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

2017

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2017 or fiscal plan year beginning 01/01/2017 and ending 12/31/2017

A This return/report is for:
- [ ] a multiemployer plan
- [ ] a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
- [X] 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:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
THE DURANT AUTO GROUP 401(K) PLAN

1b Three-digit plan number (PN) ▶ 002

1c Effective date of plan 01/01/1978

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)
CLASSIC CHEVROLET BUICK GMC, INC.

1101 W HIGHWAY 114
GRAPEVINE, TX 76051

2b Employer Identification Number (EIN)
75-1159462

2c Plan Sponsor's telephone number
817-421-1200

2d Business code (see instructions)
441110

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.	10/11/2018	KRISTIN MITCHELL
	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 [X] 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**	2281
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	**6a(1)**	2045
a(2) Total number of active participants at the end of the plan year	**6a(2)**	2109
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	300
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	2409
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f Total. Add lines **6d** and **6e**.	**6f**	2409
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	1875
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	285
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:

2F 2G 2J 2K 2R 2S 2T 2E

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply)

(1)	[ ]	Insurance
(2)	[ ]	Code section 412(e)(3) insurance contracts
(3)	[X]	Trust
(4)	[ ]	General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

(1)	[ ]	Insurance
(2)	[ ]	Code section 412(e)(3) insurance contracts
(3)	[X]	Trust
(4)	[ ]	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

(1)	[X]	**R** (Retirement Plan Information)
(2)	[ ]	**MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
(3)	[ ]	**SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

(1)	[X]	**H** (Financial Information)
(2)	[ ]	**I** (Financial Information – Small Plan)
(3)	[ ] ___	**A** (Insurance Information)
(4)	[X]	**C** (Service Provider Information)
(5)	[ ]	**D** (DFE/Participating Plan Information)
(6)	[ ]	**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 2017 Form M-1 annual report. If the plan was not required to file the 2017 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_____

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.**	**2017** **This Form is Open to Public Inspection.**

For calendar plan year 2017 or fiscal plan year beginning 01/01/2017 and ending 12/31/2017

A Name of plan
THE DURANT AUTO GROUP 401(K) PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
CLASSIC CHEVROLET BUICK GMC, INC.

D Employer Identification Number (EIN)
75-1159462

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).. . . . . [X] 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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(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)

MILBURN RAY AND COMPANY

75-1793612

(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	ACCOUNTANT/AUDITOR	75925	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(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?
60 64 65 71	RECORDKEEPER	72124	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

WIMMER CONSULTING

26-0637928

(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	ADVISOR	19572	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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)

(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?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

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

(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?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

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

(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?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
WASATCH EMERGING INDIA FUND	505 WAKARA WAY SUITE 300 SALT LAKE CITY, UT 84108	0.40%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
ALPS CORECOMM MGMT COMP COMM STRT I	1290 BROADWAY SUITE 1100 DENVER, CO 80203	0.40%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
DEUTSCHE ENHANCED COMMODITY STRATEG	280 PARK AVE FINANCE PCAM CTRL 9TH NEW YORK, NY 10026	0.40%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
AM CENT OC IN RTM IV - AMERICAN CE 44-0619208	0.35%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
AM CENT OC 2020 INV - AMERICAN CEN 44-0619208	0.35%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
AM CENT OC 2025 INV - AMERICAN CEN 44-0619208	0.35%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
AM CENT OC 2030 INV - AMERICAN CEN 44-0619208	0.35%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
AM CENT OC 2035 INV - AMERICAN CEN 44-0619208	0.35%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
AM CENT OC 2040 INV - AMERICAN CEN 44-0619208	0.35%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
AM CENT OC 2045 INV - AMERICAN CEN 44-0619208	0.35%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
AM CENT OC 2050 INV - AMERICAN CEN 44-0619208	0.35%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
AM CENT OC 2055 INV - AMERICAN CEN 44-0619208	0.35%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
INVS DIVRS DIVD R5 - INVESCO INVES	11 GREENWAY PLAZA, SUITE 100 HOUSTON, TX 77046	0.35%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
INVS HIGH YLD R5 - INVESCO CANADA	5140 YONGE STREET, SUITE 900 TORONTO, ON M2N 6 CA	0.35%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
INVS INTL GROWTH R5 - INVESCO CANA	5140 YONGE STREET, SUITE 900 TORONTO, ON M2N 6 CA	0.35%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
J H TRITON T - JANUS SERVICES LLC 43-1804048	0.35%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
METWEST TOT RTN BD M - BNY MELLON P.O. BOX 9793 PROVIDENCE, RI 02940	0.35%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
NB MDCP GRTH TRUST - STATE STREET 04-0025081	0.40%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
PIM STKPLUS SM A - BOSTON FINANCIA	P.O. BOX 8480 BOSTON, MA 02266	0.45%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
VRTS C MDCP VAL EQ I - VIRTUS FUND	4400 COMPUTER DRIVE WESTBOROUGH, MA 01581	0.40%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
WF EMRG MKTS EQ IS - BOSTON FINANC	P.O. BOX 8480 BOSTON, MA 02266	0.15%

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)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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

2017

This Form is Open to Public Inspection

For calendar plan year 2017 or fiscal plan year beginning 01/01/2017 and ending 12/31/2017

A Name of plan
THE DURANT AUTO GROUP 401(K) PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
CLASSIC CHEVROLET BUICK GMC, INC.

D Employer Identification Number (EIN)
75-1159462

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.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	246
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	2719536	2050391
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	408823	690794
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	0	0
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	34035287	41719986
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	0	0

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	**1d(1)**	0	0
	(2) Employer real property	**1d(2)**	0	0
e	Buildings and other property used in plan operation	**1e**	0	0
f	Total assets (add all amounts in lines 1a through 1e)	**1f**	37163646	44461417
	Liabilities			
g	Benefit claims payable	**1g**	0	0
h	Operating payables	**1h**	0	0
i	Acquisition indebtedness	**1i**	0	0
j	Other liabilities	**1j**	0	0
k	Total liabilities (add all amounts in lines 1g through1j)	**1k**	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	**1l**	37163646	44461417

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)**	1282429	
	(B) Participants	**2a(1)(B)**	4448278	
	(C) Others (including rollovers)	**2a(1)(C)**	200790	
	(2) Noncash contributions	**2a(2)**	0	
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	**2a(3)**		5931497
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	**2b(1)(A)**	14205	
	(B) U.S. Government securities	**2b(1)(B)**	0	
	(C) Corporate debt instruments	**2b(1)(C)**	0	
	(D) Loans (other than to participants)	**2b(1)(D)**	0	
	(E) Participant loans	**2b(1)(E)**	0	
	(F) Other	**2b(1)(F)**	0	
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	**2b(1)(G)**		14205
	(2) Dividends: **(A)** Preferred stock	**2b(2)(A)**	0	
	(B) Common stock	**2b(2)(B)**	3660	
	(C) Registered investment company shares (e.g. mutual funds)	**2b(2)(C)**	1416619	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	**2b(2)(D)**		1420279
	(3) Rents	**2b(3)**		0
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	**2b(4)(A)**	1254451	
	(B) Aggregate carrying amount (see instructions)	**2b(4)(B)**	1321809	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	**2b(4)(C)**		-67358
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	**2b(5)(A)**	0	
	(B) Other	**2b(5)(B)**	79501	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	**2b(5)(C)**		79501

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		3586939
c Other income	2c		0
d Total income. Add all **income** amounts in column (b) and enter total	2d		10965063
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	3472940	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		3472940
f Corrective distributions (see instructions)	2f		26434
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses: (1) Professional fees	2i(1)	0	
(2) Contract administrator fees	2i(2)	0	
(3) Investment advisory and management fees	2i(3)	3834	
(4) Other	2i(4)	164084	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		167918
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		3667292
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		7297771
l Transfers of assets:			
(1) To this plan	2l(1)		0
(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) ☐ Unqualified **(2)** ☐ Qualified **(3)** ☒ Disclaimer **(4)** ☐ Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? ☒ Yes ☐ No

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

(1) Name: MILBERN RAY AND COMPANY, LLP **(2)** EIN: 75-1793612

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, 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.

