

**Dealer Tire Holdings LLC dba Dealer Tire LLC**

7012 Euclid Ave, Cleveland, OH 44103

Michael Ricciardi, Director, Enterprise Accounting

**Date:** May 8, 2025**Application Facts:**

Industry **Transportation, Warehousing & Utilities**  
NAICS **423130**  
Type of App **New**  
Location **Clark County**  
RDA LVGEA, Heather Brown

**Company Profile**

Dealer Tire Holdings LLC dba Dealer Tire LLC (Dealer Tire) plans to establish a distribution and fulfillment Automotive Tire Distribution facility in southern Nevada. Dealer Tire is a company that specializes in helping automotive manufacturers and dealers grow their tire and light maintenance business. The company provides tools and services aimed at increasing customer satisfaction and retention. Founded in 1999 and headquartered in Cleveland, Ohio, Dealer Tire offers a range of products and services to support dealerships in enhancing their service offerings. These include tire distribution, inventory management, and training programs for dealership personnel. Dealer Tire's goal is to revolutionize the way people buy tires and care for their cars by providing innovative solutions to its partners. The company serves brands which include notable names such as Genesis, Hyundai, Rolls-Royce, and Jaguar, among others. Dealer Tire demonstrates its commitment to corporate social responsibility (CSR) through various initiatives focused on community engagement, ethical business practices, workplace diversity, environmental sustainability. Dealer Tire views its expansion into Nevada as an opportunity to create shared value—not just through economic investment but also through community engagement. *Source: Dealer Tire Holdings LLC dba Dealer Tire LLC*

**Tax Abatement Requirements:**

	<u>Statutory</u>	<u>Company Application</u>	<u>Meeting Requirements</u>
Job Creation	<b>50</b>	18	No
Average Wage	<b>\$32.51</b>	\$35.56	Yes
Equipment Capex (SU & MBT)	<b>\$1,000,000</b>	\$2,096,000	Yes
Equipment Capex (PP)			Yes

**Additional Requirements:**

Health Insurance	<b>65%</b>	77%	<b>Yes</b>
Revenues generated outside NV	<b>51%</b>	87%	<b>Yes</b>
Business License	<input checked="" type="checkbox"/> Current	<input type="checkbox"/> Pending	<input type="checkbox"/> Will comply

**Total Tax Liability** (without tax abatements)**Direct (company)****\$301,440****Total****\$8,793,241****Tax Abatements**

	<u>Contract Terms</u>	<u>Estimated Tax Abatement</u>
Sales Tax Abmt.	2% for 2 years	\$133,620
Modified Business Tax Abmt.	50% for 4 years	\$20,260
Personal Property Tax Abmt.	50% for 10 years	\$42,690

**Total Estimated Tax Abatement over 10 yrs.****\$196,570****Net New Tax Revenues**

	<u>Direct</u>	<u>Indirect</u>	<u>Taxes after Abatements</u>
<b>Local Taxes</b>			
Property	\$988,010	\$2,650,952	\$3,638,962
Sales	\$3,506	\$2,391,049	\$2,394,555
Lodging	\$0	\$125,467	\$125,467

**State Taxes**

Property	\$54,038	\$155,159	\$209,197
Sales	\$43,020	\$802,738	\$845,758
Modified Business	\$813,422	\$529,000	\$1,342,422
Lodging	\$0	\$40,310	\$40,310

**Total Estimated New Tax Revenue over 10 yrs.****\$1,901,996****\$6,694,675****\$8,596,671****Economic Impact over 10 yrs.**

	<u>Economic</u>	<u>Construction</u>	<u>Total</u>
Total Jobs Supported	289	1	290
Total Payroll Supported	\$129,473,858	\$56,726	\$129,530,584
Total Economic Value	\$331,755,225	\$159,953	\$331,915,178

**Economic Impact Output per Abatement Dollar****New Total Tax per Abated Dollar****\$1,688****\$43.73****IMPORTANT TERMS & INFORMATION****Tax Abatements are [reduction or discount of tax liability](#) and companies do not receive any form of payment.****Total Estimated Tax Abatement** is a tax reduction estimate. This estimated amount will be discounted from total tax liability.**Estimated New Tax Revenue** is amount of tax revenues local and state government will collect after the abatement was given to applying company.**Economic Impact** is economic effect or benefits that this company and it's operations will have on the community and state economy measured by total number of jobs, payroll and created output.



