

**Board Summary**

**Advanced Technologies Management, Inc. dba Pictographics**

4830 West Ogendo Road, Las Vegas, 89118  
 Craig Miller, President and Chief Executive Officer  
 Commercial Printing

Date: May 17, 2018  
 Main Location: Carson City

Business Type: Expansion County: Clark County Development Authority Representative: Perry Ursem - LVGEA

**APPLICATION HIGHLIGHTS**

- Advanced Technologies Management, Inc. dba Pictographics (Pictographics) plans to expand its existing southern Nevada manufacturing facility in conjunction with leasing or purchasing a second facility.
- Pictographics has been the principal graphics provider for the Fiesta Bowl, BCS National Championship, NBA All Star Games, and for key exhibitors at the Consumer Electronics Show (CES) including Intel, Nokia, and LG Electronics.
- The company started as a family-run, suburban home-based, credit-card-financed business and evolved into a 'world class' company.

**PROFILE**

Pictographics is an industry leader in print technology, utilizing the latest hardware to deliver the highest quality products with environmentally friendly inks and paper. The company produces graphics for events, trade shows, interior design, and architectural installations and is also a manufacturer for strategic partners. Pictographics' services include 3D Modeling/Printing, Advertising Campaigns, Booth Design, Convention and Trade Shows, Corrugated Packaging POP UP Displays, Event Graphics and Logos, Flags, Floor Graphics, Laser Etch/Cut, Set Design, Show Displays, Graphics Workstations, Vehicle Wrap Graphics, Wall Coverings, and Window Vision Graphics. The company has provided graphics for Ford and Daimler Chrysler at NADA, SEMA, and Barrett Jackson; and Mazda at the New York Auto Show. In recent months the company has provided corporate event graphics for Paul Mitchell, Pepsi, Mac Truck, Panasonic, Nortel; Daimler Chrysler; Erickson; Ford, Lincoln, Mercury; and American Express. Pictographics continues to expand its market by becoming a total solution provider and by partnering with other solutions companies. *Source: Advanced Technologies Management, Inc. dba Pictographics*

**SIGNIFICANCE OF ABATEMENTS IN THE COMPANY'S DECISION TO RELOCATE/EXPAND**

The economic development incentives offered by the State of Nevada are an essential element in converting the company's ambitious expansion plans into a reality. The company's plans are also consistent with Governor Sandoval's initiative to provide Nevadans with quality, long-term jobs and career opportunities, and to diversify Nevada's economy by increasing manufacturing and high-tech industries and promote sales outside the state and country. *Source: Advanced Technologies Management, Inc. dba Pictographics*

REQUIREMENTS	Statutory	Application	Sufficient	% Over / Under
Job Creation	25	27		8%
Average Wage	\$21.95	\$27.35	Company meets	25%
Equipment Capex (SU & MBT)	\$74,402	\$14,061,134	abatement eligibility	18799%
Equipment Capex (PP)	\$74,402	\$14,061,134	requirements	18799%

INCENTIVES	Requested Terms	Estimated \$ Amount
Sales Tax Abmt.	2% for 2 years	\$878,821
Modified Business Tax Abmt.	50% for 4 years	\$49,243
Personal Property Tax Abmt.	50% for 10 years	\$206,841
<b>Total</b>		<b>\$1,134,905</b>

**NEVADA BUSINESS LICENSE**

- Current  Pending  Will comply before receiving incentives

JOB CREATION	Contracted	24-Month Projection	5-Year Projection
	25	27	50

OTHER CAPITAL INVESTMENT	Land	Building Purchase	BTS / Building Improvements
	\$0	\$3,000,000	\$500,000

ECONOMIC IMPACT ESTIMATES (10-Year Cumulative)	Total	Construction
Total Jobs Supported	107	5
Total Payroll Supported	\$47,309,273	\$228,827
Total Output Estimate	\$200,987,199	\$788,649

Estimate includes jobs, payroll & output by the company assisted as well as the secondary impacts to other local businesses.