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.)	4a	X		177339
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.)	4b		X	

			Yes	No	Amount
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.)	4c		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.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		500000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		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?	4g		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?	4h		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.)	4i	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.)	4j		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?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		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.	4n			

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 If the plan is a defined benefit plan, is it covered under the PBGC insurance program (See ERISA section 4021.)? ..... ☐ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year_____. (See instructions.)

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under sections 104 and 4065 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

2017

This Form is Open to Public Inspection.

For calendar plan year 2017 or fiscal plan year beginning 01/01/2017 and ending 12/31/2017

A Name of plan
THE DURANT AUTO GROUP 401(K) PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
CLASSIC CHEVROLET BUICK GMC, INC.

D Employer Identification Number (EIN)
75-1159462

Part I Distributions

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1**

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 04-6568107

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year **3**

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 **a** Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☐ **No**

Part IV ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 **a** Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14 Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	**14a**	
b The plan year immediately preceding the current plan year	**14b**	
c The second preceding plan year	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

19 If the total number of participants is 1,000 or more, complete lines (a) through (c)

a Enter the percentage of plan assets held as:
Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate line 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

DURANT AUTO GROUP 401(K) PLAN

FINANCIAL STATEMENTS

DECEMBER 31, 2017 AND 2016

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Milbern Ray and Company
L.L.P.
Certified Public Accountants

MILBERN D. RAY, C.P.A., 1933-2006
RONALD D. RAY, C.P.A.
KENT A. RAY, C.P.A.

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MEMBER:
AMERICAN INSTITUTE
OF CERTIFIED PUBLIC
ACCOUNTANTS

INDEPENDENT AUDITOR'S REPORT

To the Durant Auto Group 401(k) Plan and Participants
Grapevine, Texas

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Durant Auto Group 401(k) Plan, which comprise the statements of net assets available for benefits – modified cash basis as of December 31, 2017 and 2016, and the related modified cash basis statement of changes in net assets available for benefits for the year ended December 31, 2017, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with the modified cash basis of accounting; this includes determining that the modified cash basis of accounting is an acceptable basis for the preparation of the financial statements in the circumstances. Management is also responsible 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.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 5, which was certified by Fidelity Management Trust Company, the custodian of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan administrator that the custodian holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained certifications from the custodian as of December 31, 2017 and 2016, and for the year ended December 31, 2017, that the information provided to the Plan administrator by the custodian is complete and accurate.



Disclaimer of Opinion

Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Basis of Accounting

We draw attention to Note 2 to the financial statements, which describes the basis of accounting. The financial statements are prepared on the modified cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our opinion is not modified with respect to this matter.

Report on Supplementary Information

The supplemental schedules of delinquent participant contributions and assets (held at end of year) as of December 31, 2017 are required by the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on these supplemental schedules.

Report on Form and Content in Compliance With DOL Rules and Regulations

The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified by the custodian, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Milbern Ray LLP

October 10, 2018

Grapevine, Texas

Milbern Ray and Company
L.L.P.
Certified Public Accountants

DURANT AUTO GROUP 401(K) PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS - MODIFIED CASH BASIS

DECEMBER 31, 2017 AND 2016

	2017	2016
ASSETS		
Non interest-bearing cash	$ -	$ -
Investments:		
Mutual funds	41,577,181	34,035,287
Interest-bearing cash	1,750,178	2,380,771
Self-directed brokerage	1,134,058	747,588
At fair value	44,461,417	37,163,646
Total assets	44,461,417	37,163,646
NET ASSETS AVAILABLE FOR BENEFITS	$ 44,461,417	$ 37,163,646

See independent auditor's report and notes to financial statements, which are an integral part of these statements.

DURANT AUTO GROUP 401(K) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS - MODIFIED CASH BASIS
YEAR ENDED DECEMBER 31, 2017

INVESTMENT AND CONTRIBUTION ACTIVITY		
Additions to net assets attributed to:		
Investment activity:		
Net appreciation in investments carried at fair value	$	3,599,082
Interest and dividends		1,434,484
		5,033,566
Contributions:		
Participants' deferrals		4,448,278
Participants' rollovers		200,790
Employers' matching		1,282,429
		5,931,497
TOTAL INVESTMENT AND CONTRIBUTION ACTIVITY		10,965,063
DEDUCTIONS		
Deductions from net assets attributed to:		
Administrative expenses		167,918
Benefits paid to participants		3,499,374
TOTAL DEDUCTIONS		3,667,292
NET INCREASE		7,297,771
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year		37,163,646
END OF YEAR	$	44,461,417

See independent auditor's report and notes to financial statements, which are an integral part of these financial statements.

Note 1 **DESCRIPTION OF PLAN**

The following description of the Durant Auto Group 401(k) Plan (Plan) provides only general information. Participants should refer to the plan document for a more complete description of the Plan's provisions. The Plan is a defined contribution plan for the benefit of the employees of Classic Chevrolet, Inc. (GPVN), Classic Chevrolet Buick GMC, Inc. (GRBY), Classic Buick GMC, Ltd. (ARLG), 4984 Classic Ltd., d/b/a Classic Chrysler (DENT), 3925 Partners, Ltd., d/b/a Mike Brown Ford (MBRN), Classic Chevrolet Sugarland, LLC (SGRL), Classic Buick GMC of Carrollton, LLC (CRLT), Stingray Chevrolet, LLC (PLNT), Stingray Chevrolet – Bartow, LLC (BART), Smart Auto Leasing, LLC (SMAL), Classic Autoplex GM, LLC (GALV), Classic Chevrolet Houston (HOUS), Kris Brown Chevrolet (CLEB), Nissan of Boerne (BRNE), Classic Honda of Midland (MIDL), Classic Lawton Chevrolet (LAWT), Classic Texoma (TXOM), Classic Kia of Carrollton (CKIA), and Classic Tulsa, d/b/a Mark Allen Chevrolet (TULS). These entities (collectively, the Company) are under common ownership and control. The Plan qualifies as a profit-sharing plan under Internal Revenue Code (Code) Section 401(a) and as a cash-or-deferred arrangement under Code Section 401(k).