March 23<sup>rd</sup>, 2025

Mr. Tom Burns  
Executive Director  
Nevada Governor's Office of Economic Development  
1 State of Nevada Way, 4<sup>th</sup> Floor  
Las Vegas, Nevada 89119

Dear Mr. Burns,

**Dealer Tire Holdings LLC dba Dealer Tire LLC** is applying to the State of Nevada's Sales & Use Tax Abatement, Modified Business Tax Abatement, and Personal Property Tax Abatement. We request that **Dealer Tire Holdings LLC dba Dealer Tire LLC** be placed on the May 8<sup>th</sup>, 2025, GOED Board meeting agenda.

**Dealer Tire Holdings LLC dba Dealer Tire LLC** will create **18** new positions in the first 2 years of operations, with an average hourly wage of **\$35.56**. **Dealer Tire Holdings LLC dba Dealer Tire LLC** will make a capital equipment investment of **\$2.1 million**.

**Dealer Tire Holdings LLC dba Dealer Tire LLC** meets the statutory requirements for the Sales & Use Tax Abatement, Modified Business Tax Abatement, and Personal Property Tax Abatement. This application has the support of the Las Vegas Global Economic Alliance.

Sincerely,

Heather Brown  
SVP Entrepreneurial Development  
Las Vegas Global Economic Alliance



March 25, 2025

Mr. Tom Burns  
Executive Director  
Nevada Governor's Office of Economic Development  
1 State of Nevada Way, 4th Floor  
Las Vegas, Nevada 89119

Dear Mr. Burns,

By way of this letter and the attached application, **Dealer Tire LLC** is requesting tax incentives to assist with our relocation efforts. Recent strategic planning has the company focused on creating a presence in Nevada. A significant part of this consideration is the economic incentives offered by the state. We are projecting to add 18 full-time employees with an average wage of \$35.56 over the next two years of operations.

A brief history of our company along with an overview of our products is included with submission. Dealer Tire LLC was founded in 2000 and is currently headquartered in Cleveland, Ohio. Dealer Tire is an Automotive Tire Distribution company focusing on the Dealership Network, we have been contracting with a Logistics company over the past 3 years to support our operations in Las Vegas and now excited to transition from the logistics support model to establishing the Dealer Tire operated facility, similar to the other 30 facilities operating in the United States.

The economic development incentives offered by the State of Nevada have been an integral factor in our relocation strategy. The projected cost savings from the support of these incentives will allow Dealer Tire to hire a greater number of full-time employees, supporting the Governor's initiative for providing more Nevadans with long term work and career opportunities. Additionally, Nevada's pro-business climate provides Dealer Tire with a sustainable location for ongoing strategic growth. We are projecting to occupy a 116,000 sq ft facility with capital equipment projections forecasting approximately \$2,300,000 of capital investment into the company.

Our experience with representatives from the Las Vegas Global Economic Alliance has been positive and we look forward to your approval in supporting our expansion efforts. We appreciate your time and consideration.

Sincerely,

Jerry Holeman  
Director, Supply Chain Solutions.  
Dealer Tire LLC



## Standard Tax Abatement Incentive Application

Company is an / a: (check one)

- ☒ New location in Nevada  
☐ Expansion of a Nevada company

 Company Name: Dealer Tire Holdings LLC

 Date of Application: December 1, 2024

### Section 1 - Type of Incentives

Please check all that the company is applying for on this application:

- ☒ Sales & Use Tax Abatement  
☒ Modified Business Tax Abatement  
☒ Personal Property Tax Abatement  
☐ Recycling Real Property Tax Abatement  
☐ Other: \_\_\_\_\_

### Section 2 - Corporate Information

COMPANY NAME (Legal name under which business will be transacted in Nevada) <u>Dealer Tire Holdings LLC dba: Dealer Tire LLC</u>			FEDERAL TAX ID # <u>87-0849274</u>
CORPORATE ADDRESS <u>7012 Euclid Ave</u>	CITY / TOWN <u>Cleveland</u>	STATE / PROVINCE <u>Ohio</u>	ZIP <u>44103</u>
MAILING ADDRESS TO RECEIVE DOCUMENTS (If different from above)	CITY / TOWN	STATE / PROVINCE	ZIP
TELEPHONE NUMBER <u>216-432-7922</u>	WEBSITE <u><a href="http://www.dealertire.com">www.dealertire.com</a></u>		
COMPANY CONTACT NAME <u>Michael Ricciardi</u>	COMPANY CONTACT TITLE <u>Director Enterprise Accounting</u>		
E-MAIL ADDRESS <u><a href="mailto:mricciardi@dealerfire.com">mricciardi@dealerfire.com</a></u>	PREFERRED PHONE NUMBER <u>216-432-7922</u>		

