	Stock	605	1,465	
RTX Corporation	Stock	2,216	3,828	
Seagate Technology Holdings plc	Stock	2,133	2,299	
Texas Instruments Incorporated	Stock	3,228	4,537	
The Cigna Group	Stock	2,752	3,231	
The TJX Companies, Inc.	Stock	2,309	5,270	
The Travelers Companies, Inc.	Stock	1,706	2,222	
Truist Financial Corp	Stock	3,847	4,338	
Union Pacific Corporation	Stock	4,123	3,865	
United Parcel Service, Inc.	Stock	6,495	4,650	
UnitedHealth Group Incorporated	Stock	6,304	8,861	
Verizon Communications Inc.	Stock	2,521	1,749	
Walmart Inc.	Stock	1,764	4,074	

DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) - CONTINUED

PLAN'S EMPLOYER IDENTIFICATION NUMBER: 93-2728089

PLAN NUMBER: 501

December 31, 2024

<u>(a)</u>	<u>(b)</u>	<u>(c)</u>	<u>(d)</u>	<u>(e)</u>
Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	Cost	Current Value	
Equities - continued				
Wells Fargo & Co	Stock	7,144	11,098	
Xcel Energy Inc.	Stock	2,858	2,971	
Yum Brands	Stock	1,941	1,945	
		661,341	1,032,472	
Balanced funds				
American Funds The Income Fund of America Class F-2	Mutual fund	335,405	344,970	
JPMorgan Income Builder Fund Class I Shares	Mutual fund	323,674	298,127	
		659,079	643,097	
Alternative investments				
PGIM Global Real Estate Fund - Class Z	Mutual fund	119,010	94,678	
Alexandria Real Estate Equities, Inc.	Stock	1,485	958	
AvalonBay Communities, Inc.	Stock	1,380	1,443	
Ventas, Inc.	Stock	2,402	2,419	
Prologis, Inc.	Stock	2,491	2,296	
		126,768	101,794	
Total investments at fair value		9,403,881	9,626,455	
Cash - interest bearing				
BMO Harris Bank N.A.	Cash - interest bearing	\$ 28,363	\$ 28,363	
Merchants Bank of Indiana	Cash - interest bearing	1,126,882	1,126,882	
Total cash - interest bearing		\$ 1,155,245	\$ 1,155,245	

DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN

SCHEDULE H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS

PLAN'S EMPLOYER IDENTIFICATION NUMBER: 93-2728089

PLAN NUMBER: 501

Year Ended December 31, 2024

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Identity of party involved	Description of asset (include interest rate and maturity in case of a loan)	Purchase price	Selling price	Lease rental	Expense incurred with transaction	Cost of asset	Current value of asset on transaction date	Net gain or (loss)
N/A	Lord Abbett Short Duration 3 Purchases 3 Sales	\$ 568,489.00	N/A	N/A	N/A	\$ 568,489.00	\$ 568,489.00	\$ -
		N/A	\$ 907,000.00	N/A	N/A	\$ 983,523.00	N/A	\$ (76,523.00)

Employer EIN	Practice Name	% of Revenue
76-0812923	Quest Johnson Orthodontics	0.0391%
35-1876574	Root Canal Specialty Services, Inc.	0.0154%
35-2071774	Monesmith & Wood Oral Maxillofacial Surgery, PC	0.1886%
27-0563008	Really Smile Dental	0.0793%
35-1614830	Philip J. Cascione, DDS	0.1229%
20-1938865	Dr Malcolm C George - Smiles on 146th St	0.0763%
01-0740094	Evansville Endodontics	0.1296%
35-2063635	Dr. JT Christie, DDS	0.1470%
35-1387843	Elkhart Oral Surgery	0.2313%
35-1614083	Spauldings Dental Office	0.0800%
35-1517133	OMS Center	0.2335%
31-1256814	Marcus Malczewski, DDS	0.0218%
35-2050377	Martell Polite Dental	0.1353%
35-1906316	Kluth Family & Cosmetic Dentistry	0.0919%
26-999993	Cave & Cave Family Dentistry	0.0413%
35-1974527	Liberty Family Dentistry	0.1485%
30-4045954	Derek Garcia DMD	0.0864%
35-1814507	Greenfield Dental Health Care, PC	0.0707%
35-2061487	Galanos Family Dental Care	0.1408%
35-2043739	Dr Desiree Dimond DDS	0.1052%
35-2005758	Mark Sitzman, DDS	0.0519%
35-2118688	Dr. Gary L. Bacon, DDS	0.0630%
45-5534782	Cynthia Hovey, DDS	0.1296%
35-2139790	Northeast Orthodontics	0.1032%
35-1981527	Associated Dentists	0.2733%
35-2067706	Endodontic Specialist	0.1525%
35-2124187	Dr Jeffrey Allen	0.1282%
26-3489467	Mattingly Family Dentistry	0.0877%
35-2165854	Richard A. Poe Family Dentistry	0.0666%
35-2026695	Steven R. Wert DDS, PC	0.1216%
30-6789184	Karwick Dental	0.2608%
20-3059577	Dunn Orthodontics	0.0947%
35-1755377	Wabash Valley Dental Group	0.0241%
45-4135088	Bedford Dental Care	0.2798%
35-2139790	Walker-Dixon Orthodontics	0.1119%
35-2119230	The Extra Smile, PC	0.1624%
35-1970302	Erskine Family Dentistry	0.1259%
35-1995668	Valerie Bastin, DDS, PC	0.0785%
43-1953883	Southern Indiana Endodontics	0.1045%
30-7486905	Gregory R Busing, DDS	0.0697%
35-2122570	Ortman Family Dental	0.1109%
35-1462294	Laura B. Graham, DDS	0.0499%
35-2155829	Douglas Stanley, DDS	0.0685%

35-1632834	Ridgewood Dental P C	0.0229%
20-0547219	Thomas M Pedavoli DDS Inc	0.3533%
35-1640729	Wakarusa Family Dentistry	0.0558%
35-1956812	Matthew Stegemiller, DDS, PC	0.0427%
27-4967803	Family Dentistry of Wabash	0.1340%
54-2098302	Hulen Family Dentistry	0.1168%
35-1750278	Linwood Family Dentistry	0.2171%
35-1915904	Bruce P Beniefiel	0.1539%
20-0467346	All Smiles Dental	0.0888%
35-2050363	University Avenue Dental	0.1926%
27-4218106	Dr. Charles A Hurst, DDS	0.2782%
20-2727851	McCabe Orthodontics, PC	0.1620%
13-4213273	Rosenthal Orthodontics	0.1354%
35-2034703	Dr. Brian J. King, DDS	0.1446%
01-0740094	Evansville Endodontics	0.1536%
35-2095178	Dr Joseph R Gregg DDS	0.1334%
35-2071774	Kyley A. Wood, DDS	0.1803%
35-1643516	Timothy Adams, DDS	0.0918%
35-1813478	Little Smiles	0.1793%
35-1738191	Robert Loudermilk, DDS	0.1919%
35-2107688	Contemporary Dental Concepts	0.2548%
54-2098302	Hulen Family Dentistry	0.2305%
35-2192666	Fort Wayne Dental Group	0.1458%
27-1238552	Newburgh Smile Center	0.1109%
35-2124187	Ellettsville Dental Center	0.2413%
27-4288682	Meridian Dental Center	0.0536%
35-1428542	Gebfert-Park Family Dentistry	0.1703%
30-8987167	Indiana Periodontics & Dental Implants	0.1508%
30-6948792	Lanie Family Dentistry	0.0782%
75-3208519	Kerry R. Knape, DDS	0.0450%
35-1993663	Carla K. Brink DDS PC	0.0613%
35-1175152	Coghlan Orthodontics, Inc.	0.1692%
35-1874617	H. Clark Brewer, DDS	0.1127%
27-4401794	Dr. Todd A. Carter, DDS	0.1738%
35-2023226	Leland C. Wilhoite, DDS, PC	0.2456%
30-0394909	Dr. Craig L. Mitchell DDS	0.2225%
35-1409815	Northwood Family Dentistry, Inc.	0.1228%
35-2082848	Luke Staley, DDS	0.0990%
65-1276095	Randall K. Brown, DDS, MSD, PC	0.1720%
35-1990702	J Donald Summerlin II DDS	0.1073%
14-1895989	Martin Orthodontics (Evansville)	0.2582%
35-2024399	Coulter Family Dentistry	0.2673%
35-1933176	Dr. Thomas P. Sodano, DDS	0.1814%
31-0762391	Dr David M Smith DDS	0.1174%