The Plan covers substantially all eligible employees, and is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). Employees must be at least 18 years old and have three months' service with the Company to be eligible. Eligible employees may enter the plan the first day of any month. The 401(k) Plan Committee oversees governance of the Plan. Plan management determines the appropriateness of the Plan's investment offerings, monitors investment performance, and reports to the 401(k) Plan Committee.

Employee contributions

Participants are permitted to contribute 1% to 75% of their annual compensation, as defined in the Plan document, to the Plan on a tax-deferred basis. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. The Plan includes an auto-enrollment provision whereby all newly eligible employees are automatically enrolled in the Plan, unless they affirmatively elect not to participate, with a default deferral rate set at 2% of eligible compensation. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. After-tax contributions are not allowed. Contributions are subject to certain statutory limitations.

Note 1 **DESCRIPTION OF PLAN** – (continued)

Employer contributions

The Company makes matching contributions based on each participant's contributions. Except as discussed below, the matching rate is 25% during an employee's first four years of service and 50% thereafter. The matching contribution is limited to matching participant contributions up to 6% of salary (i.e., the match is limited to 1.5% of compensation for the first three years and 3% of compensation thereafter). The matching contribution discussed above is determined based on the participants' compensation and contributions each pay period. These are described as matching contributions in the financial statements.

Participant accounts

Each participant's account is credited with the participant's contribution, the Company's matching contribution, any employer discretionary profit-sharing contribution, and Plan investment earnings or losses, which are allocated proportionately among all participants based on their investment in each fund.

Participants may direct the investment of their contributions, the related employer matching contribution, and activity thereon into various investment options offered by the Plan. The Plan currently offers various mutual funds and a "Brokeragelink" option in which participants may invest in common stock, certificates of deposit, or other investments. Contributions for which investment direction has not been received are invested in a "target date" mutual fund, dependent on the participant's date of birth.

Vesting

Participants employed at GPVN or GRBY are fully vested in all accounts. Other participants are fully vested in their deferral, rollover, and QNEC accounts. Other employer matching contributions are 25% vested after one year's service with the Company. That increases 25% per year, until they are fully vested after four years of credited service. Participants' balances become fully vested if the participant reaches normal retirement age (age 65), becomes disabled, or dies while employed by the Company. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested balance.

Note 1 **DESCRIPTION OF PLAN** – (continued)

Administrative expenses

The Company pays certain administrative expenses, such as the cost of Company employees' time involved in Plan administration; the Company also absorbs costs not permitted to be paid from plan assets. Other administrative expenses, such as investment advisory fees, audit fees, and transaction charges, are paid by the Plan.

Payment of benefits

Upon termination of service due to death, disability, or retirement, a participant may elect to receive a lump-sum amount equal to the value of the participant's vested interest in his or her account. They may also receive an annuity with the same value. For termination of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution.

Unless another distribution election is timely made, accounts of terminated participants with balances less than $5,000 are distributed in a lump sum automatically. Amounts between $1,000 and $5,000 are rolled into an individual retirement account for the benefit of the participant.

The Plan permits in-service withdrawals: (1) of rollover contributions, at the participant's request, (2) for employees over the age of 59 ½, and (3) for certain hardship situations, as defined.

Other plan provisions

Other Plan provisions including investment options are described in the Plan Document.

Note 2 **SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

Date of management's review of subsequent events

The Plan has evaluated subsequent events through October 10, 2018, the date which the financial statements were available to be issued

Use of estimates

The preparation of financial statements in conformity with the modified cash basis of accounting requires Plan management to make estimates and assumptions that affect the reported amounts of Plan assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements. Accordingly, actual results could differ from those estimates.

Note 2 **SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES** – (continued)

Basis of accounting

The financial statements of the Plan are prepared using the modified cash basis of accounting. This method differs from accounting principles generally accepted in the United States of America since revenues are recorded when received rather than when earned, and expenses are recorded when paid rather than when incurred.

Investments held by a defined contribution plan are required to be reported at fair value.

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 6 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded when received. Net appreciation includes the plan's gains and losses on investments bought and sold as well as held during the year.

Excess contributions

Amounts payable to participants for contributions in excess of amounts allowed by the IRS are recorded as distributions when paid. These amounts were not material at December 31, 2017 and 2016.

Payment of benefits

Benefits are recorded when paid.

Expenses

Certain expenses of maintaining the Plan are paid by the Company and are therefore excluded from these financial statements. Investment-related expenses are included in net appreciation in fair value of investments.

Note 3 **FAIR VALUE MEASUREMENTS**

The fair value measurement accounting literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets or liabilities and have the highest priority. Level 2 inputs consist of observable inputs other than quoted market prices for identical assets or liabilities (Level 1). Level 3 inputs are unobservable and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 2 inputs are used for investments for which Level 1 inputs were not available. Level 3 inputs would only be used if Level 1 or Level 2 inputs were not available.

Level 1

The fair value of mutual funds is based on quoted net asset values of the shares as reported by the fund. The mutual funds held by the Plan are open-end mutual funds registered with the U.S. Securities and Exchange Commission. The funds must publish their daily net asset value and transact at that price. The mutual funds held by the Plan are considered to be actively traded. The fair value of interest-bearing cash is amortized cost, which approximates fair value. The self-directed brokerage accounts are mostly common stock and ETFs; their fair value is the quoted market price(s) of the stock(s).

The following table sets forth by level, within the fair value hierarchy, the plan's assets at fair value as of December 31, 2017 and 2016.

	Assets at Fair Value as of December 31, 2017			
	Level 1	Level 2	Level 3	Total
Mutual funds	$ 41,577,181	$ -	$ -	$ 41,577,181
Interest-bearing cash	1,750,178	-	-	1,750,178
Self-directed brokerage	1,134,058	-	-	1,134,058
Total	$ 44,461,417	$ -	$ -	$ 44,461,417

	Assets at Fair Value as of December 31, 2016			
	Level 1	Level 2	Level 3	Total
Mutual funds	$ 34,035,287	$ -	$ -	$ 34,035,287
Interest-bearing cash	2,380,771	-	-	2,380,771
Self-directed brokerage	747,588	-	-	747,588
Total	$ 37,163,646	$ -	$ -	$ 37,163,646

Note 3 **FAIR VALUE MEASUREMENTS** – (continued)

Gains and losses included in changes in net assets available for benefit for the years ended December 31, 2017 and 2016, are reported in net appreciation in fair value of investments.

The Plan's policy is to recognize transfers from levels of the fair value hierarchy as of the date of the event or changes in circumstances that caused the transfer. For the year ended December 31, 2017, there were no significant transfers between different levels of the fair value hierarchy.

Note 4 **INFORMATION PREPARED AND CERTIFIED BY FMTC**

Fidelity Workplace Services, LLC (FWS) is a wholly-owned subsidiary of FMR, LLC (Fidelity). Fidelity Management Trust Company (FMTC) is (indirectly) a wholly-owned subsidiary of Fidelity.