NEW TAX REVENUE ESTIMATES (10-Year Cumulative)	Direct	Indirect	Total
<b>Local Taxes</b>			
Property	\$538,794	\$1,563,267	<b>\$2,102,061</b>
Sales	\$20,313	\$861,010	<b>\$881,323</b>
Lodging	\$0	\$60,758	<b>\$60,758</b>
<b>State Taxes</b>			
Property	\$29,469	\$91,023	<b>\$120,492</b>
Sales	\$287,723	\$293,317	<b>\$581,040</b>
Modified Business	\$283,641	\$274,718	<b>\$558,359</b>
Lodging	\$0	\$20,506	<b>\$20,506</b>
<b>Total</b>	<b>\$1,159,940</b>	<b>\$3,164,599</b>	<b>\$4,324,539</b>

**EMPLOYEE BENEFITS**

- Percentage of health insurance covered by company: 65%.
- Health care package cost per employee - \$6,850 annually with options for dependents.
- Overtime, PTO/Sick/Vacation, Merit Increases, Tuition Assistance, Bonus.

**NOTES**

- Percentage of revenue generated by the new jobs contained in this application from outside Nevada: 60%.



April 5, 2018

Mr. Paul Anderson

Executive Director  
Nevada Governor's Office of Economic Development  
555 E. Washington Avenue, Suite 5400  
Las Vegas, Nevada 89101

Dear Mr. Anderson,

Advanced Technologies Management, Inc. (dba "Pictographics") is applying to the State of Nevada for the Sales and Use Tax Abatement, Modified Business Tax Abatement, and Personal Property Tax Abatement. We request their application be placed on the agenda for the May 2018 GOED Board Meeting.

Pictographics is exploring their options to expand operations in Southern Nevada from a current staff of 18 by hiring 27 additional employees over the next 24 months. These new hires will make an average hourly wage of \$27.35 and be provided with a generous health benefits package. Pictographics will make a capital investment of \$17.7 million dollars, which includes approximately \$14.2 million in capital equipment.

Our team has reviewed Pictographic's application and found it to comply with Nevada's statutory requirements for tax abatements. This application has the full support and endorsement of the Las Vegas Global Economic Alliance. We appreciate your consideration in this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Perry Ursem", written over a horizontal line.

Perry Ursem  
Vice President, Business Retention and Expansion

Enclosure

## Craig M. Miller, CEO

Advanced Technologies Management, Inc.  
D.B.A. Pictographics  
4830 W. Oquendo Road  
Las Vegas, Nevada  
(702) 947-0112  
cmiller@pictographics.net

May 10, 18

Mr. Paul Anderson, Executive Director  
Nevada Governor's Office of Economic Development  
555 E. Washington, Suite 5400  
Las Vegas, NV 89101

Dear Mr. Anderson,

Please accept this letter and the attached application as Advanced Technologies Management Inc. (ATM) request for tax incentives to facilitate our adoption of advanced 3D technologies and expansion in Nevada. In the next two years we will purchase in excess of \$10M of advanced 3D printing equipment. In the next six months alone, we will hire 28 people with an average wage of \$28.44 an hour.

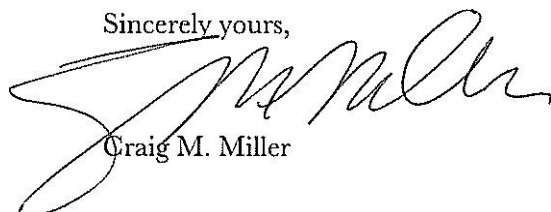
ATM/Pictographics is a closely held family corporation that was founded in February 1994 as a sole proprietorship and converted to a C Corp in 1997. Adopting cutting-edge of digital-print technologies has been the hallmark of the Company throughout its 24-year history. Our technologies, "blue-chip" international clients, projects, and markets are too numerous to mention in an introductory letter.

We will expand our floor space for manufacturing by erecting mezzanines in our 20,000-sq. ft. stand-alone building. We will lease or buy a second facility to segregate incompatible manufacturing methods.

Nevada GOED incentives are an essential element in converting these ambitious plans into a reality and be consistent with Governor Sandoval's initiative to provide Nevadans with good-paying, long-term jobs, and career opportunities; diversify the Nevada's economy by increasing manufacturing and high-tech industries to and promote sales outside the state and country.

We appreciate the work of Las Vegas office of the Global Economic Alliance, especially Perry Ursem. He has spent hours with us explaining the program and helping us prepare for the application.