83-0358732	Rebecca P Bolon DDS, MSD, PC	0.3200%
31-5602991	Dr. Laura M. Arnold, DDS	0.1163%
35-2127620	Goshen Family & Cosmetic Dentistry, Inc	0.0769%
35-1771246	Allure Dental	0.0123%
35-2049336	Oyler Family Dentistry	0.0990%
35-2206184	Pediatric Dentistry of Noblesville	0.1298%
61-1433619	Newburgh Family Dentist	0.1613%
35-2001364	Fishers Family Dentistry, PC	0.1218%
35-1666275	Catton Dentistry	0.1797%
35-2093655	Leonard F. Anglis, DDS	0.0968%
35-2208921	Stony Creek Orthodontics	0.3221%
35-1287279	Wesley R. Mark, Inc.	0.1776%
86-0775986	North Park Dentistry	0.1096%
35-1979945	SLC Dentistry	0.1514%
35-2077317	Curtis Orthodontics	0.1923%
35-1995668	Dr. Valerie A. Bastin, DDS, PC	0.0890%
35-2075808	Wabash Valley Endodontics	0.1525%
35-1899569	Glendale Family Dentistry	0.0754%
35-2103180	Paul B. Glass, PC	0.0754%
35-2078271	Oral & Maxillofacial Surgery	0.1071%
31-2704165	Dr Tammy Hiester DDS	0.0918%
20-0396389	Premier Family Dental	0.1176%
35-2150104	Jeffrey J. Robertson, DDS	0.1903%
47-0891238	Comfort Dental Care	0.1827%
35-1771276	Kenton Bailey, DDS	0.1466%
22-3864996	Cavanaugh & Nondorf Orthodontics, PC	0.1132%
35-1462843	Roshel Family Dentistry	0.0919%
35-1961059	Dale Family Dentistry	0.1099%
35-2062793	Pawlak Orthodontics	0.1078%
35-1587572	Dr. Michel J King, DDS	0.0968%
26-1809369	Churubusco Family Dentistry	0.3743%
35-2083206	David L VanWormer, DDS PC	0.0951%
20-0059052	Cook Orthodontics, PC	0.0820%
35-2001515	James. D. Hughes, DDS	0.0386%
35-1905104	Oral Surgery Office, LLC	0.2424%
35-1945718	Laconi Dental	0.2020%
35-2056797	Braces for All Ages, PC	0.0729%
35-2034363	Dewald Northeast Dental Group	0.1445%
26-3858483	Pritchett Orthodontists	0.2653%
26-2665002	Periodontic Specialists	0.1801%
16-1648485	Dr Scott P Wilson DDS	0.0843%
30-0688254	Dr. Jeffrey L. Gore, DDS	0.1746%
35-1298797	Columbus Oral & Maxillofacial Surgery	0.3055%
35-1701119	Airport Road Dental Assoc	0.1957%

35-1882645	Johanna K Manous DDS	0.1621%
31-4648080	Christopher W. Schultz, DDS	0.1364%
20-0951935	Toni Sartini, DMD, FAGD	0.1025%
35-1902500	Eric J. Ladd, DDS	0.1342%
35-1605128	Dr Deanna O'Neil DDS - South Bend Children's Dentistry	0.0400%
35-1891485	Willhite Family Dentistry	0.1683%
35-1874035	Jansen Family Dentistry	0.1098%
35-2090666	Edgewood Dental	0.0690%
31-5602991	Thomas G. Kaeuper, DDS	0.0850%
35-2120621	Robert E. Barker, DDS	0.1406%
35-1956966	Ripley Orthodontics	0.1784%
35-2002461	Avon Orthodontics	0.2019%
26-1370216	Kenneth E. Didat, DDS	0.0708%
32-0032394	Fawcett Family Dentistry	0.0857%
31-0340726	Dr. Robert J. Mattern, DDS	0.1068%
35-1971318	Randy A. Stauffer, DDS, PC	0.0851%
35-1944807	Friendly Family Dentistry	0.2790%
54-2188705	Powers Orthodontics	0.0737%
35-2003858	Franklin Street Dentistry	0.1322%
20-2250668	Michael S Walker, DDS PC	0.1435%
20-5518622	Implant Dentistry & Periodontics	0.1434%
46-5611810	Hanson Family Dentistry	0.1110%
35-2063048	Periodontal Associates	0.0552%
35-2032860	Noblesville Oral- Maxillofacial	0.2221%
62-1325117	Dr Carol J Braun	0.0386%
47-2642642	Evansville Main Street Family Dental	0.1060%
31-6745750	David Regan, DDS	0.1120%
90-0000825	Downtown Dental Huntington	0.1928%
35-1844345	Dr Desiree Dimond DDS	0.0963%
35-1908979	Huntington Dental Group	0.1514%
35-2148549	Steven L. Herr, DDS	0.2364%
92-0435391	The Dental House	0.0900%
35-2019626	Carmel Orthodontics	0.1456%
20-2819140	Troutman Family Dentistry	0.1056%
35-1758917	David H Wolf DDS Family Dentistry PC	0.1356%
42-1550347	Dr. Randy E. Vollmer, DDS	0.1133%
35-1645296	Michael A. Jester, DDS	0.1002%
20-2017354	Harrison Dental Group	0.0235%
35-1683581	Rodney J. Eccles, DDS	0.1461%
35-1462367	Hearn Family Dentistry PC	0.0407%
35-1775770	Dr Todd Whitlock DDS - Todd Whitlock Dentistry	0.2197%
3200001245	Declaration Dental	0.2192%
35-2144113	South Central Oral Surgery	0.1156%
36-3405493	Jeffrey A Bona DDS	0.0900%

36-4467457	Crown Point Dental Care	0.2617%
36-3558813	Daniel J. Rak, DDS	0.1788%
35-2137243	Natalie A. Roy, PC	0.0941%
35-2021041	McGue Dental PC	0.1937%
35-1299299	Virgil J Gassoway DDS	0.0902%
46-1125127	Dagmar Colon DDS PC	0.1860%
32-0033421	Watkins Family Dentistry	0.1474%
30-0314585	McDonald Family Dentistry	0.1285%
27-2435928	Mill Creek Family Dental	0.1037%
35-2011772	Carmel Dental Care	0.3774%
35-1299984	Dentistry By Design	0.1553%
30-0141348	Melissa A. Jarrell, DDS Family & Cosmetic Dentistry of Kokomo, PC	0.0670%
35-1298797	Columbus Oral & Maxillofacial Surgery	0.2938%
20-3833136	Arlington Dental Group	0.1770%
35-1858434	Dr. Edmund L. Rapp, DDS	0.1980%
35-1970302	Dr. Steve Wong Orthodontics, PC	0.1658%
60-4746031	Dr Yuliya Pinksaya, DDS	0.1789%
35-2149267	Crooked Creek Family Dental	0.1015%
35 2103435	Riverstone Dental	0.1234%
35-2003209	Stahly Family Dentistry	0.1455%
20-2702413	Scheele Orthodontics, Inc.	0.0732%
20-3582708	Parker City Family Dental	0.0856%
20-3847892	Michael H Min, DDS PC	0.2395%
35-2122570	Ortman Family Dental	0.1602%
20-1253103	Knightstown Dental	0.2174%
35-2134281	Lesley Kizior, DDS	0.1083%
20-1000295	Central Indiana Endodontics	0.0971%
20-8355931	Tiek Dental Studio	0.1706%
35-2126860	Dr. Scott Grasso, DDS, PC Family Dentistry	0.0891%
35-2172159	David B. Moore, DDS	0.0741%
26-1616310	Wells Marvel & Hall Family Dentistry	0.1388%
35-2031651	James K Homrighausen DMD	0.1369%
27-0377935	Reliant Family Dental	0.1092%
20-5945563	Dr. Matthew A. Butler, DDS	0.1496%
80-0593471	Ammar Louly, DDS-MSD	0.1148%
45-3359687	Sonya A Shively DDS, PC	0.0891%
26-2131160	Brown Family Dentistry	0.0711%
31-3021262	Tecumseh Dental Center	0.1730%
30-0024014	Steven L Farnsley, DDS, PSC	0.0636%
22-3864996	Cavanaugh & Nondorf Orthodontics, PC	0.1133%
46-5097655	Susan L Royer, DDS	0.1746%
45-3693899	Gove Family Dentistry	0.1428%
20-5728449	Bethany J. Geyman, DDS	0.3033%
35-1847909	Dwight B. Lee, DDS	0.2483%