 Has your company ever applied and been approved for incentives available by the Governor's Office of Economic Development? ☐ Yes ☒ No

If Yes, list the program awarded, date of approval, and status of the accounts (attach separate sheet if necessary):

### Section 3 - Program Requirements

Please check two of the boxes below; the company must meet at least two of the three program requirements:

- ☒ A capital investment of \$1,000,000 in eligible equipment in urban areas or \$250,000 in eligible equipment in rural areas are required. This criteria is businesses. In cases of expanding businesses, the capital investment must equal at least 20% of the value of the tangible property owned by the business.  
☐ New businesses locating in urban areas require fifty (50) or more permanent, full-time employees on its payroll by the eighth calendar quarter following quarter in which the abatement becomes effective. In rural areas, the requirement is ten (10) or more. For an expansion, the business must increase employees on its payroll by 10% more than its existing employees prior to expansion, or by 25 (urban) or 6 (rural) employees, whichever is greater.  
☒ In both urban and rural areas, the average hourly wage that will be paid by the business to its new employees is at least 100% of the average statewide hourly wage.

Note: Criteria is different depending on whether the business is in a county where the population is 100,000 or more or a city where the population is 60,000 or more "urban" area), or if the business is in a county where the population is less than 100,000 or a city where the population is less than 60,000 (i.e., "rural" area).

### Section 4 - Nevada Facility

Type of Facility:

- ☐ Headquarters  
☐ Technology  
☐ Back Office Operations  
☐ Research & Development / Intellectual Property  
☐ Service Provider  
☒ Distribution / Fulfillment  
☐ Manufacturing  
☐ Other: \_\_\_\_\_

PERCENTAGE OF REVENUE GENERATED BY THE NEW JOBS CONTAINED IN THIS APPLICATION FROM OUTSIDE NEVADA <u>87% of volume to be distributed from LV to surrounding states.</u>	EXPECTED DATE OF NEW / EXPANDED OPERATIONS (MONTH / YEAR) <u>Apr-2025</u>		
NAICS CODE / SIC <u>423130</u>	INDUSTRY TYPE <u>Distribution</u>		
DESCRIPTION OF COMPANY'S NEVADA OPERATIONS <u>Automotive Tire Distribution through the Auto Dealership Channel</u>			
PROPOSED / ACTUAL NEVADA FACILITY ADDRESS <u>2951 North Marion</u>	CITY / TOWN <u>Las Vegas</u>	COUNTY <u>Clark County</u>	ZIP <u>89115</u>
WHAT OTHER STATES / REGIONS / CITIES ARE BEING CONSIDERED FOR YOUR COMPANY'S RELOCATION / EXPANSION / STARTUP? <u>No Additional relocations and expansions have been determined at this time in any other state.</u>			



**Section 5 - Complete Forms (see additional tabs at the bottom of this sheet for each form listed below)**

Check the applicable box when form has been completed.

- 5 (A) ☒ Equipment List
- 5 (B) ☒ Employment Schedule
- 5 (C) ☒ Evaluation of Health Plan, with supporting documents to show the employer paid portion of plan meets the minimum of 65%.
- 5 (D) ☐ Company Information Form