Sincerely yours,



Craig M. Miller

**ECONOMIC DEVELOPMENT**

**Incentive Application**

Company Name: Advanced Technologies Management, Inc.  
 Date of Application: April 4, 2018

Company is an / a: (check one)  
 New location in Nevada  
 Expansion of a Nevada company

**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
- Sales & Use Tax Deferral
- Recycling Real Property Tax Abatement
- Other: \_\_\_\_\_

**Section 2 - Corporate Information**

COMPANY NAME (Legal name under which business will be transacted in Nevada) <u>Advanced Technologies Management, Inc (D.B.A. Pictographics)</u>			FEDERAL TAX ID # <u>86-0872251</u>
CORPORATE ADDRESS <u>4830 West Oqendo Road</u>	CITY / TOWN <u>Las Vegas</u>	STATE / PROVINCE <u>NV</u>	ZIP <u>89118</u>
MAILING ADDRESS TO RECEIVE DOCUMENTS (If different from above) <u>4830 West Oqendo Road</u>	CITY / TOWN <u>Las Vegas</u>	STATE / PROVINCE <u>NV</u>	ZIP <u>89118</u>
TELEPHONE NUMBER <u>702-947-0112</u>	WEBSITE <u><a href="http://www.pictographics.net">www.pictographics.net</a></u>		
COMPANY CONTACT NAME <u>Craig Miller</u>	COMPANY CONTACT TITLE <u>President/CEO</u>		
E-MAIL ADDRESS <u><a href="mailto:cmiller@pictographics.net">cmiller@pictographics.net</a></u>	PREFERRED PHONE NUMBER <u>702-595-0366</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):  
 Personal property tax: 50% for 10 Years, Date approved: March 3, 2003, Status: Closed.

**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 quarter in which the abatement becomes effective. In rural areas, the requirement is ten (10) or more. For an expansion, the business must 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 urban 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 in rural areas, the average hourly wage will equal or exceed the lesser of the county-wide average hourly wage or statewide average hourly wage.

Note: Criteria is different depending on whether the business is in a county whose population is 100,000 or more or a city whose population is 60,000 or more ("urban" area), or if the business is in a county whose population is less than 100,000 or a city whose 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>60%</u>	EXPECTED DATE OF NEW / EXPANDED OPERATIONS (MONTH / YEAR) <u>Apr-2018</u>		
NAICS CODE / SIC <u>323111</u>	INDUSTRY TYPE <u>Commercial Printing</u>		
DESCRIPTION OF COMPANY'S NEVADA OPERATIONS <u>Large &amp; Grand Format digital printing, design, fabrication, &amp; Installation - 3D Printing &amp; Additive Manufacturing, Design, Scanning, &amp; Finishing</u>			
PROPOSED / ACTUAL NEVADA FACILITY ADDRESS <u>4830 W. Oquendo Road</u>	CITY / TOWN <u>Las Vegas</u>	COUNTY <u>Clark County</u>	ZIP <u>89118</u>

WHAT OTHER STATES / REGIONS / CITIES ARE BEING CONSIDERED FOR YOUR COMPANY'S RELOCATION / EXPANSION / STARTUP?