The December 31, 2017 and 2016 statements of net assets available for benefits – modified cash basis, the investment activities included on the modified cash basis statement of changes in net assets available for benefits for the year ended December 31, 2017, and the accompanying notes to the financial statements were prepared in part or entirely from information certified by FMTC in accordance with 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The information certified includes total investments of $44,461,418 and $37,163,647 at December 31, 2017 and 2016, respectively, and related investment earnings of $5,066,612 for the year ended December 31, 2017.

These accounts are maintained by the Fidelity, a party-in-interest. See note 5.

Note 5 **PARTY-IN-INTEREST TRANSACTIONS**

Most of the Plan's investments are shares of mutual funds managed by FMTC, the custodian of the Plan. Fees for investment management services amounted to $139,856 for the year ended December 31, 2017. These party-in-interest transactions are exempt from the prohibited transaction rules of ERISA.

Employee deferrals for one hundred seventy three pay periods (totaling approximately $177,339) were not remitted to the Plan on a timely basis. These are nonexempt party-in-interest transactions under ERISA.

Note 6 **TAX STATUS**

The Plan has adopted a Volume Submitter Plan of Fidelity Management & Research Company (FMR). FMR obtained an advisory letter in regard to this volume submitter plan, in which the Internal Revenue Service stated that the Plan, as designed, was in compliance with the applicable requirements of the Code. The Plan administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

The modified cash basis of accounting requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that is more likely than not would not be sustained upon examination by the U.S. Internal Revenue Service. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes the Plan is no longer subject to income tax examinations for years prior to 2014.

Note 7 **PLAN TERMINATION**

Although it has not expressed any intent to do so, the Plan's sponsor has the right to discontinue contributions at any time and to terminate the Plan subject to the provisions of ERISA.

Note 8 **REPORTABLE TRANSACTIONS**

There were no reportable transactions in 2017.

SUPPLEMENTAL SCHEDULES

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2017

Participant Contributions Transferred Late to Plan		Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51	
Check ☐ If Late Participant Loan Repayments are Included		Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP		
$	516	$ -	$ -	$ 516	$	-
	399	-	-	399		-
	407	-	-	407		-
	380	-	-	380		-
	418	-	-	418		-
	526	-	-	526		-
	441	-	-	441		-
	455	-	-	455		-
	474	-	-	474		-
	506	-	-	506		-
	470	-	-	470		-
	384	-	-	384		-
	425	-	-	425		-
	580	-	-	580		-
	428	-	-	428		-
	341	-	-	341		-
	443	-	-	443		-
	518	-	-	518		-
	512	-	-	512		-
	484	-	-	484		-
	487	-	-	487		-
	486	-	-	486		-
	502	-	-	502		-

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2017

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
Check ☐ If Late Participant Loan Repayments are Included	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	

(continued)

$ 635	$ -	$ -	$ 635	$ -
502	-	-	502	-
465	-	-	465	-
3,972	-	-	3,972	-
205	-	-	205	-
69	-	-	69	-
507	-	-	507	-
69	-	-	69	-
525	-	-	525	-
127	-	-	127	-
179	-	-	179	-
108	-	-	108	-
630	-	-	630	-
20	-	-	20	-
115	-	-	115	-
463	-	-	463	-
110	-	-	110	-
485	-	-	485	-
774	-	-	774	-
1,001	-	-	1,001	-
646	-	-	646	-
52	-	-	52	-

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2017

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
Check ☐	Contributions	Contributions	Contributions Pending	
If Late Participant Loan Repayments are Included	Not Corrected	Corrected Outside VFCP	Correction in VFCP	

(continued)

$ 85	$ -	$ -	$ 85	$ -
172	-	-	172	-
173	-	-	173	-
85	-	-	85	-
126	-	-	126	-
92	-	-	92	-
374	-	-	374	-
500	-	-	500	-
9	-	-	9	-
470	-	-	470	-
4	-	-	4	-
349	-	-	349	-
208	-	-	208	-
1,404	-	-	1,404	-
840	-	-	840	-
943	-	-	943	-
4,032	-	-	4,032	-
4,426	-	-	4,426	-
805	-	-	805	-
2,846	-	-	2,846	-
2,109	-	-	2,109	-

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN

EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2017

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
Check ☐ If Late Participant Loan Repayments are Included	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
(continued)				
$ 1,000	$ -	$ -	$ 1,000	$ -
907	-	-	907	-
1,283	-	-	1,283	-
1,192	-	-	1,192	-
279	-	-	279	-
80	-	-	80	-
2,442	-	-	2,442	-
672	-	-	672	-
665	-	-	665	-
1,074	-	-	1,074	-
840	-	-	840	-
985	-	-	985	-
14	-	-	14	-
1,493	-	-	1,493	-
708	-	-	708	-
51	-	-	51	-
696	-	-	696	-
1,060	-	-	1,060	-
779	-	-	779	-
1,037	-	-	1,037	-
1,596	-	-	1,596	-
712	-	-	712	-

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2017

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
Check ☐ If Late Participant Loan Repayments are Included	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
(continued)				
$ 689	$ -	$ -	$ 689	$ -
1,926	-	-	1,926	-
862	-	-	862	-
240	-	-	240	-
632	-	-	632	-
1,806	-	-	1,806	-
754	-	-	754	-
240	-	-	240	-
623	-	-	623	-
2,114	-	-	2,114	-
628	-	-	628	-
738	-	-	738	-
1,129	-	-	1,129	-
852	-	-	852	-
787	-	-	787	-
2,760	-	-	2,760	-
659	-	-	659	-
714	-	-	714	-
1,841	-	-	1,841	-
759	-	-	759	-
265	-	-	265	-
2,513	-	-	2,513	-

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2017

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
Check ☐	Contributions	Contributions	Contributions Pending	
If Late Participant Loan Repayments are Included	Not Corrected	Corrected Outside VFCP	Correction in VFCP	

(continued)

$ 644	$ -	$ -	$ 644	$ -
719	-	-	719	-
1,120	-	-	1,120	-
791	-	-	791	-
240	-	-	240	-
686	-	-	686	-
1,163	-	-	1,163	-
631	-	-	631	-
643	-	-	643	-
1,358	-	-	1,358	-
684	-	-	684	-
550	-	-	550	-
3,377	-	-	3,377	-
638	-	-	638	-
2,144	-	-	2,144	-
722	-	-	722	-
1,868	-	-	1,868	-
554	-	-	554	-
606	-	-	606	-
1,298	-	-	1,298	-
735	-	-	735	-
550	-	-	550	-

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2017

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
Check ☐ If Late Participant Loan Repayments are Included	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
(continued)				
$ 1,298	$ -	$ -	$ 1,298	$ -
577	-	-	577	-
523	-	-	523	-
1,308	-	-	1,308	-
553	-	-	553	-
595	-	-	595	-
2,106	-	-	2,106	-
660	-	-	660	-
2,183	-	-	2,183	-
7,036	-	-	7,036	-
13,962	-	-	13,962	-
23,135	-	-	23,135	-
16,293	-	-	16,293	-
$ 177,339	$ -	$ -	$ 177,339	$ -