**Section 6 - Real Estate & Construction (Fill in either New Operations/Startup or Expansion, not both.)**

New Operations / Start Up - Plans Over the Next <u>Ten</u> Years	Expansions - Plans Over the Next <u>10</u> Years
<p>Part 1. Are you currently/planning on leasing space in Nevada? <u>Yes</u></p> <p><b>If No, skip to Part 2. If Yes, continue below:</b></p> <p>What year(s)? <u>2025</u></p> <p>How much space (sq. ft.)? <u>116,160</u></p> <p>Annual lease cost of space: <u>\$1,230,000</u></p> <p>Do you plan on making building tenant improvements? <u>Yes</u></p> <p><b>If No, skip to Part 2. If Yes *, continue below:</b></p> <p>When to make improvements (month, year)? <u>Q1 2025</u></p>	<p>Part 1. Are you currently leasing space in Nevada? _____</p> <p><b>If No, skip to Part 2. If Yes, continue below:</b></p> <p>What year(s)? _____</p> <p>How much space (sq. ft.)? _____</p> <p>Annual lease cost at current space: _____</p> <p>Due to expansion, will you lease additional space? _____</p> <p><b>If No, skip to Part 3. If Yes, continue below:</b></p> <p>Expanding at the current facility or a new facility? _____</p> <p>What year(s)? _____</p> <p>How much expanded space (sq. ft.)? _____</p> <p>Annual lease cost of expanded space: _____</p> <p>Do you plan on making building tenant improvements? _____</p> <p><b>If No, skip to Part 3. If Yes *, continue below:</b></p> <p>When to make improvements (month, year)? _____</p>
<p>Part 2. Are you currently/planning on buying an owner occupied facility in Nevada? <u>No</u></p> <p><b>If No, skip to Part 3. If Yes *, continue below:</b></p> <p>Purchase date, if buying (month, year): _____</p> <p>How much space (sq. ft.)? _____</p> <p>Do you plan on making building improvements? _____</p> <p><b>If No, skip to Part 3. If Yes *, continue below:</b></p> <p>When to make improvements (month, year)? _____</p>	<p>Part 2. Are you currently operating at an owner occupied building in Nevada? _____</p> <p><b>If No, skip to Part 3. If Yes, continue below:</b></p> <p>How much space (sq. ft.)? _____</p> <p>Current assessed value of real property? _____</p> <p>Due to expansion, will you be making building improvements? _____</p> <p><b>If No, skip to Part 3. If Yes *, continue below:</b></p> <p>When to make improvements (month, year)? _____</p>
<p>Part 3. Are you currently/planning on building a build-to-suit facility in Nevada? <u>No</u></p> <p><b>If Yes *, continue below:</b></p> <p>When to break ground, if building (month, year)? _____</p> <p>Estimated completion date, if building (month, year): _____</p> <p>How much space (sq. ft.)? _____</p>	<p>Part 3. Do you plan on building or buying a new facility in Nevada? _____</p> <p><b>If Yes *, continue below:</b></p> <p>Purchase date, if buying (month, year): _____</p> <p>When to break ground, if building (month, year)? _____</p> <p>Estimated completion date, if building (month, year): _____</p> <p>How much space (sq. ft.)? _____</p>

\* Please complete Section 7 - Capital Investment for New Operations / Startup.

\* Please complete Section 7 - Capital Investment for Expansions below.

BRIEF DESCRIPTION OF CONSTRUCTION PROJECT AND ITS PROJECTED IMPACT ON THE LOCAL ECONOMY (Attach a separate sheet if necessary):

**Section 7 - Capital Investment (Fill in either New Operations/Startup or Expansion, not both.)**

New Operations / Start Up	Expansions
How much capital investment is planned? (Breakout below):	How much capital investment is planned? (Breakout below):
Building Purchase (if buying): _____	Building Purchase (if buying): _____
Building Costs (if building / making improvements): <u>\$100,000</u>	Building Costs (if building / making improvements): _____
Land: _____	Land: _____
Equipment Cost: <u>\$2,228,500</u>	Equipment Cost: _____
<b>Total: <u>\$2,328,500</u></b>	<b>Total: _____</b>
	Is the equipment purchase for replacement of existing equipment? _____
	Current assessed value of personal property in NV: _____
	(Must <b>attach</b> the most recent assessment from the County Assessor's Office.)

**Section 8 - Employment (Fill in either New Operations/Startup or Expansion, not both.)**

New Operations / Start Up	Expansions
How many full-time equivalent (FTE*) employees will be created by the end of the first eighth quarter of new operations?: <u>18</u>	How many full-time equivalent (FTE*) employees will be created by the end of the first eighth quarter of expanded operations?: _____
Average hourly wage of these <u>new</u> employees: <u>\$39.83</u>	Average hourly wage of these <u>new</u> employees: _____
	How many FTE employees prior to expansion?: _____
	Average hourly wage of these <u>existing</u> employees: _____
	Total number of employees after expansion: _____

\* FTE represents a permanent employee who works an average of 30 hours per week or more, is eligible for health care coverage, and whose position is a "primary job" as set forth in NAC 360.474.

OTHER COMPENSATION (Check all that apply):

- |   |  |   |   |
|---|--|---|---|
| <input checked="" type="checkbox"/> Overtime              | <input checked="" type="checkbox"/> Merit increases  | <input checked="" type="checkbox"/> Tuition assistance                        | <input checked="" type="checkbox"/> Bonus |
| <input checked="" type="checkbox"/> PTO / Sick / Vacation | <input checked="" type="checkbox"/> COLA adjustments | <input checked="" type="checkbox"/> Retirement Plan / Profit Sharing / 401(k) | <input type="checkbox"/> Other: _____     |

BRIEF DESCRIPTION OF ADDITIONAL COMPENSATION PROGRAMS AND ELIGIBILITY REQUIREMENTS (Attach a separate sheet if necessary):

DC Associates are eligible to earn a monthly incentive bonus based off of distribution center performance against budgeted KPI's.