61-1586776	Robert A. Gausman, DDS	0.0853%
45-2987500	Noble Creek Family Dentistry	0.0821%
27-1872049	Sauer Dentistry of Center Grove	0.2918%
46-1754998	Baron Hall, DDS	0.1026%
20-1938865	Smiles on 146th Street	0.1779%
30-3024278	Peru Dental Care	0.1250%
73601834	Walker Oral Surgery	0.0847%
35-1672087	Bailey & Wright Dentistry	0.0833%
35-2063635	Christie Family Dentistry	0.1631%
35-1693151	David P. Krause, DDS	0.1089%
26-0564480	Avalon Dentistry	0.3290%
35-1399233	All In The Family Dental	0.0799%
31-7781581	Advance Dental Concepts	0.2406%
26-0342481	Jay Ryan, DDS, PC	0.0483%
38-3720068	Avon Family Dentistry	0.0249%
26-2287317	Elizabeth Miller, DDS	0.1374%
46-2917744	Growing Grins Pediatric Dentistry	0.0741%
20-5226036	Curt A. Warren DDS Endodontics, PC	0.1445%
16-1627582	Smiling Kids Pediatric Dentistry	0.1090%
35-2206184	Pediatric Dentistry of Noblesville	0.1222%
26-2885795	Borden Family Dentistry	0.1325%
01-0560236	Auburn Dental Associates	0.1313%
31-2943112	Judd Family Dentistry	0.0942%
31-7900219	McQuinn Family Dentistry	0.1180%
26-2818300	Kolman Dental, PC	0.0892%
35-1671908	John R Williams DDS	0.1755%
31-7921888	Dentist on the Park	0.0379%
35-2101995	Chad L. Bailey, DDS	0.0567%
35-2121744	Jeffrey T. Harmon, DDS	0.2308%
26-3740698	Titus Dentistry	0.0903%
35-1357506	Canida Dentistry	0.0929%
92-0656457	Reifeis Oral Surgery	0.0942%
26-1948849	Jonathan S. Burke, DDS, PC	0.1408%
46-2338356	Naperville Crossings Dental	0.0584%
26-3615716	Mohrman Family Dental	0.1037%
35-2033398	Randy P. Banic, DDS	0.1150%
20-3740512	Mary Seelye Parker, DDS	0.1122%
45-4625102	Barco Family Dentistry	0.1400%
27-4313567	Family Dentistry	0.1413%
27-2844741	Sarver Family Dental	0.1027%
35-2133228	Tecumseh Dental Center	0.1056%
35-2047740	James T. Wolfe, DDS, MSD	0.1201%
30-4643012	Brett Mann DDS, PC & Associates	0.1533%
27-2129508	Indy Dental Health	0.1377%

35-1974527	Liberty Family Dentistry	0.1590%
20-8419122	Salazar Family Dental	0.0947%
45-3078947	Jeremy L. Henn, DDS	0.0804%
35-2157586	Joseph Majka, DDS, PC	0.0552%
35-2094424	Jeffrey A. Huyvaert, DDS	0.0947%
26-0330502	Lynn Karr, DDS: Pediatric Dental Care	0.0986%
47-0983447	Periodontics & Implant Dentistry	0.0614%
45-2602974	Richmond Oral Surgery Associates Acq., LLC	0.1324%
36-4164523	The Centre for Contemporary Dentistry	0.1813%
20-2098042	Jay E. Cowan, Inc.	0.1783%
27-4524872	Crawfordsville Oral Surgery Group	0.1697%
20-3055853	A New Smile Dentistry	0.0842%
26-0152215	Just for Kids	0.1085%
27-3064729	Mosser Family Dentistry	0.0455%
35-1945754	Gentle Dental Family Care	0.0746%
90-0000825	Downtown Dental Huntington	0.2281%
47-3513010	Hott Family Dentistry	0.1923%
35-1806872	Munden Family Dentistry	0.1047%
37-0988888	Kokomo Pediatric Dentistry	0.1453%
45-5437108	Frazee Family Dentistry	0.1887%
35-1662581	Smiles By George: George E. Kirtley, DDS	0.0858%
35-2144282	Catey Williams Dental	0.0816%
20-2224136	Angola Dental Center	0.1403%
26-3999993	Cave & Cave Family Dentistry	0.0525%
87-2208216	24/7 Dental	0.1139%
27-4901687	Southern Indiana Pediatric Dentistry	0.1747%
45-4077827	Bryan T. Welch, DDS, PC	0.0933%
46-2818489	Crown Hill Dentistry	0.0675%
45-1064880	Steele Pediatric Dentistry	0.0899%
46-4381991	Zundo Family Dentistry	0.1367%
37-1423148	Plainfield Family Dental	0.2924%
35-2054171	Oral Surgeons of Indiana	0.1328%
27-1174031	Detailed Dental	0.1116%
27-4702145	Fall Creek Family Dental	0.1254%
47-3366172	Region Dental	0.0319%
45-3744657	John W. Bailey Jr., DDS, LLC	0.1603%
27-3416873	Greenfield Periodontics & Implant Surgery	0.0551%
27-5076888	Angel Smiles Dental	0.1865%
45-2967813	Tri-Creek Family Dentistry	0.0438%
26-3351523	Bailey Family Dental	0.1746%
20-2035371	Newman Family Dentistry	0.1564%
35-1685328	Ball Dentistry	0.1660%
06-2707166	Lafayette Family Dental, PC	0.1489%
20-3219603	Weddell Pediatric Dental Specialists, LLC	0.0535%

33-7785517	Kirsch Family Dentistry LLC	0.0663%
47-2725998	Eric J. Suding, DDS	0.1119%
45-4311755	Chapman Dentistry	0.1195%
35-1315394	Kokomo Endodontics/ Hamilton County Endodontics	0.0806%
46-1887148	G Orthodontics: Ann Z Granicz, DMD, PC	0.0309%
45-3245241	Gentle Care Family Dentistry	0.1313%
35-1454229	Rockville Dental Clinic	0.1418%
35-1454229	Rockville Dental Clinic	0.1446%
46-3561444	Salkeld Family Dental, LLC	0.1283%
27-4675565	Dental Oasis	0.1164%
20-2224136	Angola Dental Center	0.1072%
46-3282424	Family Dental Innovations	0.1636%
27-3027235	Middleton Family Dentistry	0.1043%
35-2002207	Charles W. Bartholomew, DDS	0.0318%
82-0556824	Parsons Dentistry	0.0790%
35-2064036	Richard A. Evanseck, DDS, PC	0.0649%
45-5276222	Northeast Oral & Maxi Sur	0.0837%
20-8277451	Willig Dentistry P C	0.1937%
31-1788199	Martine Dental	0.1349%
27-3652638	Nicholson Family Dental, LLC	0.1082%
47-1295733	Dr. Kathryn S. Krause, DMD	0.0993%
35-1461208	Angela Becker Orthodontics	0.1071%
46-4227328	Springer Dental Care	0.0942%
35-1984363	Puntillo & Crane Orthodontics	0.0924%
20-1808830	First Impressions Family Dental Care	0.1900%
35-2194620	Frank Edge Pediatric Dentistry	0.1038%
32-0069022	OMI Orthodontics	0.0831%
35 2251662	Noel G Garcia DDS, PC	0.2149%
45-2383150	Whitney M. Richmond, DDS	0.1298%
56-4478645	Madison Family Dentistry	0.1750%
46-3923134	Philip H. Schwenk, DDS, PC	0.0901%
26-0721913	Edison Lakes Oral Surgery PC	0.1392%
47-1707690	Czarkowski Pediatric Dentistry	0.1638%
26-3777098	White River Dental	0.1317%
35-1687491	Griffith Family Dentistry	0.0986%
46-5169681	Rick A. McAdams, DDS	0.1071%
36 4554703	Advanced Family Dentistry of Muncie	0.0981%
46-3877877	Monon Family Dental	0.1352%
31-3985271	Michigan City Dental, PC	0.0165%
20-2122579	Herman Family Dentistry	0.1319%
46-0917428	Terre Haute OMS	0.1757%
27-4496373	Village Dentistry	0.0381%
31-6314455	North Vernon Family Dental	0.0921%
26-4354023	Jeffrey R. Sarbieski, DDS	0.1586%