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(e) Current Value
Investments at fair value:			
*	Fidelity Investments Institutional	Fidelity Contrafund	$ 1,475,621
*	Fidelity Investments Institutional	Fidelity Small Cap Value Fund	378,221
*	Fidelity Investments Institutional	Fidelity Government Money Market	1,750,178
*	Fidelity Investments Institutional	Fidelity Spartan Extended Market Index Fund	343,784
*	Fidelity Investments Institutional	Fidelity Spartan 500 Index Fund	882,573
*	Fidelity Investments Institutional	Fidelity Spartan International Index Fund	369,420
*	Fidelity Investments Institutional	Fidelity Spartan US Bond Index	153,539
*	Fidelity Investments Institutional	Invesco Diversified Dividend Fund R5	655,624
*	Fidelity Investments Institutional	Ridgeworth Investments Mid-Cap Value Equity	546,104
*	Fidelity Investments Institutional	Invesco International Growth R4	354,335
*	Fidelity Investments Institutional	American Century One Choice 2025 Inv.	6,957,680
*	Fidelity Investments Institutional	American Century One Choice 2035 Inv.	4,393,145
*	Fidelity Investments Institutional	American Century One Choice 2045 Inv.	3,116,036
*	Fidelity Investments Institutional	American Century One Choice in Retirement	5,584,462
*	Fidelity Investments Institutional	Janus Triton Fund	711,472
*	Fidelity Investments Institutional	American Century One Choice 2020 Inv.	3,727,153
*	Fidelity Investments Institutional	American Century One Choice 2030 Inv.	5,018,234
*	Fidelity Investments Institutional	American Century One Choice 2040 Inv.	2,787,901
*	Fidelity Investments Institutional	American Century One Choice 2050 Inv.	1,314,576
*	Fidelity Investments Institutional	American Century One Choice 2055 Inv.	1,438,480
*	Fidelity Investments Institutional	Fidelity Spartan Real Estate Index	301,917
*	Fidelity Investments Institutional	Invesco High Yield Fund R5	74,411
*	Fidelity Investments Institutional	Neuberger Berman Mid Cap Growth Trust	196,938
*	Fidelity Investments Institutional	PIMCO Small Cap StocksPLUS	359,911
*	Fidelity Investments Institutional	Fidelity Spartan Intermediate Treasury Bond Index	68,447
*	Fidelity Investments Institutional	Wells Fargo Advantage Emerging Markets	171,278
*	Fidelity Investments Institutional	Metropolitan West Total Return Bond Fund	195,919
	Other	Self-directed brokerage	1,134,058
TOTAL ASSETS (HELD AT END OF YEAR)			$ 44,461,417

* Party-in-interest

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN

FINANCIAL STATEMENTS

DECEMBER 31, 2017 AND 2016

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Milbern Ray and Company
L.L.P.
Certified Public Accountants

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MEMBER:
AMERICAN INSTITUTE
OF CERTIFIED PUBLIC
ACCOUNTANTS

INDEPENDENT AUDITOR'S REPORT

To the Durant Auto Group 401(k) Plan and Participants
Grapevine, Texas

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Durant Auto Group 401(k) Plan, which comprise the statements of net assets available for benefits – modified cash basis as of December 31, 2017 and 2016, and the related modified cash basis statement of changes in net assets available for benefits for the year ended December 31, 2017, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with the modified cash basis of accounting; this includes determining that the modified cash basis of accounting is an acceptable basis for the preparation of the financial statements in the circumstances. Management is also responsible 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.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 5, which was certified by Fidelity Management Trust Company, the custodian of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan administrator that the custodian holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained certifications from the custodian as of December 31, 2017 and 2016, and for the year ended December 31, 2017, that the information provided to the Plan administrator by the custodian is complete and accurate.



Disclaimer of Opinion

Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Basis of Accounting

We draw attention to Note 2 to the financial statements, which describes the basis of accounting. The financial statements are prepared on the modified cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our opinion is not modified with respect to this matter.

Report on Supplementary Information

The supplemental schedules of delinquent participant contributions and assets (held at end of year) as of December 31, 2017 are required by the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on these supplemental schedules.

Report on Form and Content in Compliance With DOL Rules and Regulations

The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified by the custodian, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Milbern Ray LLP

October 10, 2018

Grapevine, Texas

Milbern Ray and Company
L.L.P.
Certified Public Accountants

DURANT AUTO GROUP 401(K) PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS - MODIFIED CASH BASIS

DECEMBER 31, 2017 AND 2016

	2017	2016
ASSETS		
Non interest-bearing cash	$ -	$ -
Investments:		
Mutual funds	41,577,181	34,035,287
Interest-bearing cash	1,750,178	2,380,771
Self-directed brokerage	1,134,058	747,588
At fair value	44,461,417	37,163,646
Total assets	44,461,417	37,163,646
NET ASSETS AVAILABLE FOR BENEFITS	$ 44,461,417	$ 37,163,646

See independent auditor's report and notes to financial statements, which are an integral part of these statements.

DURANT AUTO GROUP 401(K) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS - MODIFIED CASH BASIS
YEAR ENDED DECEMBER 31, 2017

INVESTMENT AND CONTRIBUTION ACTIVITY		
Additions to net assets attributed to:		
Investment activity:		
Net appreciation in investments carried at fair value	$	3,599,082
Interest and dividends		1,434,484
		5,033,566
Contributions:		
Participants' deferrals		4,448,278
Participants' rollovers		200,790
Employers' matching		1,282,429
		5,931,497
TOTAL INVESTMENT AND CONTRIBUTION ACTIVITY		10,965,063
DEDUCTIONS		
Deductions from net assets attributed to:		
Administrative expenses		167,918
Benefits paid to participants		3,499,374
TOTAL DEDUCTIONS		3,667,292
NET INCREASE		7,297,771
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year		37,163,646
END OF YEAR	$	44,461,417

See independent auditor's report and notes to financial statements, which are an integral part of these financial statements.

Note 1 **DESCRIPTION OF PLAN**

The following description of the Durant Auto Group 401(k) Plan (Plan) provides only general information. Participants should refer to the plan document for a more complete description of the Plan's provisions. The Plan is a defined contribution plan for the benefit of the employees of Classic Chevrolet, Inc. (GPVN), Classic Chevrolet Buick GMC, Inc. (GRBY), Classic Buick GMC, Ltd. (ARLG), 4984 Classic Ltd., d/b/a Classic Chrysler (DENT), 3925 Partners, Ltd., d/b/a Mike Brown Ford (MBRN), Classic Chevrolet Sugarland, LLC (SGRL), Classic Buick GMC of Carrollton, LLC (CRLT), Stingray Chevrolet, LLC (PLNT), Stingray Chevrolet – Bartow, LLC (BART), Smart Auto Leasing, LLC (SMAL), Classic Autoplex GM, LLC (GALV), Classic Chevrolet Houston (HOUS), Kris Brown Chevrolet (CLEB), Nissan of Boerne (BRNE), Classic Honda of Midland (MIDL), Classic Lawton Chevrolet (LAWT), Classic Texoma (TXOM), Classic Kia of Carrollton (CKIA), and Classic Tulsa, d/b/a Mark Allen Chevrolet (TULS). These entities (collectively, the Company) are under common ownership and control. The Plan qualifies as a profit-sharing plan under Internal Revenue Code (Code) Section 401(a) and as a cash-or-deferred arrangement under Code Section 401(k).