**Section 9 - Employee Health Insurance Benefit Program**

Is health insurance for employees and is an option for dependents offered?: ☒ Yes (**attach health plan and quote or invoice**) ☐ No

Package includes (check all that apply):

<input checked="" type="checkbox"/> Medical	<input checked="" type="checkbox"/> Vision	<input checked="" type="checkbox"/> Dental	<input checked="" type="checkbox"/> Other: <u>Flex,HSA,Dependent Care,Vol Life</u>
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Qualified after (check one):

<input type="checkbox"/> Upon employment	<input type="checkbox"/> Three months after hire date	<input type="checkbox"/> Six months after hire date	<input checked="" type="checkbox"/> Other: <u>First of the month following employment</u>
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Health Insurance Costs:	Percentage of health insurance premium by (min 65%):
Plan Type: <u>Contributory Plan</u>	
Employer Contribution (annual premium per employee): <u>\$ 15,500.00</u>	Company: <u>77%</u>
Employee Contribution (annual premium per employee): <u>\$ 4,600.00</u>	Employee: <u>23%</u>
<b>Total Annual Premium: <u>\$ 20,100.00</u></b>	

[SIGNATURE PAGE FOLLOWS]

## Section 10 - Certification

I, the undersigned, hereby grant to the Governor's Office of Economic Development access to all pertinent and relevant records and documents of the aforementioned company. I understand this requirement is necessary to qualify and to monitor for compliance of all statutory and regulatory provisions pertaining to this application.

Being owner, member, partner, officer or employee with signatory authorization for the company, I do hereby declare that the facts herein stated are true and that all licensing and permitting requirements will be met prior to the commencement of operations. In addition, I and /or the company's legal counsel have reviewed the terms of the GOED Tax Abatement and Incentives Agreement, the company recognizes this agreement is generally not subject to change, and any material revisions have been discussed with GOED in advance of board approval.

Michael Ricciardi

\_\_\_\_\_  
Name of person authorized for signature

Signature

Director Enterprise Accounting

\_\_\_\_\_  
Title

Date

### Nevada Governor's Office of Economic Development

1 State of Nevada Way, 4th Floor, Las Vegas, Nevada 89119 • 702.486.2700 • [www.goed.nv.gov](http://www.goed.nv.gov)

## Site Selection Factors

Company Name: Dealer Tire Holdings LLC

County: Clark

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### Section I - Site Selection Ratings

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Directions: Please rate the select factors by importance to the company's business (1 = very low; 5 = very high). Attach this form to the Incentives Application.

Availability of qualified workforce: 3  
Labor costs: 3  
Real estate availability: 4  
Real estate costs: 4  
Utility infrastructure: 2  
Utility costs: 2

Transportation infrastructure: 4  
Transportation costs: 3  
State and local tax structure: 2  
State and local incentives: 3  
Business permitting & regulatory structure: 3  
Access to higher education resources: 2

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**Please summarize the importance of the abatement program to your decision (please include at least a paragraph summary):**

A tax abatement program for Dealer Tire's distribution center in Las Vegas is a investment in long-term economic growth. By reducing upfront tax burdens, the program can help attract and retain a employer that brings stable jobs, infrastructure investment, and increased activity to the region's logistics and supply chain sectors. The presence of Dealer Tire strengthens Las Vegas's position as a distribution hub, which can lead to more business partnerships and ripple effects in local spending. In return for the temporary tax relief, the city gains a committed corporate partner contributing to its economic base.

## 5(A) Capital Equipment List

Company Name: Dealer Tire Holdings LLC

County: Clark

## Section I - Capital Equipment List

Directions: Please provide an estimated list of the equipment [columns (a) through (c)] which the company intends to purchase over the two-year allowable period. For example, if the effective date of new / expanded operations begins April 1, 2015, the two-year period would be until March 31, 2017. Add an additional page if needed. For guidelines on classifying equipment, visit:

[tax.nv.gov/LocalGovt/PolicyPub/ArchiveFiles/Personal\\_Property\\_Manuals](http://tax.nv.gov/LocalGovt/PolicyPub/ArchiveFiles/Personal_Property_Manuals). Attach this form to the Incentives Application.

[illegible]

Is any of this equipment\* to be acquired under an operating lease?