**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%.

**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
Part 1. Are you currently/planning on leasing space in Nevada? _____ <b>If No, skip to Part 2. If Yes, continue below:</b> What year(s)? _____ How much space (sq. ft.)? _____ Annual lease cost of space: _____ Do you plan on making building tenant improvements? _____ <b>If No, skip to Part 2. If Yes *, continue below:</b> When to make improvements (month, year)? _____	Part 1. Are you currently leasing space in Nevada? <u>No</u> <b>If No, skip to Part 2. If Yes, continue below:</b> What year(s)? _____ How much space (sq. ft.)? _____ Annual lease cost at current space: _____ Due to expansion, will you lease additional space? _____ <b>If No, skip to Part 3. If Yes, continue below:</b> Expanding at the current facility or a new facility? _____ What year(s)? _____ How much expanded space (sq. ft.)? _____ Annual lease cost of expanded space: _____ Do you plan on making building tenant improvements? _____ <b>If No, skip to Part 3. If Yes *, continue below:</b> When to make improvements (month, year)? _____
Part 2. Are you currently/planning on buying an owner occupied facility in Nevada? _____ <b>If No, skip to Part 3. If Yes *, continue below:</b> Purchase date, if buying (month, year): _____ How much space (sq. ft.)? _____ Do you plan on making building improvements? _____ <b>If No, skip to Part 3. If Yes *, continue below:</b> When to make improvements (month, year)? _____	Part 2. Are you currently operating at an owner occupied building in Nevada? <u>Yes</u> <b>If No, skip to Part 3. If Yes, continue below:</b> How much space (sq. ft.)? <u>20,000</u> Current assessed value of real property? <u>\$3,000,000.00</u> Due to expansion, will you be making building improvements? <u>Yes</u> <b>If No, skip to Part 3. If Yes *, continue below:</b> When to make improvements (month, year)? <u>Jun-2018</u>
Part 3. Are you currently/planning on building a build-to-suit facility in Nevada? _____ <b>If Yes *, continue below:</b> When to break ground, if building (month, year)? _____ Estimated completion date, if building (month, year): _____ How much space (sq. ft.)? _____	Part 3. Do you plan on building or buying a new facility in Nevada? <u>Yes</u> <b>If Yes *, continue below:</b> Purchase date, if buying (month, year): <u>Jun-2018</u> When to break ground, if building (month, year)? <u>N/A</u> Estimated completion date, if building (month, year): <u>N/A</u> How much space (sq. ft.)? <u>20,000</u>

**\* 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):

In addition to the estimated \$500,000 in tennent improvements that will be made to our existing site, we also plan to build and purchase an additional 20,000 sq. ft. to provide the necessary space for equipment and projects being planned.

**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):  Building Purchase (if buying): _____ Building Costs (if building / making improvements): _____ Land: _____ Equipment Cost: _____ <b>Total:</b> _____	How much capital investment is planned? (Breakout below):  Building Purchase (if buying): <u>\$3,000,000</u> Building Costs (if building / making improvements): <u>\$500,000</u> Land: <u>N/A</u> Equipment Cost: <u>\$14,061,134</u> <b>Total:</b> <u>\$17,561,134</u>  Is the equipment purchase for replacement of existing equipment? <u>No</u> Current assessed value of personal property in NV: <u>\$130,204</u> (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?: _____ Average hourly wage of these <u>new</u> employees: _____	How many full-time equivalent (FTE*) employees will be created by the end of the first eighth quarter of expanded operations?: <u>27</u> Average hourly wage of these <u>new</u> employees: <u>\$27.35</u>  How many FTE employees prior to expansion?: <u>18</u> Average hourly wage of these <u>existing</u> employees: <u>\$20.77</u>  Total number of employees after expansion: <u>45</u>

\* 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 type="checkbox"/> COLA adjustments           | <input type="checkbox"/> Retirement Plan / Profit Sharing / 401(k) | <input checked="" type="checkbox"/> Other: <u>Stock Option</u> |

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

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

Is health insurance for employees and an option for dependents offered?:  Yes (**copy of benefit plan must be attached**)  No

Package includes (check all that apply):

- Medical       Vision       Dental       Other: Colonial Life

Qualified after (check one):

- Upon employment       Three months after hire date       Six months after hire date       Other: \_\_\_\_\_

Health Insurance Costs:	Percentage of health insurance coverage by (min 65%):
Cost of health insurance for company (annual amount per employee): <u>\$ 6,850.00</u>	Company: <u>65%</u>
Health Plan annual out-of-pocket maximum (individual): <u>\$ 3,217.80</u>	Employee: <u>35%</u>

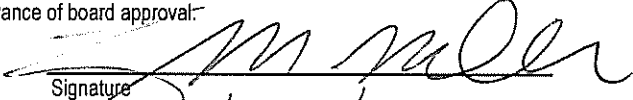
**section 10 - Certification**

**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.

Craig M Miller  
Name of person authorized for signature

  
Signature

CEO  
Title

03/23/2018  
Date

**Nevada Governor's Office of Economic Development**  
555 E. Washington Ave., Ste 5400 • Las Vegas, Nevada 89101 • 702.486.2700 • (Fax) 702.486.2701 • [www.diversifynevada.com](http://www.diversifynevada.com)

## Site Selection Factors

Company Name: Advanced Technologie Management, Inc.