The Plan covers substantially all eligible employees, and is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). Employees must be at least 18 years old and have three months' service with the Company to be eligible. Eligible employees may enter the plan the first day of any month. The 401(k) Plan Committee oversees governance of the Plan. Plan management determines the appropriateness of the Plan's investment offerings, monitors investment performance, and reports to the 401(k) Plan Committee.

Employee contributions

Participants are permitted to contribute 1% to 75% of their annual compensation, as defined in the Plan document, to the Plan on a tax-deferred basis. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. The Plan includes an auto-enrollment provision whereby all newly eligible employees are automatically enrolled in the Plan, unless they affirmatively elect not to participate, with a default deferral rate set at 2% of eligible compensation. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. After-tax contributions are not allowed. Contributions are subject to certain statutory limitations.

Note 1 **DESCRIPTION OF PLAN** – (continued)

Employer contributions

The Company makes matching contributions based on each participant's contributions. Except as discussed below, the matching rate is 25% during an employee's first four years of service and 50% thereafter. The matching contribution is limited to matching participant contributions up to 6% of salary (i.e., the match is limited to 1.5% of compensation for the first three years and 3% of compensation thereafter). The matching contribution discussed above is determined based on the participants' compensation and contributions each pay period. These are described as matching contributions in the financial statements.

Participant accounts

Each participant's account is credited with the participant's contribution, the Company's matching contribution, any employer discretionary profit-sharing contribution, and Plan investment earnings or losses, which are allocated proportionately among all participants based on their investment in each fund.

Participants may direct the investment of their contributions, the related employer matching contribution, and activity thereon into various investment options offered by the Plan. The Plan currently offers various mutual funds and a "Brokeragelink" option in which participants may invest in common stock, certificates of deposit, or other investments. Contributions for which investment direction has not been received are invested in a "target date" mutual fund, dependent on the participant's date of birth.

Vesting

Participants employed at GPVN or GRBY are fully vested in all accounts. Other participants are fully vested in their deferral, rollover, and QNEC accounts. Other employer matching contributions are 25% vested after one year's service with the Company. That increases 25% per year, until they are fully vested after four years of credited service. Participants' balances become fully vested if the participant reaches normal retirement age (age 65), becomes disabled, or dies while employed by the Company. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested balance.

Note 1 **DESCRIPTION OF PLAN** – (continued)

Administrative expenses

The Company pays certain administrative expenses, such as the cost of Company employees' time involved in Plan administration; the Company also absorbs costs not permitted to be paid from plan assets. Other administrative expenses, such as investment advisory fees, audit fees, and transaction charges, are paid by the Plan.

Payment of benefits

Upon termination of service due to death, disability, or retirement, a participant may elect to receive a lump-sum amount equal to the value of the participant's vested interest in his or her account. They may also receive an annuity with the same value. For termination of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution.

Unless another distribution election is timely made, accounts of terminated participants with balances less than $5,000 are distributed in a lump sum automatically. Amounts between $1,000 and $5,000 are rolled into an individual retirement account for the benefit of the participant.

The Plan permits in-service withdrawals: (1) of rollover contributions, at the participant's request, (2) for employees over the age of 59 ½, and (3) for certain hardship situations, as defined.

Other plan provisions

Other Plan provisions including investment options are described in the Plan Document.

Note 2 **SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

Date of management's review of subsequent events

The Plan has evaluated subsequent events through October 10, 2018, the date which the financial statements were available to be issued

Use of estimates

The preparation of financial statements in conformity with the modified cash basis of accounting requires Plan management to make estimates and assumptions that affect the reported amounts of Plan assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements. Accordingly, actual results could differ from those estimates.

Note 2 **SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES** – (continued)

Basis of accounting

The financial statements of the Plan are prepared using the modified cash basis of accounting. This method differs from accounting principles generally accepted in the United States of America since revenues are recorded when received rather than when earned, and expenses are recorded when paid rather than when incurred.

Investments held by a defined contribution plan are required to be reported at fair value.

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 6 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded when received. Net appreciation includes the plan's gains and losses on investments bought and sold as well as held during the year.

Excess contributions

Amounts payable to participants for contributions in excess of amounts allowed by the IRS are recorded as distributions when paid. These amounts were not material at December 31, 2017 and 2016.

Payment of benefits

Benefits are recorded when paid.

Expenses

Certain expenses of maintaining the Plan are paid by the Company and are therefore excluded from these financial statements. Investment-related expenses are included in net appreciation in fair value of investments.

Note 3 **FAIR VALUE MEASUREMENTS**

The fair value measurement accounting literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets or liabilities and have the highest priority. Level 2 inputs consist of observable inputs other than quoted market prices for identical assets or liabilities (Level 1). Level 3 inputs are unobservable and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 2 inputs are used for investments for which Level 1 inputs were not available. Level 3 inputs would only be used if Level 1 or Level 2 inputs were not available.

Level 1

The fair value of mutual funds is based on quoted net asset values of the shares as reported by the fund. The mutual funds held by the Plan are open-end mutual funds registered with the U.S. Securities and Exchange Commission. The funds must publish their daily net asset value and transact at that price. The mutual funds held by the Plan are considered to be actively traded. The fair value of interest-bearing cash is amortized cost, which approximates fair value. The self-directed brokerage accounts are mostly common stock and ETFs; their fair value is the quoted market price(s) of the stock(s).

The following table sets forth by level, within the fair value hierarchy, the plan's assets at fair value as of December 31, 2017 and 2016.

	Assets at Fair Value as of December 31, 2017			
	Level 1	Level 2	Level 3	Total
Mutual funds	$ 41,577,181	$ -	$ -	$ 41,577,181
Interest-bearing cash	1,750,178	-	-	1,750,178
Self-directed brokerage	1,134,058	-	-	1,134,058
Total	$ 44,461,417	$ -	$ -	$ 44,461,417

	Assets at Fair Value as of December 31, 2016			
	Level 1	Level 2	Level 3	Total
Mutual funds	$ 34,035,287	$ -	$ -	$ 34,035,287
Interest-bearing cash	2,380,771	-	-	2,380,771
Self-directed brokerage	747,588	-	-	747,588
Total	$ 37,163,646	$ -	$ -	$ 37,163,646

Note 3 **FAIR VALUE MEASUREMENTS** – (continued)

Gains and losses included in changes in net assets available for benefit for the years ended December 31, 2017 and 2016, are reported in net appreciation in fair value of investments.

The Plan's policy is to recognize transfers from levels of the fair value hierarchy as of the date of the event or changes in circumstances that caused the transfer. For the year ended December 31, 2017, there were no significant transfers between different levels of the fair value hierarchy.

Note 4 **INFORMATION PREPARED AND CERTIFIED BY FMTC**

Fidelity Workplace Services, LLC (FWS) is a wholly-owned subsidiary of FMR, LLC (Fidelity). Fidelity Management Trust Company (FMTC) is (indirectly) a wholly-owned subsidiary of Fidelity.