☐ Yes☒ No

\*Certain lease hold equipment does not qualify for tax abatements

## 5(B) Employment Schedule

Company Name: Dealer Tire Holdings

County: Clark

### Section 1 - Full-Time Equivalent (FTE) Employees

Directions: Please provide an estimated list of full time employees [columns (a) through (d)] that will be hired and employed by the company by the end of the first eighth quarter of new / expanded operations. For example, if the effective date of new / expanded operations is April 1, 2015, the date would fall in Q2, 2015. The end of the first eighth quarter would be the last day of Q2, 2017 (i.e., June 30, 2017). Attach this form to the Incentives Application. A qualified employee must be employed at the site of a qualified project, scheduled to work an average minimum of 30 per week, if offered coverage under a plan of health insurance provided by his or her employer, is eligible for health care coverage, and whose position of a "primary job" as set forth in NAC 360.474.

Please use the Bureau of Labor Statistics Standard Occupational Classification System (SOC) link to populate section (b): [https://www.bls.gov/soc/2018/major\\_groups.htm#11-0000](https://www.bls.gov/soc/2018/major_groups.htm#11-0000)

(a) New Hire Position Title/Description	(b) Position SOC Code	(c) Number of Positions	(d) Average Hourly Wage	(e) US Bureau of Labor Statistics Average Hourly Wage - Clark County	(f) Average Weekly Hours	(g) Annual Wage per Position	(h) Total Annual Wages
Transportation, Storage, and Distribution Managers	11-3071	1	\$70.67	\$41.43	40	\$146,993.60	\$146,993.60
Managers, All Other	11-9199	1	\$44.23	\$52.21	40	\$91,998.40	\$91,998.40
Laborers and Freight, Stock, and Material Movers, Hand	53-7062	3	\$39.62	\$18.81	40	\$82,409.60	\$247,228.80
Laborers and Freight, Stock, and Material Movers, Hand	53-7062	13	\$31.25	\$18.81	40	\$65,000.00	\$845,000.00
<b>TOTAL</b>		<b>18</b>	<b>\$35.56</b>	<b>\$21.92</b>			<b>\$1,331,220.80</b>

### Section 2 - Employment Projections

Directions: Please estimate full-time job growth in Section 2, complete columns (b) and (c). These estimates are used for state economic impact and net tax revenue analysis that this agency is required to report. The company will not be required to reach these estimated levels of employment. [Please enter the estimated new full time employees on a year by year basis \(not cumulative\)](#)

(a) Year	(b) Number of New FTE(s)	(c) Average Hourly Wage	(d) Payroll
3-Year	2	\$35.00	\$145,600.00
4-Year	4	\$35.00	\$291,200.00
5-Year	6	\$40.00	\$499,200.00

\* Column (e) determines if wage is commensurate to current wage ranges in the region the company plans to locate/is located. For these purposes the mean average hourly wage for the location has been used.

U = Unknown / data set for region is not currently available.

Source: Lighcast™ county wages based on the Bureau of Labor Statistics Occupational Employment and Wage Statistics program and county-level administrative wage data.

## 5(C) Evaluation of Health Plans Offered by Companies

Company Name: Dealer Tire Holdings LLC

County: Clark

Total Number of Full-Time Employees:

18

Average Hourly Wage per Employee

\$35.56

Average Annual Wage per Employee (implied)

\$73,956.71

### COST OF HEALTH INSURANCE

Annual Health Insurance Premium Cost:

\$20,100.00

Percentage of Premium Covered by:

Company

77%

Employee

23%

### HEALTH INSURANCE PLANS:

#### Base Health Insurance Plan\*:

#### PPO1

Deductible - per employee

\$ 1,000

Coinsurance

85%

Out-of-Pocket Maximum per employee

\$ 4,500

#### Additional Health Insurance Plan\*:

#### PPO2

Deductible - per employee

\$ 1,200

Coinsurance

80%

Out-of-Pocket Maximum per employee

\$ 5,000

#### Additional Health Insurance Plan\*:

#### PPO3

Deductible - per employee

\$ 1,400

Coinsurance

70%

Out-of-Pocket Maximum per employee

\$ 7,500

\*Note: **Please list only "In Network" for deductible and out of the pocket amounts.**

### Generalized Criteria for Essential Health Benefits (EHB)

*[following requirements outlined in the Affordable Care Act and US Code, including 42 USC Section 18022]*

Covered employee's premium not to exceed 9.5% of annual wage

8.1%

MEC

Annual Out-of-Pocket Maximum not to exceed \$9,200 (2025)

\$4,500

MEC

Minimum essential health benefits covered (Company offers PPO):

(A) Ambulatory patient services



(B) Emergency services



(C) Hospitalization



(D) Maternity and newborn care



(E) Mental health/substance use disorder/behavioral health treatment



(F) Prescription drugs



(G) Rehabilitative and habilitative services and devices



(H) Laboratory services



(I) Preventive and wellness services and chronic disease management



(J) Pediatric services, including oral and vision care



No Annual Limits on Essential Health Benefits



I, the undersigned, hereby declare to the Governor's Office of Economic Development that the facts herein stated are true, and that I have attached a qualified plan with information highlighting where our plan reflects meeting the 65% minimum threshold for the employee paid portion of the plan for GOED to independently confirm the same.