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.

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Availability of qualified workforce:	<u>5</u>	Transportation infrastructure:	<u>5</u>
Labor costs:	<u>4</u>	Transportation costs:	<u>4</u>
Real estate availability:	<u>5</u>	State and local tax structure:	<u>5</u>
Real estate costs:	<u>4</u>	State and local incentives:	<u>5</u>
Utility infrastructure:	<u>5</u>	Business permitting & regulatory structure:	<u>5</u>
Utility costs:	<u>5</u>	Access to higher education resources:	<u>5</u>

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



## 5(A) Capital Equipment List

Company Name: Advanced Technologies Management, Inc.

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. Attach this form to the Incentives Application.

(a) Equipment Name/Description	(b) # of Units	(c) Price per Unit	(d) Total Cost
Mimaki 3DUJ-553 Color 3D printer	12	\$175,000.00	\$2,100,000.00
Markforged X7 Carbon Fiber 3D printer	10	\$77,499.00	\$774,990.00
Markforged Metal X Metal 3D printer	10	\$130,230.00	\$1,302,300.00
HP Jet Fusion 4210 High Volume Industrial 3D printer	10	\$400,000.00	\$4,000,000.00
HP Jet Fusion 580 Industrial Color 3D printer	10	\$100,000.00	\$1,000,000.00
Omegasonic Ultrasonic Cleaner	25	\$12,000.00	\$300,000.00
Apple iMac Pro	20	\$4,999.00	\$99,980.00
Marvel Industrial Coatings Complete Polyuria Spray System	1	\$44,800.00	\$44,800.00
Twindom 360 3D Scanning Booth	1	\$26,000.00	\$26,000.00
Scamera 360 3D Scanning Booth	1	\$32,000.00	\$32,000.00
MCT Digital Versa Tech2 3.2X3.2 meter laser CNC cutting system	3	\$244,430.00	\$733,290.00
Computer Equipment for CAD	5	\$25,000.00	\$125,000.00
Large Frame Fusion Deposition Modeling Production Specialty Printers	10	\$100,000.00	\$1,000,000.00
Small Frame Fusion Deposition Modeling Production Specialty Printers	100	\$800.00	\$80,000.00
Rheometer	1	\$75,000.00	\$75,000.00
Industrial 3D scanner	1	\$75,000.00	\$75,000.00
Event Booth and display equipment	1	\$25,000.00	\$25,000.00
Fiber Yag Laser	1	\$100,000.00	\$100,000.00
Portable Mazanenes	12	\$1,750.00	\$21,000.00
Ortery 3D MFP small scale hybred photogrammitry device.	1	\$45,000.00	\$45,000.00
Fiber Yag Laster	1	\$120,000.00	\$120,000.00
Epson 850 Pro scanner	1	\$1,000.00	\$1,000.00
Hasselblad H6D-400C with lenses and accessories	1	\$56,000.00	\$56,000.00
Agisoft Photoscan Pro multi user Photogrammitry	1	\$4,999.00	\$4,999.00
Finishing Tools Kit	1	\$25,000.00	\$25,000.00
Media Blaster	1	\$2,500.00	\$2,500.00
Union Tech SLA 3D printer	25	\$25,000.00	\$625,000.00
Large Frame Vacuum Form Table	5	\$25,000.00	\$125,000.00
Office Furniture	27	\$2,000.00	\$54,000.00
Telephone Systems	27	\$225.00	\$6,075.00
Cell Phones	12	\$600.00	\$7,200.00
Investment Casting System	1	\$50,000.00	\$50,000.00
Chocolate Temering Machines	25	\$8,000.00	\$200,000.00
Automatic Packaging Equipment	4	\$50,000.00	\$200,000.00
Inspection Equipment	1	\$125,000.00	\$125,000.00
Robotic Arm Pick and Place	4	\$125,000.00	\$500,000.00
<b>TOTAL EQUIPMENT COST</b>			<b>\$14,061,134.00</b>

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: Advanced Technologies Management, Inc

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.