The December 31, 2017 and 2016 statements of net assets available for benefits – modified cash basis, the investment activities included on the modified cash basis statement of changes in net assets available for benefits for the year ended December 31, 2017, and the accompanying notes to the financial statements were prepared in part or entirely from information certified by FMTC in accordance with 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The information certified includes total investments of $44,461,418 and $37,163,647 at December 31, 2017 and 2016, respectively, and related investment earnings of $5,066,612 for the year ended December 31, 2017.

These accounts are maintained by the Fidelity, a party-in-interest. See note 5.

Note 5 **PARTY-IN-INTEREST TRANSACTIONS**

Most of the Plan's investments are shares of mutual funds managed by FMTC, the custodian of the Plan. Fees for investment management services amounted to $139,856 for the year ended December 31, 2017. These party-in-interest transactions are exempt from the prohibited transaction rules of ERISA.

Employee deferrals for one hundred seventy three pay periods (totaling approximately $177,339) were not remitted to the Plan on a timely basis. These are nonexempt party-in-interest transactions under ERISA.

Note 6 **TAX STATUS**

The Plan has adopted a Volume Submitter Plan of Fidelity Management & Research Company (FMR). FMR obtained an advisory letter in regard to this volume submitter plan, in which the Internal Revenue Service stated that the Plan, as designed, was in compliance with the applicable requirements of the Code. The Plan administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

The modified cash basis of accounting requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that is more likely than not would not be sustained upon examination by the U.S. Internal Revenue Service. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes the Plan is no longer subject to income tax examinations for years prior to 2014.

Note 7 **PLAN TERMINATION**

Although it has not expressed any intent to do so, the Plan's sponsor has the right to discontinue contributions at any time and to terminate the Plan subject to the provisions of ERISA.

Note 8 **REPORTABLE TRANSACTIONS**

There were no reportable transactions in 2017.

SUPPLEMENTAL SCHEDULES

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2017

Participant Contributions Transferred Late to Plan		Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51	
Check ☐ If Late Participant Loan Repayments are Included		Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP		
$	516	$ -	$ -	$ 516	$	-
	399	-	-	399		-
	407	-	-	407		-
	380	-	-	380		-
	418	-	-	418		-
	526	-	-	526		-
	441	-	-	441		-
	455	-	-	455		-
	474	-	-	474		-
	506	-	-	506		-
	470	-	-	470		-
	384	-	-	384		-
	425	-	-	425		-
	580	-	-	580		-
	428	-	-	428		-
	341	-	-	341		-
	443	-	-	443		-
	518	-	-	518		-
	512	-	-	512		-
	484	-	-	484		-
	487	-	-	487		-
	486	-	-	486		-
	502	-	-	502		-

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2017

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
Check ☐ If Late Participant Loan Repayments are Included	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	

(continued)

$ 635	$ -	$ -	$ 635	$ -
502	-	-	502	-
465	-	-	465	-
3,972	-	-	3,972	-
205	-	-	205	-
69	-	-	69	-
507	-	-	507	-
69	-	-	69	-
525	-	-	525	-
127	-	-	127	-
179	-	-	179	-
108	-	-	108	-
630	-	-	630	-
20	-	-	20	-
115	-	-	115	-
463	-	-	463	-
110	-	-	110	-
485	-	-	485	-
774	-	-	774	-
1,001	-	-	1,001	-
646	-	-	646	-
52	-	-	52	-

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2017

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
Check ☐	Contributions	Contributions	Contributions Pending	
If Late Participant Loan Repayments are Included	Not Corrected	Corrected Outside VFCP	Correction in VFCP	

(continued)

$ 85	$ -	$ -	$ 85	$ -
172	-	-	172	-
173	-	-	173	-
85	-	-	85	-
126	-	-	126	-
92	-	-	92	-
374	-	-	374	-
500	-	-	500	-
9	-	-	9	-
470	-	-	470	-
4	-	-	4	-
349	-	-	349	-
208	-	-	208	-
1,404	-	-	1,404	-
840	-	-	840	-
943	-	-	943	-
4,032	-	-	4,032	-
4,426	-	-	4,426	-
805	-	-	805	-
2,846	-	-	2,846	-
2,109	-	-	2,109	-

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN

EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2017

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
Check ☐ If Late Participant Loan Repayments are Included	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
(continued)				
$ 1,000	$ -	$ -	$ 1,000	$ -
907	-	-	907	-
1,283	-	-	1,283	-
1,192	-	-	1,192	-
279	-	-	279	-
80	-	-	80	-
2,442	-	-	2,442	-
672	-	-	672	-
665	-	-	665	-
1,074	-	-	1,074	-
840	-	-	840	-
985	-	-	985	-
14	-	-	14	-
1,493	-	-	1,493	-
708	-	-	708	-
51	-	-	51	-
696	-	-	696	-
1,060	-	-	1,060	-
779	-	-	779	-
1,037	-	-	1,037	-
1,596	-	-	1,596	-
712	-	-	712	-

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2017

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
Check ☐ If Late Participant Loan Repayments are Included	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
(continued)				
$ 689	$ -	$ -	$ 689	$ -
1,926	-	-	1,926	-
862	-	-	862	-
240	-	-	240	-
632	-	-	632	-
1,806	-	-	1,806	-
754	-	-	754	-
240	-	-	240	-
623	-	-	623	-
2,114	-	-	2,114	-
628	-	-	628	-
738	-	-	738	-
1,129	-	-	1,129	-
852	-	-	852	-
787	-	-	787	-
2,760	-	-	2,760	-
659	-	-	659	-
714	-	-	714	-
1,841	-	-	1,841	-
759	-	-	759	-
265	-	-	265	-
2,513	-	-	2,513	-

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2017

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
Check ☐	Contributions	Contributions	Contributions Pending	
If Late Participant Loan Repayments are Included	Not Corrected	Corrected Outside VFCP	Correction in VFCP	

(continued)

$ 644	$ -	$ -	$ 644	$ -
719	-	-	719	-
1,120	-	-	1,120	-
791	-	-	791	-
240	-	-	240	-
686	-	-	686	-
1,163	-	-	1,163	-
631	-	-	631	-
643	-	-	643	-
1,358	-	-	1,358	-
684	-	-	684	-
550	-	-	550	-
3,377	-	-	3,377	-
638	-	-	638	-
2,144	-	-	2,144	-
722	-	-	722	-
1,868	-	-	1,868	-
554	-	-	554	-
606	-	-	606	-
1,298	-	-	1,298	-
735	-	-	735	-
550	-	-	550	-

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2017

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
Check ☐ If Late Participant Loan Repayments are Included	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
(continued)				
$ 1,298	$ -	$ -	$ 1,298	$ -
577	-	-	577	-
523	-	-	523	-
1,308	-	-	1,308	-
553	-	-	553	-
595	-	-	595	-
2,106	-	-	2,106	-
660	-	-	660	-
2,183	-	-	2,183	-
7,036	-	-	7,036	-
13,962	-	-	13,962	-
23,135	-	-	23,135	-
16,293	-	-	16,293	-
$ 177,339	$ -	$ -	$ 177,339	$ -