Michael Ricciardi

Name of person authorized for signature

Michael Ricciardi  
Signature

Director Enterprise Accounting

Title

4/22/25  
Date

## 5(D) Paid Family and Medical Leave (PFML)

Company Name: Dealer Tire Holdings LLC

County: Clark

*After October 1, 2023, if the business will have at least 50 full-time employees on the payroll of the business by the eighth calendar quarter following the calendar quarter in which the abatement becomes effective the business, by the earlier of the eighth calendar quarter following the calendar quarter in which the abatement becomes effective or the date on which the business has at least 50 full-time employees on the payroll of the business, has a policy for paid family and medical leave and agrees that all employees who have been employed by the business for at least 1 year will be eligible for at least 12 weeks of paid family and medical leave at a rate of at least 55 percent of the regular wage of the employee.*

I, the undersigned, hereby declare to the Governor's Office of Economic Development that the facts herein stated are true, and that the Applicant will meet this threshold for PFML.

- MICHAEL RECICARO  
Name of person authorized for signature  
- DIRECTOR ENTERPRISE ACCOUNTING  
Title

Michael Recicaro  
Signature  
4/22/25  
Date



## 5(E) Company Information

Company Name: Dealer Tire Holdings LLC

County: Clark

### Section I - Company Interest List

Directions: Please provide a detailed list of owners and/or members of the company. *The Governor's Office of Economic Development strives to maintain the highest standards of integrity, and it is vital that the public be confident of our commitment. Accordingly, any conflict or appearance of a conflict must be avoided. To maintain our integrity and credibility, the applicant is required to provide a detailed list of owners, members, equity holders and Board members of the company.*

(a) Name	(b) Title
Scott Mueller	CEO
<a href="https://www.dealertire.com/who-we-are/">https://www.dealertire.com/who-we-are/</a>	

### Section 2 - Company Affiliates and/or Subsidiaries

Are there any subsidiary or affiliate companies sharing tax liability with the applicant company? No ☒ Yes ☐

**If Yes, continue below:**

Directions: In order to include affiliates/subsidiaries, under the exemption letter, they must to be added to the Contract. Per standard practice GOED requires a corporate schematic to understand the exact relationships between the companies. Please populate the below table to show the exact relationships between the companies and include:

1. The names as they would read on the tax exemption letter.
2. Which entity(ies) will do the hiring?
3. Which entity(ies) will be purchasing the equipment?

Name of Subsidiary or Affiliate Entity, Role and Legal Control Relationship

Please include any additional details below:

**Entity Information****Entity Information****Entity Name:**

DEALER TIRE, LLC

**Entity Number:**

E24949592022-2

**Entity Type:**

Foreign Limited-Liability Company

**Entity Status:**

Active

**Formation Date:**

07/21/2022

**NV Business ID:**

NV20222524905

**Termination Date:****Annual Report Due Date:**

7/31/2025

**Compliance Hold:****Series LLC:**☐**Domicile Name:**

Dealer Tire, LLC

**Jurisdiction:**



**DealerTire<sup>®</sup>**

# The Dealer Tire Family of Companies

## Online Tire Sales

**Customers:** Tire Retailers (B2B), Tire Consumers (B2C), Tire Wholesalers & Tire Manufacturers

**End User Profile:** Used Vehicle Owners (2<sup>nd</sup>/3<sup>rd</sup> Replacement)

**DealerTire**

**SIMPLETIRE**

**ENT**

**Sonsio**

**AMI**  
AUTOMATED MEDIA, INC.

## Value Added Tire Distribution

**Customers:** Auto OEMs & Dealerships

**End User Profile:** New Vehicle Owners (1<sup>st</sup> Replacement)

## Automobile Reconditioning

**Customers:** Auto OEMs, Dealerships, Auctions & Rental Fleets

**End User Profile:** Used Vehicle Owners





We make it easy and profitable for automotive dealers and OEMs to sell the tires, accessories, services, and parts that drive customer loyalty and retention.