46-1554882	Meredith Gray, DDS	0.1012%
35-1553533	James M. Lipton, DDS Inc.	0.0631%
27-4683061	Marion Orthodontics	0.0964%
27-0195494	Wagner Family Dental	0.0547%
35-1165907	Stetzel Dental Group	0.0488%
46-0682512	Zent Family Dentistry	0.1316%
45-4247751	Cornils Family Dentistry	0.1224%
27-2434506	Dupont Orthodontics	0.1663%
35-1672087	Bailey & Wright Dentistry	0.1224%
40-5863855	Wells Orthodontics	0.1125%
47-1162295	Indianapolis Periodontal & Dental Implant Associates	0.0259%
30-4114662	Beck Dental Center PC	0.0452%
35-1988754	West 10th Dental Group	0.0675%
26-1370216	Kenneth E. Didat, DDS	0.0834%
35-1165358	Dental Health, PC	0.1286%
26-0390958	Newburgh Family Dental	0.0699%
46-1305500	Joseph W Keck, DDS	0.1186%
35-1672087	Bailey & Wright Dentistry	0.0911%
35-1587572	Dr. Michel J King, DDS	0.0858%
35-1779477	Lesley K Gilbert, DDS LLC	0.0722%
46-1555144	Garrett Family Dentistry	0.0361%
35-1822228	AAC Orthodontics	0.1214%
06-1682404	John B Valesano DDS LLC	0.0587%
27-3514479	Alexander Dentistry	0.0567%
20-3582708	Friedman Family Dentistry	0.1022%
35-2134296	Rockville Road Family Dentistry	0.0599%
35-1899569	Glendale Family Dentistry	0.0367%
26-3914840	Endodontic Services, Inc.	0.1292%
57-1143593	Cornerstone Family Dentistry	0.1071%
56-2300421	Evansville Pediatric Dentistry	0.1643%
62-1549295	S C Cheesman DDS PC	0.1201%
35-2127417	Alvarez Dentistry	0.0383%
35-2102737	Comfort Dental of Lafayette	0.0806%
35-1315394	Kokomo Endodontics	0.1039%
27-3116834	Andrew D. Shephard, DDS, LLC	0.0969%
46-3877877	Monon Family Dental	0.0907%
35-2144260	Bloomington Pediatric Dentistry	0.0820%
20-2224136	Angola Dental Center	0.1623%
31-2629068	Newburgh Oral Surgery	0.1215%
81-4621937	Cross Pointe Dental	0.0776%
35-2041718	Mark Barr, DDS	0.1071%
26-2015640	Gossweiler Dental Care	0.1895%
35-2220448	Helen S. Kirscher, DDS, MAGD, PC	0.0585%
35-1272551	Jarrell Orthodontics	0.0688%

35-2034149	Southside Surgery Center	0.1694%
11-3821778	Fleming Family Dental	0.1022%
35-1263282	Royale Family Dentistry	0.0289%
35-2118688	Dr. Gary L. Bacon, DDS	0.1383%
38-3666091	Midwest Endodontics	0.2633%
35-1575172	Green Dental	0.1267%
35-2149267	Ross Flannagan, DDS	0.1033%
35-2143529	Avon Dental Center: Timothy Greer, DDS	0.2127%
47-4472354	Evan Hipp DMD PC	0.1218%
46-3896994	Michael J Reider DDS	0.0951%
30-6157935	Carmen Paez de Mendoza DDS	0.0696%
47-4171543	Parker Dental	0.0864%
20-5983344	Altschul Orthodontics	0.1058%
35-2144260	Bloomington Pediatric Dentistry	0.1081%
35-2019250	Michael D Adkins, DMD, MS, PC	0.1103%
52-8371061	Anderson Oral & Maxillofacial	0.1397%
35-1907515	Northside Endodontics	0.1032%
35-1862964	Walker Family Dentistry	0.1722%
35-1742017	Kent A Cammack DDS	0.0657%
35-2156638	Dr Mark F Sills DDS, PC	0.1187%
42-1545656	South Bend Family Dentistry PC	0.0804%
32-0109421	Smile Arts Dental	0.0923%
35-2000044	Jeffrey T Allen DDS PC	0.2480%
35-1679591	Hughes Orthodontics LLC	0.0639%
46-2023197	Sedation Dentistry of Fort Wayne	0.1723%
32-4824625	David A Fried	0.0266%
45-5370032	Advanced Family Dentistry	0.1448%
35-2137444	Joseph R Meek DDS PC	0.2095%
27-1524064	Northeast Oral & Maxi Sur	0.1498%
1053676684	Jason M Kuester DDS	0.0791%
26-3489467	Mattingly Family Dentistry	0.0512%
35-1528542	Gebfert-Park Family Dentistry	0.0810%
44-8844794	Dupont Family Dentistry	0.1057%
81-3626602	South Shore Smiles	0.0793%
27-5312030	Fairmount Family Dentist	0.0648%
47-4554023	Raymond M Maddox, DDS	0.1189%
30-4964763	Bloom Dental	0.0390%
1811300270	Sand Creek Dental	0.1312%
35-1928131	Thomas K Nasser DDS	0.0633%
81-0784554	Sycamore Hills Dentistry	0.1043%
35-2033892	Accent Dental	0.1138%
35-1605980	Donald W White DDS	0.0436%
35-1835945	Joesph E Kinder DDS	0.0792%
32-0509966	Periolat Family Dentistry	0.0540%

47-4677311	Dr Nicholas W Giesler DDS	0.0872%
35-7944486	Fort Wayne Oral Maxillofacial Surger	0.0166%
35-2034413	French Family Dentistry	0.1329%
31-4948837	Fort Wayne Pediatric Dentistry	0.0982%
20-2183765	Blue River Dental Care	0.0711%
27-3216093	Zionsville Dentistry PC	0.1172%
81-2325451	Butler Family Dentistry	0.0700%
45-2677761	Excel Dental Studio	0.1564%
30-7045663	Emhardt Pediatric Dentistry	0.1571%
20-8487600	Haas Dental Center PC	0.1155%
36-3886552	Charles H Goodman DDS MS	0.0703%
45-4617868	Jones Family Dental	0.1307%
35-2032598	Dunn Family Dental Care	0.0980%
47-1730034	Hoosier Pediatric Dental Group LLC	0.0962%
27-3194732	Joseph R Meek DDS PC	0.1308%
46-1777094	Teverbaugh LLC dba Teverbaugh Dental	0.1309%
35-2010354	R Keith Rooney DDS PC	0.1297%
27-3111579	Albany Dental Care	0.1032%
35-2086990	Comfort Dental of Anderson	0.1329%
26-2968320	Hecht Family Dentistry	0.0586%
32-0045632	Comfort Dental of Ft Wayne	0.0781%
47-3991660	Jasper Family Dentistry	0.0733%
60-0843027	Hemphill Dental	0.0878%
31-4748434	Geist Oral and Facial Surgery	0.0523%
31-3080011	Smile Arts Dental	0.0148%
00-4929399	Summit City Smiles	0.0832%
81-4159728	Lafayette Orthodontics	0.1284%
35-2034196	Scott T Rosenfeld DDS	0.0517%
81-4742987	Martinez Dentistry	0.1079%
46-1603613	North Meridian Dental Excellence	0.1778%
82-1501571	Campus Family Dental	0.1283%
45-3706512	Nicas G Yiannias DDS PC	0.1241%
35-1614267	Dr Cindy Kirby DDS	0.0377%
32-0042943	Chris D. Kinney, DDS	0.1119%
27-4496373	Village Dentistry	0.0791%
27-3003027	Kenneth Dilger II DDS	0.1253%
20-4992340	Tamara Eaton DDS	0.0539%
20-8943198	Warsaw Family Dentistry	0.1623%
35-1811100	North Main Dentistry	0.1811%
34-2063757	Hugh P Seller DDS PC	0.0451%
30-3984692	Vale Park Dental Care	0.1201%
20-1662332	Dental Care LLC	0.0701%
47-3724022	Grabill Family Dentistry	0.0586%
46-2651442	Druley Dental	0.0982%