(a) New Hire Position Title/Description	(b) Number of Positions	(c) Average Hourly Wage	(d) Average Weekly Hours	(e) Annual Wage per Position	(f) Total Annual Wages
Front office	8	\$21.81	40	\$45,364.80	\$362,918.40
Designers	4	\$30.72	40	\$63,897.60	\$255,590.40
Sales	3	\$41.35	40	\$86,008.00	\$258,024.00
Technicians	7	\$24.00	40	\$49,920.00	\$349,440.00
President	1	\$55.00	40	\$114,400.00	\$114,400.00
Programmers	2	\$25.00	40	\$52,000.00	\$104,000.00
Finishers	2	\$22.00	40	\$45,760.00	\$91,520.00
<b>TOTAL</b>	<b>27</b>	<b>\$27.35</b>			<b>\$1,535,892.80</b>

### Section 2 - Employment Projections

Directions: Please estimate full-time job growth in Section 2, complete [columns (b) through (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 estimates on a year by year basis (not cumulative amounts)**

(a) Year	(b) Number of FTE(s) Projected	(c) Average Hourly Wage	(d) Payroll
3-Year	47	\$28.00	\$2,737,280.00
4-Year	50	\$30.00	\$3,120,000.00
5-Year	50	\$30.00	\$3,120,000.00

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

Company Name: Advanced Technologies Management, Inc. County: Clark

Total Number of Full-Time Employees: 27

Average Hourly Wage per Employee \$27.35  
 Average Annual Wage per Employee (implied) \$56,884.92

Annual Cost of Health Insurance per Employee \$6,850.00  
 Percentage of Cost Covered by:  
     Company 65%  
     Employee 35%

Health Plan Annual Out-of-Pocket Maximum \$3,218

### 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	6.48%	MMQ
Annual Out-of-Pocket Maximum not to exceed \$7,150 (2017)	\$3,218	MMQ

Minimum essential health benefits covered (Company offers PPO):

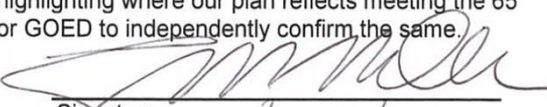
- (A) Ambulatory patient services
- (B) Emergency services
- (C) Hospitalization
- (D) Maternity and newborn care
- (E) Mental health/substance use disorder/behavioral health treatment
- (F) Prescription drugs
- (G) Rehabilitative and habilitative services and devices
- (H) Laboratory services
- (I) 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 sufficient plan 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.

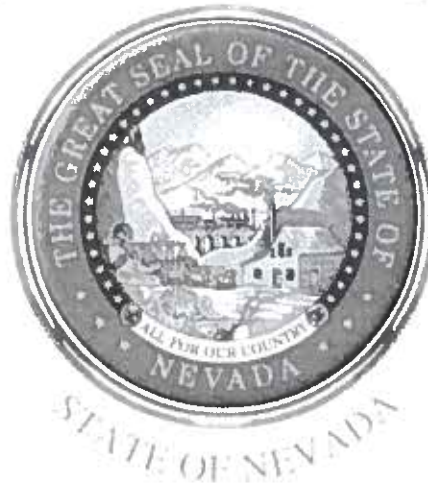
Craig M Miller  
 Name of person authorized for signature

CEO  
 Title

  
 Signature

03/23/2018  
 Date

SECRETARY OF STATE



# NEVADA STATE BUSINESS LICENSE

**ADVANCED TECHNOLOGIES MANAGEMENT, INC.**

Nevada Business Identification # NV19971147988

**Expiration Date: April 30, 2019**

In accordance with Title 7 of Nevada Revised Statutes, pursuant to proper application duly filed and payment of appropriate prescribed fees, the above named is hereby granted a Nevada State Business License for business activities conducted within the State of Nevada.

Valid until the expiration date listed unless suspended, revoked or cancelled in accordance with the provisions in Nevada Revised Statutes. License is not transferable and is not in lieu of any local business license, permit or registration.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on April 13, 2018

*Barbara K. Cegavske*

Barbara K. Cegavske  
Secretary of State

***You may verify this license at [www.nvsos.gov](http://www.nvsos.gov) under the Nevada Business Search.***

**License must be cancelled on or before its expiration date if business activity ceases. Failure to do so will result in late fees or penalties which by law cannot be waived.**