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# US Market Landscape

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**249M**

US Replacement  
Passenger/Light Truck  
Tires sold in 2023

**52.4M**

Passenger/Light Truck  
tires shipped to OE in  
2023 for new vehicle  
manufacturing

Most since 2018

**26M**

Tires purchased Online  
  
Expected to double by  
2030





# Dealer Channel Opportunity

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Why dealers are well-suited to sell tires:

- ✓ More than **17,000** physical locations
- ✓ **270 million** repair orders completed at auto dealerships every year
- ✓ **300,000+** service bays and **237,000+** factory-trained technicians
- ✓ Brand-specific expertise
- ✓ Established customer relationships



# World Class Service

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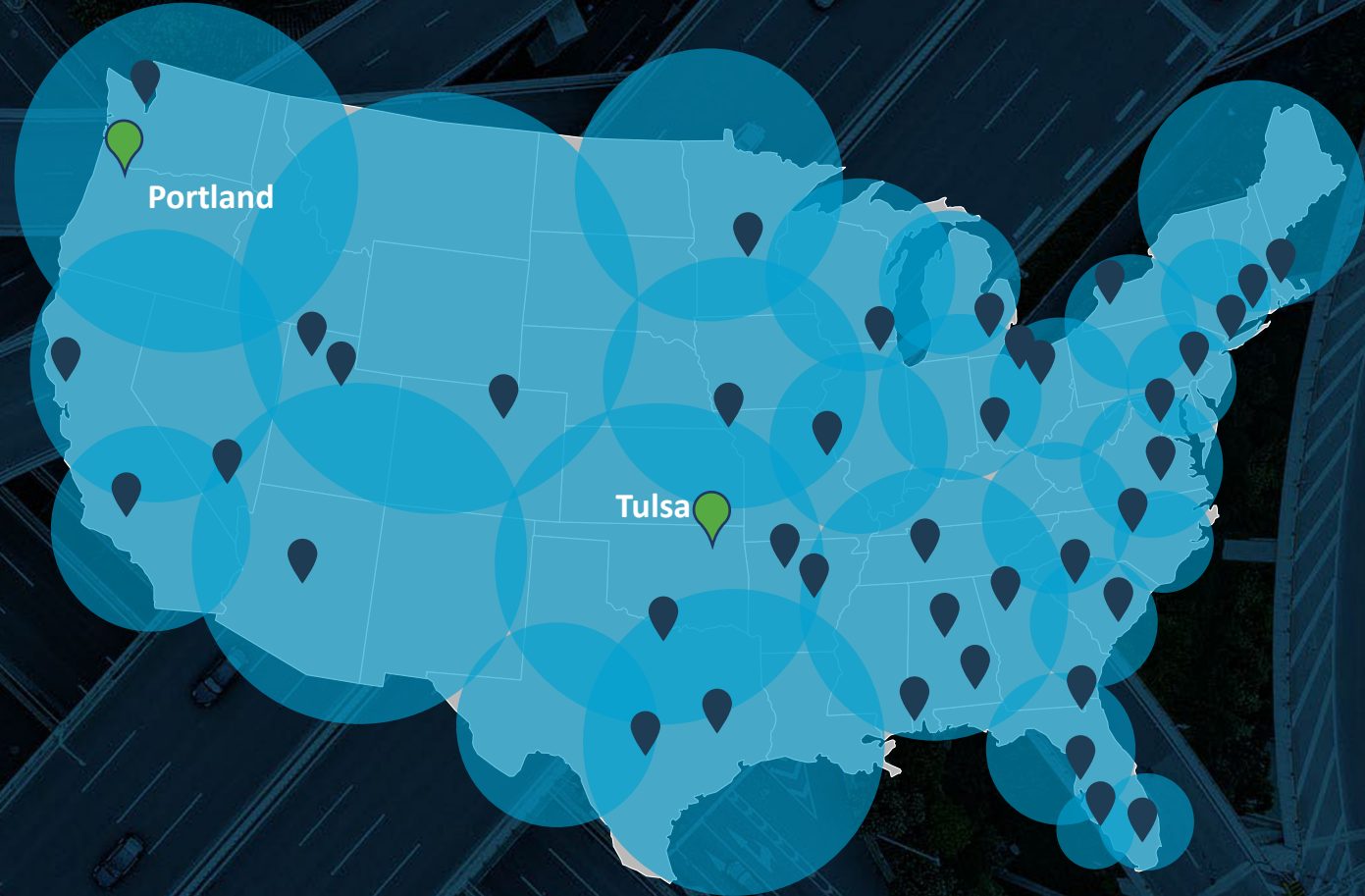
**40** Distribution Centers in the US

**99%** Same-Day or Next-Day Service

**99%** Local On-Time Delivery

**99+%** Inventory Accuracy

**99+%** Shipping Accuracy







***Thank You***