30-8067520	Precision Dental Center	0.0192%
47-2249595	Challgren Dentistry	0.1100%
81-1910125	Booe Pediatric Dental	0.1142%
46-2080924	Ellis Family Orthodontics	0.1457%
35-2071536	Brazil Family Dentistry	0.1029%
35-1847141	Fisher Dental	0.1077%
35-1991403	Comdent Dental	0.3715%
35-1907879	Steve Douglas DDS	0.2308%
26-1860188	Fort Wayne Endodontics	0.0827%
27-1333301	William S Frounfelter DDS	0.0860%
35-1906836	Brett Mann DDS, PC & Associates	0.2433%
35-1906639	Mark A Sutor DDS MSD	0.0989%
82-2846823	Kentuckiana Dental Group Two LLC	0.0202%
35-1516087	Lieske and Nondorf Family Dentistry	0.0821%
01-0759089	Adolescent and Pediatric Dentistry P C	0.1071%
35-1694034	Marr and Thompson Dental Group PC	0.1278%
82-2435035	Hale Family Dentistry	0.1189%
30-7744314	Jill Reitmeyer DDS	0.1684%
72-9091134	Brookside Dental Care	0.0821%
35-1618366	Patrick L Dunigan DDS	0.0314%
27-0300074	Shorey Family Dental	0.1546%
25-6279355	Michael A Davis DDS Family Dentistry	0.1774%
26-3777098	South Indy Dental	0.0376%
90-0914480	Dr Jason R Au-Yeung DDS	0.0800%
82-3199448	Millikan Dentistry P C	0.1230%
46-3774273	Rachel Harvey DDS	0.0952%
47-3857534	Roberts Dental Group LLC	0.1400%
35-2115072	J Clayton Callaway DDS	0.1489%
47-3722047	Jackson County Dental	0.0491%
35-2153468	North Point Pediatric Dentistry	0.0111%
82-3108755	Kinsler Family Dentistry	0.0774%
31-5683547	Dentistry of Indiana	0.1353%
46-4818141	Precision Dental Center	0.1027%
31-1487394	Fryar Orthodontics	0.0600%
31-0115035	C Darrell Deem DDS	0.0129%
36 4554703	Advanced Family Dentistry of Muncie	0.0560%
35-2062907	Dental Care today, PC	0.0730%
82-1350846	Shakamak Family Dentistry	0.0229%
82-1529383	Dyer Family Dental	0.2024%
83-0941325	Ridgewood Dental P C	0.0807%
81-4886330	Park Pediatric Dentistry	0.0320%
34-2063757	Seller Dentistry PC	0.1268%
22-3902360	Lorie G Brinson DDS PC	0.0610%
42-8732408	Jacob Yager DDS LLC	0.1645%

35-2115969	Lafayette Pediatric Dentistry & Orthodontics	0.0965%
47-1180915	Campano Family Dentistry	0.1339%
27-2844741	Sarver Family Dental	0.0216%
46-5562188	Lisa Leniski DDS MSD LLC	0.1090%
35-1843139	Taylor Family Dentistry	0.0307%
31-7769195	J Todd Campi DDS	0.1214%
47-3724022	Grabill Family Dentistry	0.0967%
35-1874035	Jansen Family Dentistry	0.0727%
35-2230465	Trafalgar Family Dentistry	0.1963%
35-2257469	Dr Alex Pfau	0.1418%
35-1694034	Marr and Thompson Dental Group PC	0.0618%
30-0604881	Joseph W Cochran DDS PC	0.0043%
26-2005303	Shelbyville Family Dental	0.0768%
81-0784554	Scheumann Dental Associates	0.0962%
35-1605128	South Bend Children's Dentistry PC	0.0762%
87-0698500	The Dental Center of South Bend	0.0967%
35-2054171	Starr Oral Surgery LLC	0.1427%
47-2642642	Evansville Main Street Family Dental	0.1211%
35-1184163	Speedway Pediatric Dentistry	0.0284%
14-1999336	Eagle Creek Childrens Dentistry	0.1643%
20-5854337	Santa Claus Family Dentistry	0.0820%
26-1860188	Fort Wayne Endodontics	0.0810%
46-0896065	Indy Aesthetic & Implant Dentistry	0.1236%
46-3561444	Salkeld Family Dental, LLC	0.0785%
29-5821802	Broadway Dentistry	0.0509%
01-0565332	Carmel Distinctive Dental	0.0754%
86-2987836	Mentone Dental	0.0936%
81-3641474	Mitthoeffer Family Dental	0.0802%
82-5300732	Tri-State Prosthodontics	0.0878%
20-0094473	Hayes & Mead, PC	0.1355%
35-1925142	Michigan City Dental, PC	0.0649%
35-1903202	Gentle Family Dentistry PC	0.0731%
84-4676051	Kenfield Dental Group LLC	0.0404%
46-3406663	Aegis Dental Group	0.1689%
35-2005758	Mark Sitzman, DDS	0.0488%
35-2077077	Fall Creek Dentistry	0.2085%
85-3363625	Warrick Park Dental	0.0648%
46-1555144	Garrett Family Dentistry	0.0690%
35-1485909	Ashcraft Orthodontics	0.0941%
35-1585067	Scheumann Dental Associates	0.0770%
35-2155719	Adelsperger Orthodontics	0.1980%
84-1992058	Anthony M Pulver DMD PC	0.1300%
85-1026135	Emhardt Pediatric Dentistry	0.0707%
27-1602679	Dawson Family Dentistry	0.0690%

35-1462367	David A Dickey DDS PC	0.0927%
35-2132117	James T Krol DDS PC	0.1720%
84-3682957	Center Grove Family Dentistry	0.0927%
35-1630941	Weddell Pediatric Dental Specialists, LLC	0.0549%
35-1822228	Adult Adolescent and Child Orthodontics	0.0133%
35-2488421	Summit Orthodontics	0.0209%
05-0626795	Tri-State Oral Surgery	0.1033%
47-5684313	Westend Dental	0.0952%
82-1638605	Franklin Family Dentistry	0.0690%
30-0004435	Michael A Gordon DDS PC	0.1342%
68-0635383	Smiles For Life	0.0868%
35-1690712	Midwest Oral & Maxifacial	0.0937%
84-1955003	Thomas G Ison DMD LLC	0.1700%
81-0922725	S C Cheesman DDS PC	0.0980%
35-1649888	James David Heck DDS	0.1286%
82-2099892	Core Endodontics	0.1301%
46-3884627	Miriam Carmean	0.0772%
26-2891347	Castleton General and Implant Dentistry PC	0.1252%
47-4085667	Velez Family Dentistry	0.1084%
35-1906316	Kluth Family & Cosmetic Dentistry	0.0554%
81-2122906	Edgewood Dental	0.0222%
37-1454066	Klinger Family Dentistry	0.1238%
35-1758917	David H Wolf DDS Family Dentistry PC	0.0911%
35-1735662	John P. Click, DDS	0.0925%
26-4833866	Austin H Burns DDS PC	0.1051%
85-4361174	James S Breuker DDS & Assoc	0.0876%
35-1444231	Greenfield Family Dentistry	0.1167%
35-1891859	University Park Family Dentistry	0.2521%
35-2043739	Dr Desiree Dimond DDS	0.1636%
52-2288008	Bradley J Bath DDS PC	0.0863%
35-2003389	Sadler Orthodontics	0.1249%
35-2192666	Fort Wayne Dental Group	0.1036%
31-1119211	Michiana Dental Care	0.0354%
27-3835183	United Dental Center	0.0216%
85-3233262	Springer Dental Care of Keystone	0.0356%
46-5243914	Lakewood Family Dental	0.1483%
35-2048651	Post Road Family Dentistry	0.1248%
84-4098158	Columbus Endodontics	0.0868%
35-1908979	Huntington Dental Group	0.0646%
46-5183189	Richmond Oral and Maxillfacial	0.1412%
83-4374598	All Star Dental	0.1006%
45-2705482	Perio Indy	0.0800%
85-2142617	Carmel West Dentistry	0.0877%
85-2244536	Youthful Smiles Children & Family Dentistry LLC	0.0863%

84-1834414	Little Heroes Pediatric Dentistry	0.0749%
30-0141348	Melissa A. Jarrell, DDS Family & Cosmetic Dentistry of Kokomo, PC	0.0392%
27-4288682	Meridian Dental Center	0.0261%
27-1383022	Alivio Dental	0.0575%
35-2156296	Jasper Endodontics	0.1126%
35-2047241	The Periodontal Group	0.0871%
47-4472354	Holland Dentistry	0.0270%
27-4496373	Nicole Van Le DDS LLC	0.1498%
47-4254665	Aldrich Pediatric Dentistry	0.0375%
87-1871188	Michael Gariup DMD PC	0.0386%
20-1000295	Central Indiana Endodontics	0.0545%
35-1630941	Weddell Pediatric Dentistry	0.0620%
35-1609063	Daniel Wheeler Family Dentistry	0.0996%
27-1416470	Christopher M Phillips DDS	0.0952%
35-1942752	Ashcraft and Frazier Orthodontics	0.0273%
35-1442005	Indiana Endodontics	0.0804%
36-3495743	Peterson Family Dental	0.1286%
82-5057730	Monroe County Family Dental	0.0146%
30-5881586	Aaron M Luttrell DDS	0.0937%
30-4982836	Turtle Town Dental	0.0504%
35-0838561	Periodontal Assoc of South Bend	0.0199%
35-2051065	Tamara L Hiester DDS	0.1376%
85-1094363	Meridian Endodontics	0.1424%
84-4152765	Poplar Pediatric Dentistry	0.0669%
35-2050363	University Avenue Dental	0.0516%
26-0564480	Avalon Dentistry	0.0292%
35-2086831	Applegate Family Dentistry	0.1324%
81-4865420	Edgewood Dental Care	0.1072%
35-1672804	Brian Nunley DDS	0.0319%
82-4453708	Nirmaldeep Singh Brar DMD LLC	0.1021%
26-3375881	Annette Williamson DDS PC	0.0653%
81-3641474	Mitthoeffer Family Dental	0.0389%
46-1550617	Promise Dental	0.0892%
35-1814507	Jeffrey McQuinn DDS LLC	0.0879%
35-1937273	Spees Family Dentistry	0.1556%
83-1802379	Northwest Indiana Dental Care	0.0279%
81-3647681	Dr Christopher R Hazel	0.1575%
81-3579885	Mishler Dental	0.0773%
84-4652128	Buedel Orthodontics	0.0343%
87-4445316	Deana Fugate DMD PC	0.0277%
35-2034703	Brian J King DDS PC	0.0861%
26-1689650	Nikki Wargo DDS Inc	0.0854%
85-1975222	Lafayette Endodontics LLC	0.0700%
87-4103875	Watson Dental LLC	0.0879%

88-0938329	Michigan City Dental PC	0.0138%
36-4172006	Parkway Dental Care	0.1201%
35-2115969	Lafayette Pediatric Dentistry	0.0268%
35-2003858	Franklin Street Dentistry	0.0129%
27-4288682	Meridian Dental	0.0144%
35-1538900	MW Dentistry & Esthetics	0.0587%
36-4467457	CROWN POINT DENTAL CARE	0.0256%
87-2091658	GREENWOOD DENTAL CARE	0.0217%
87-0698500	The Dental Center	0.0639%
35-1849682	Stephen W Rasmussen, DDS, PC	0.0239%
20-8367347	Aegis Dental Group	0.1085%
20-1477384	Erin Fuson Phillips DDS PC	0.0842%
84-1835026	Ladd Dental Group	0.1047%
92-1607836	Nicholas Olinger DMD PC	0.0825%
26-2891294	West Main Family Dental	0.0301%
87-3242634	Guido Family Dentistry	0.0793%
88-2604550	Fitzgerald Family Dentistry	0.0813%
35-2030922	John A Roshel III DDS	0.1098%
86-1571180	St John Oral Surgery & Dental Implants	0.0965%
87-2940470	TLC Family Dentistry	0.1047%
85-4041566	Vogel Family Dentistry	0.0910%
27-3070177	Eraso Orthodontics at Alivio PC	0.1093%
86-2602401	Lakeside Family Dentistry	0.0264%
35-1604525	Camp Laboratory, PC	0.1925%
42-8732408	Herbert-Yager Family Dentistry	0.1567%
35-1887298	Luarde Dental Care	0.0615%
88-1505068	Transformative Family Dentistry	0.0316%
35-2049336	Oyler Family Dentistry	0.0544%
92-1174912	Richmond Endodontics	0.0655%
87-1519298	Holland Orthodontics LLC DBA Castleton Orthodontics	0.0247%
46-2595835	Knop Family Dentistry	0.1336%
35-2137243	Bryan J Roy DDS MSD PC	0.0729%
26-0786154	Ellis Orthodontics LLC	0.0805%
85-2828773	Tooth Acres Dentistry	0.1082%
92-1076635	Infuse Dental	0.0148%
47-1613635	Fiorenza Dental Group	0.0763%
37-1454066	Klinger Family Dentistry	0.0771%
87-1456665	Aria	0.0641%
35-1666275	Catton Dentistry	0.0185%
87-4405757	Serenity Creek Dental Care	0.0922%
35-2047241	The Periodontal Group	0.1309%
35-2094424	New Carlisle Dentistry	0.0613%
92-2592566	Columbus Perio LLC	0.0841%
35-2067706	Endodontic Specialists	0.0805%

35-1291999	Tri-State Family Dental Centers	0.0494%
81-2800162	New Haven Family Dentistry	0.0146%
46-2745178	Richardson Dental Center	0.0812%
87-0698500	Dr J Pediatric Dentistry	0.0743%
30-4964763	Bloom Dental Bedford	0.1283%
45-4069228	Crown Hill Dentistry	0.0425%
47-3724022	Grabill Family Dentistry	0.0637%
35-1906639	Bloomington Periodontics & Dental Implants	0.0110%
84-4115167	Chad Canal LLC	0.0248%
92-1690379	Cummings Dental LLC	0.0859%
85-2417202	Periodontal Associates of Lafayette	0.0325%
88-1958401	Hendricks Pediatric Dentistry	0.1334%
35-1165907	Stetzel Dental Group	0.0240%
92-3036051	Koveck Family Dentistry	0.0930%
35-1878462	Karen Hrisomalos DDS & Elaine Coghlan DDS PC	0.0678%
35-1184163	Mark A Kahn DDS PC	0.1074%
26-1616310	Wells, Marvel & Hall LLC	0.1324%
85-3363625	Warrick Park Dental	0.1403%
83-3044615	Nothing But the Tooth LLC	0.0598%
35-2052827	Angela Burke Dentistry LLC	0.0751%
83-0874874	Michael N Harris DDS PC	0.0726%
81-2155635	Finkelmeier Orthodontics	0.0837%
92-2301366	Rifai Dental Group	0.0855%
46-6963429	Lasting Impressions Family Dental Care	0.0395%
45-5537009	Image Orthodontics	0.0899%
82-2855624	Garcia Family Dental	0.0809%
45-2969005	Monrovia Dental Clinic LLC	0.0523%
81-3680233	Harris Family Dentistry	0.0798%
45-5598993	Taite R Anderson DDS PC	0.1165%
83-2698156	Still Waters Family Dentistry PC	0.2118%
84-3799706	Twin Branch Dental	0.0716%
82-3924535	Matthew Hearn DDS	0.0363%
35-1520023	Muncie Family Dental Care	0.0662%
47-3722047	D Matthew Pierce LLC	0.0136%
35-2021041	McGue Dental PC	0.0589%
99-2327756	Geisse Family Dental	0.0204%
85-0695552	Glacial Sands OMS	0.0638%
84-4218731	Decatur Family Dentistry	0.0560%
82-3730287	Lake Park Dental Group	0.0915%
46-3743438	Keystone Family Dental Center	0.0438%
87-4183868	Primecare Family Dental	0.0091%
46-3406663	Aegis Dental Group	0.0109%
35-1970302	Erskine Family Dentistry	0.0387%
35-2192666	Fort Wayne Dental Group	0.0246%

35-2033892	Accent Dental	0.0208%
81-0784554	Blair Dental	0.0099%
26-3615716	Mohrman Family Dental	0.0081%
35-2071536	Brazil Family Dentistry, LLC	0.0033%
99-4138416	Liles Orthodontics	0.0156%
84-2820978	Michael Auriemma DMD Inc	0.0046%
35-2144113	South Central Oral Surgery	0.2022%
35-1289278	Endodontics, Inc.	0.6525%
35-1981527	Associated Dentists of NW IN	0.1947%
51-0437819	Cottingham Orthodontics	0.2284%
92-2592566	Columbus Perio LLC	0.4410%
35-1527273	Dr. Christopher W Gall, DDS	0.1742%
35-2038070	Comprehensive Dental Care	0.3954%
35-1162296	iSmile Orthodontics LLC	0.2144%
35-2084300	Mark Stevenson, DDS, PC	0.1175%
38-3376022	Dr. Jerry E Lambert Jr	0.0129%
35-2047241	The Periodontal Group	0.6661%
35-1439744	Jones Family Dental LLC	0.2244%
35-2026961	Brett Zimpfer, DDS	0.2549%
35-1747566	Steven J Hoagburg, Inc.	0.4339%
20-1607746	Wayne County Dental Associates, LLC	0.2910%
99-0561111	Muncie Family Dental Care	0.3014%
27-1524064	Northeast Oral & Maxi Sur	0.2752%
35-1882567	Complete Family Dentistry	0.2138%
35-2144564	Fishers Dental Care	0.2020%
20-2035371	Don M Newman, DDS, PC	0.6840%
35-1344666	Pediatric Dental Specialist of IN, PC	0.6657%
20-2253267	Dr. Michael S Perez, DDS PC	0.1976%
35-1856092	Anthony C Stringfellow, DDS	0.0058%
02-0587254	Alesia Brown DMD PC	0.4114%
06-1738680	Heather Ireland, DDS Family & Cosmetic	0.1869%
32-0174486	E Dru Stewart DDS, Family Dentistry	0.2720%
43-1985980	Rossville Family Dentistry	0.1309%
35-1982225	Preferred Dental Care	0.3194%
35-1982610	Guthrie Carr, DDS	0.4105%
35-2129242	Hubert Family Dentistry	0.1802%
46-4879532	GCR Family Dentistry LLC	0.3521%
35-1751196	Jeffrey Meister & Associates	0.4343%
35-1803743	Advance Dental	0.4211%
20-8780460	Jay Platt, DDS, PC	1.1727%
47-2649205	Kurt Vanwinkle, DDS	0.2194%
35-2111364	Dr. Jeffrey A Stolarz	0.1009%
05-0626795	Tri-State Oral Surgery	0.4403%
35-1459048	Brauer Family Dentistry	0.4400%

47-2210412	Anthony Hirschenberger	0.1989%
35-2053719	Cedar Lane Family Dentistry	0.4158%
45-2681691	Absolute Endodontics	0.2304%
35-1282335	Thornton Dental Group	0.0370%
35-2028950	Susan E Snyder DDS, PC	0.0800%
47-1924629	Mark A Haring DDS	0.0953%
35-1445614	Oral and Maxillofacial Surgery	0.2250%
26-1222890	Bloomington Family Dental	0.4858%
35-2064036	Montpelier Family Dentistry	0.1063%
82-1903547	Jenny Neese Family Dentistry	0.1341%
20-3333134	Roberts Orthodontics	0.0779%
84-1827392	Orthodontic Alliances PC	1.0982%
20-0959913	Dental Spa, PC	0.1403%
35-1880224	Lynn J. Albrecht, DDS	0.1554%
35-20468018	Sonrisa-A-Periodontal Spa	0.1241%
45-4617868	Jones Family Dentistry	0.1568%
46-4373484	St John Family Dentistry	0.2948%
35-2115901	Eastside Endodontics, Inc	0.2018%
35-2093655	Dr Leonard F Anglis	0.2289%
36-3316976	Smile Design Dentistry	0.1458%
87-2782233	Lake Ridge Pediatric Dentistry	0.0767%
35-2209025	Kurt Rupenthal, DDS, LLC	0.3451%
35-2163479	Stones Crossing Dentistry Inc	0.0590%
26-2555245	New Albany Implants	0.0365%
35-2146530	Crawfordsville Family Dentistry	0.2692%

DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN
 SCHEDULE H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS

PLAN'S EMPLOYER IDENTIFICATION NUMBER: 93-2728089

PLAN NUMBER: 501

Year Ended December 31, 2024

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Identity of party involved	Description of asset (include interest rate and maturity in case of a loan)	Purchase price	Selling price	Lease rental	Expense incurred with transaction	Cost of asset	Current value of asset on transaction date	Net gain or (loss)
N/A	Lord Abbott Short Duration							
	3 Purchases	\$ 568,489.00	N/A	N/A	N/A	\$ 568,489.00	\$ 568,489.00	\$ -
	3 Sales	N/A	\$ 907,000.00	N/A	N/A	\$ 983,523.00	N/A	\$ (76,523.00)

DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

PLAN'S EMPLOYER IDENTIFICATION NUMBER: 93-2728089

PLAN NUMBER: 501

December 31, 2024

<u>(a)</u>	<u>(b)</u>	<u>(c)</u>	<u>(d)</u>	<u>(e)</u>
Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	Cost	Current Value	
Money market funds				
Morgan Stanley Bank N.A.	Money market fund	\$ 22,791	\$ 22,791	
U.S. Treasury bills				
United States Treasury Bill	Dated 7/18/24; due 1/16/2025	2,259,687	2,267,256	
United States Treasury Bill	Dated 8/1/24; due 1/30/2025	943,867	944,889	
United States Treasury Bill	Dated 8/8/24; due 2/6/2025	957,327	958,060	
		<u>4,160,881</u>	<u>4,170,205</u>	
Fixed income funds				
JPMorgan Exchange-Traded Fund Trust Limited Duration	Exchange-traded & closed-end fund	336,821	334,880	
JPMorgan Ultra-Short Income ETF	Exchange-traded & closed-end fund	388,267	388,856	
PGIM Short Duration High Yield Income Fund - Class Z	Mutual fund	1,493,206	1,427,145	
Lord Abbett Bond-Debenture Fund Class I	Mutual fund	171,295	149,639	
Lord Abbett Short Duration Income Fund Class I	Mutual fund	974,666	942,284	
Lord Abbett Ultra Short Bond Fund Class I	Mutual fund	408,766	413,292	
		<u>3,773,021</u>	<u>3,656,096</u>	
Equities				
Vanguard Mid-Cap Index Fund ETF Shares	Exchange-traded & closed-end fund	162,004	245,377	
Vanguard Small-Cap Index Fund ETF Shares	Exchange-traded & closed-end fund	81,708	120,621	
Adidas AG	Stock	2,930	2,953	
Adobe Inc.	Stock	2,860	3,734	
Advanced Micro Devices	Stock	2,066	3,334	
Airbnb, Inc.	Stock	3,651	3,535	
Alphabet Inc.	Stock	6,201	14,012	
Amazon.com, Inc.	Stock	13,389	30,056	
Analog Devices, Inc.	Stock	2,152	2,127	

DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) - CONTINUED

PLAN'S EMPLOYER IDENTIFICATION NUMBER: 93-2728089

PLAN NUMBER: 501

December 31, 2024

<u>(a)</u>	<u>(b)</u>	<u>(c)</u>	<u>(d)</u>	<u>(e)</u>
Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	Cost	Current Value	
Equities - continued				
Apple Inc.	Stock	8,078	20,391	
AppLovin Corporation	Stock	2,743	2,711	
Astrazeneca	Stock	2,209	2,159	
Boeing Co	Stock	6,623	5,886	
Broadcom Inc	Stock	4,596	19,529	
Cadence Design System	Stock	3,900	5,369	
Costco Wholesale Corporation	Stock	3,137	7,900	
Crowdstrike Holdings, Inc.	Stock	1,933	5,012	
Datadog Inc	Stock	2,586	2,998	
Dexcom Inc	Stock	1,484	1,640	
Eaton Corporation plc	Stock	3,513	3,650	
Edward Lifesciences Corp	Stock	1,859	1,833	
Eli Lilly and Company	Stock	2,354	9,001	
Flutter Entertainment PLC	Stock	2,330	2,246	
GE Aerospace	Stock	3,317	3,262	
Hilton Worldwide	Stock	3,180	3,581	
The Home Depot, Inc.	Stock	2,276	2,954	
Industria de Diseno Textil	Stock	1,707	1,479	
Intuitive Surgical, Inc.	Stock	2,163	4,192	
Marriot International, Inc.	Stock	1,094	2,116	
Mastercard Incorporated	Stock	5,457	9,162	
Meta Platforms, Inc.	Stock	9,132	19,370	
Microsoft Corporation	Stock	10,136	24,412	
Moody's Corporation	Stock	2,351	3,499	
Netflix, Inc.	Stock	4,976	14,317	
Novo Nordisk A/S	Stock	2,823	4,607	
NVIDIA Corporation	Stock	2,392	32,767	
Palo Alto Networks, Inc	Stock	2,433	2,665	
Progressive Corp	Stock	3,666	4,031	
Salesforce, Inc.	Stock	3,245	4,514	
ServiceNow, Inc.	Stock	4,574	8,948	
Snowflake Inc.	Stock	2,485	2,575	
Spotify Technology	Stock	3,862	3,705	
Tesla, Inc.	Stock	1,036	11,479	
The TJX Companies, Inc	Stock	1,097	2,250	
The Trade Desk, Inc.	Stock	1,580	4,115	
Uber Technologies, Inc.	Stock	2,200	3,988	
Vertex Pharmaceuticals	Stock	4,311	5,214	
Vertiv Holdings	Stock	2,808	2,859	
Visa Inc.	Stock	3,916	6,716	
Walmart Inc.	Stock	5,592	6,374	

DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) - CONTINUED

PLAN'S EMPLOYER IDENTIFICATION NUMBER: 93-2728089

PLAN NUMBER: 501

December 31, 2024

<u>(a)</u>	<u>(b)</u>	<u>(c)</u>	<u>(d)</u>	<u>(e)</u>
Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	Cost	Current Value	
Equities - continued				
Walt Disney Co	Stock	5,566	5,616	
Abbott Laboratories	Stock	3,549	3,715	
AbbVie Inc.	Stock	4,263	5,992	
Accenture plc	Stock	899	1,574	
Air Products and Chemicals, Inc.	Stock	5,225	6,188	
American Express Company	Stock	2,333	6,843	
Analog Devices, Inc.	Stock	3,066	5,768	
Apple Inc.	Stock	280	1,053	
Ares Management Corp	Stock	2,999	3,773	
Bank of America Corporation	Stock	7,130	9,142	
Bank of New York Mellon	Stock	2,057	1,974	
Becton, Dickinson, and Company	Stock	3,084	2,842	
BlackRock, Inc.	Stock	1,976	4,100	
Blackstone, Inc	Stock	3,882	4,849	
Bristol-Myers Squibb Company	Stock	6,651	5,995	
Capital One Financial Corporation	Stock	3,576	4,341	
Cencora, Inc.	Stock	703	1,821	
The Charles Schwab Corporation	Stock	5,099	6,882	
Chevron Corporation	Stock	6,242	6,491	
Chubb Limited	Stock	1,569	2,935	
CME Group Inc.	Stock	1,708	2,083	
CMS Energy Corporation	Stock	1,894	2,095	
The Coca-Cola Company	Stock	2,736	3,041	
Comcast Corporation	Stock	6,189	5,404	
ConocoPhillips	Stock	4,126	7,208	
Corning Inc	Stock	2,231	3,005	
CVS Health Corporation	Stock	3,586	2,402	
Deere & Company	Stock	3,703	5,781	
Dominion Energy Inc	Stock	4,060	3,470	
Dover Corporation	Stock	3,082	5,068	
Eaton Corporation plc	Stock	1,139	4,718	
Eli Lilly and Company	Stock	242	1,594	
EOG Resources Inc.	Stock	2,360	4,845	
Exxon Mobil Corp	Stock	2,689	4,230	
Gallagher Arthur J & Co	Stock	890	2,710	
General Dynamics Corporation	Stock	3,715	5,174	
Goldman Sachs Group	Stock	2,324	2,237	
The Hartford Financial Services Group, Inc.	Stock	356	694	
The Hershey Company	Stock	2,640	2,184	
The Home Depot, Inc.	Stock	3,278	5,137	

DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) - CONTINUED

PLAN'S EMPLOYER IDENTIFICATION NUMBER: 93-2728089

PLAN NUMBER: 501

December 31, 2024

<u>(a)</u>	<u>(b)</u>	<u>(c)</u>	<u>(d)</u>	<u>(e)</u>
Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	Cost	Current Value	
Equities - continued				
Honeywell Intl Inc	Stock	3,420	3,799	
International Business Machines Corporation	Stock	1,068	1,904	
Johnson & Johnson	Stock	4,839	4,791	
Lowe's Company, Inc.	Stock	5,424	5,900	
Marsh & McLennan Companies, Inc.	Stock	788	1,487	
McDonald's Corporation	Stock	3,760	5,047	
Medtronic plc	Stock	3,429	2,719	
Merck & Co., Inc.	Stock	2,160	2,289	
MetLife, Inc.	Stock	953	1,623	
Microchip Technology Incorporated	Stock	4,086	2,725	
Microsoft Corporation	Stock	1,890	5,166	
Mondelez International, Inc.	Stock	1,991	2,257	
Morgan Stanley	Stock	3,017	7,543	
NextEra Energy, Inc.	Stock	3,146	3,723	
Norfolk Southern Corporation	Stock	5,436	6,060	
Northrop Grumman Corporation	Stock	967	1,531	
NXP Semiconductors NV	Stock	2,065	2,467	
Parker-Hannifin Corporation	Stock	1,146	3,677	
PepsiCo, Inc.	Stock	2,166	2,382	
Philip Morris International Inc.	Stock	4,506	6,366	
The PNC Financial Services Group, Inc.	Stock	3,952	5,339	
PPG Industries, Inc.	Stock	1,811	1,813	
The Procter & Gamble Company	Stock	3,705	4,682	
The Progressive Corporation	Stock	598	1,949	
Public Service Enterprise Group Incorporated	Stock	1,860	2,631	
Republic Services, Inc.	Stock	605	1,465	
RTX Corporation	Stock	2,216	3,828	
Seagate Technology Holdings plc	Stock	2,133	2,299	
Texas Instruments Incorporated	Stock	3,228	4,537	
The Cigna Group	Stock	2,752	3,231	
The TJX Companies, Inc.	Stock	2,309	5,270	
The Travelers Companies, Inc.	Stock	1,706	2,222	
Truist Financial Corp	Stock	3,847	4,338	
Union Pacific Corporation	Stock	4,123	3,865	
United Parcel Service, Inc.	Stock	6,495	4,650	
UnitedHealth Group Incorporated	Stock	6,304	8,861	
Verizon Communications Inc.	Stock	2,521	1,749	
Walmart Inc.	Stock	1,764	4,074	

DENTAL PRACTICE CONSORTIUM, INC. HEALTH PLAN

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) - CONTINUED

PLAN'S EMPLOYER IDENTIFICATION NUMBER: 93-2728089

PLAN NUMBER: 501

December 31, 2024

<u>(a)</u>	<u>(b)</u>	<u>(c)</u>	<u>(d)</u>	<u>(e)</u>
Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	Cost	Current Value	
Equities - continued				
Wells Fargo & Co	Stock	7,144	11,098	
Xcel Energy Inc.	Stock	2,858	2,971	
Yum Brands	Stock	1,941	1,945	
		661,341	1,032,472	
Balanced funds				
American Funds The Income Fund of America Class F-2	Mutual fund	335,405	344,970	
JPMorgan Income Builder Fund Class I Shares	Mutual fund	323,674	298,127	
		659,079	643,097	
Alternative investments				
PGIM Global Real Estate Fund - Class Z	Mutual fund	119,010	94,678	
Alexandria Real Estate Equities, Inc.	Stock	1,485	958	
AvalonBay Communities, Inc.	Stock	1,380	1,443	
Ventas, Inc.	Stock	2,402	2,419	
Prologis, Inc.	Stock	2,491	2,296	
		126,768	101,794	
Total investments at fair value		9,403,881	9,626,455	
Cash - interest bearing				
BMO Harris Bank N.A.	Cash - interest bearing	\$ 28,363	\$ 28,363	
Merchants Bank of Indiana	Cash - interest bearing	1,126,882	1,126,882	
Total cash - interest bearing		\$ 1,155,245	\$ 1,155,245	