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(e) Current Value
Investments at fair value:			
*	Fidelity Investments Institutional	Fidelity Contrafund	$ 1,475,621
*	Fidelity Investments Institutional	Fidelity Small Cap Value Fund	378,221
*	Fidelity Investments Institutional	Fidelity Government Money Market	1,750,178
*	Fidelity Investments Institutional	Fidelity Spartan Extended Market Index Fund	343,784
*	Fidelity Investments Institutional	Fidelity Spartan 500 Index Fund	882,573
*	Fidelity Investments Institutional	Fidelity Spartan International Index Fund	369,420
*	Fidelity Investments Institutional	Fidelity Spartan US Bond Index	153,539
*	Fidelity Investments Institutional	Invesco Diversified Dividend Fund R5	655,624
*	Fidelity Investments Institutional	Ridgeworth Investments Mid-Cap Value Equity	546,104
*	Fidelity Investments Institutional	Invesco International Growth R4	354,335
*	Fidelity Investments Institutional	American Century One Choice 2025 Inv.	6,957,680
*	Fidelity Investments Institutional	American Century One Choice 2035 Inv.	4,393,145
*	Fidelity Investments Institutional	American Century One Choice 2045 Inv.	3,116,036
*	Fidelity Investments Institutional	American Century One Choice in Retirement	5,584,462
*	Fidelity Investments Institutional	Janus Triton Fund	711,472
*	Fidelity Investments Institutional	American Century One Choice 2020 Inv.	3,727,153
*	Fidelity Investments Institutional	American Century One Choice 2030 Inv.	5,018,234
*	Fidelity Investments Institutional	American Century One Choice 2040 Inv.	2,787,901
*	Fidelity Investments Institutional	American Century One Choice 2050 Inv.	1,314,576
*	Fidelity Investments Institutional	American Century One Choice 2055 Inv.	1,438,480
*	Fidelity Investments Institutional	Fidelity Spartan Real Estate Index	301,917
*	Fidelity Investments Institutional	Invesco High Yield Fund R5	74,411
*	Fidelity Investments Institutional	Neuberger Berman Mid Cap Growth Trust	196,938
*	Fidelity Investments Institutional	PIMCO Small Cap StocksPLUS	359,911
*	Fidelity Investments Institutional	Fidelity Spartan Intermediate Treasury Bond Index	68,447
*	Fidelity Investments Institutional	Wells Fargo Advantage Emerging Markets	171,278
*	Fidelity Investments Institutional	Metropolitan West Total Return Bond Fund	195,919
	Other	Self-directed brokerage	1,134,058
TOTAL ASSETS (HELD AT END OF YEAR)			$ 44,461,417

* Party-in-interest

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN

EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2017

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
Check ☐ If Late Participant Loan Repayments are Included	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
$ 516	$ -	$ -	$ 516	$ -
399	-	-	399	-
407	-	-	407	-
380	-	-	380	-
418	-	-	418	-
526	-	-	526	-
441	-	-	441	-
455	-	-	455	-
474	-	-	474	-
506	-	-	506	-
470	-	-	470	-
384	-	-	384	-
425	-	-	425	-
580	-	-	580	-
428	-	-	428	-
341	-	-	341	-
443	-	-	443	-
518	-	-	518	-
512	-	-	512	-
484	-	-	484	-
487	-	-	487	-
486	-	-	486	-
502	-	-	502	-

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2017

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
Check ☐ If Late Participant Loan Repayments are Included	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	

(continued)

$ 635	$ -	$ -	$ 635	$ -
502	-	-	502	-
465	-	-	465	-
3,972	-	-	3,972	-
205	-	-	205	-
69	-	-	69	-
507	-	-	507	-
69	-	-	69	-
525	-	-	525	-
127	-	-	127	-
179	-	-	179	-
108	-	-	108	-
630	-	-	630	-
20	-	-	20	-
115	-	-	115	-
463	-	-	463	-
110	-	-	110	-
485	-	-	485	-
774	-	-	774	-
1,001	-	-	1,001	-
646	-	-	646	-
52	-	-	52	-

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2017

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
Check ☐	Contributions	Contributions	Contributions Pending	
If Late Participant Loan Repayments are Included	Not Corrected	Corrected Outside VFCP	Correction in VFCP	

(continued)

$ 85	$ -	$ -	$ 85	$ -
172	-	-	172	-
173	-	-	173	-
85	-	-	85	-
126	-	-	126	-
92	-	-	92	-
374	-	-	374	-
500	-	-	500	-
9	-	-	9	-
470	-	-	470	-
4	-	-	4	-
349	-	-	349	-
208	-	-	208	-
1,404	-	-	1,404	-
840	-	-	840	-
943	-	-	943	-
4,032	-	-	4,032	-
4,426	-	-	4,426	-
805	-	-	805	-
2,846	-	-	2,846	-
2,109	-	-	2,109	-

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN

EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2017

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
Check ☐ If Late Participant Loan Repayments are Included	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
(continued)				
$ 1,000	$ -	$ -	$ 1,000	$ -
907	-	-	907	-
1,283	-	-	1,283	-
1,192	-	-	1,192	-
279	-	-	279	-
80	-	-	80	-
2,442	-	-	2,442	-
672	-	-	672	-
665	-	-	665	-
1,074	-	-	1,074	-
840	-	-	840	-
985	-	-	985	-
14	-	-	14	-
1,493	-	-	1,493	-
708	-	-	708	-
51	-	-	51	-
696	-	-	696	-
1,060	-	-	1,060	-
779	-	-	779	-
1,037	-	-	1,037	-
1,596	-	-	1,596	-
712	-	-	712	-

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2017

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
Check ☐	Contributions	Contributions	Contributions Pending	
If Late Participant Loan Repayments are Included	Not Corrected	Corrected Outside VFCP	Correction in VFCP	

(continued)

$ 689	$ -	$ -	$ 689	$ -
1,926	-	-	1,926	-
862	-	-	862	-
240	-	-	240	-
632	-	-	632	-
1,806	-	-	1,806	-
754	-	-	754	-
240	-	-	240	-
623	-	-	623	-
2,114	-	-	2,114	-
628	-	-	628	-
738	-	-	738	-
1,129	-	-	1,129	-
852	-	-	852	-
787	-	-	787	-
2,760	-	-	2,760	-
659	-	-	659	-
714	-	-	714	-
1,841	-	-	1,841	-
759	-	-	759	-
265	-	-	265	-
2,513	-	-	2,513	-

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2017

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
Check ☐	Contributions	Contributions	Contributions Pending	
If Late Participant Loan Repayments are Included	Not Corrected	Corrected Outside VFCP	Correction in VFCP	
(continued)				
$ 644	$ -	$ -	$ 644	$ -
719	-	-	719	-
1,120	-	-	1,120	-
791	-	-	791	-
240	-	-	240	-
686	-	-	686	-
1,163	-	-	1,163	-
631	-	-	631	-
643	-	-	643	-
1,358	-	-	1,358	-
684	-	-	684	-
550	-	-	550	-
3,377	-	-	3,377	-
638	-	-	638	-
2,144	-	-	2,144	-
722	-	-	722	-
1,868	-	-	1,868	-
554	-	-	554	-
606	-	-	606	-
1,298	-	-	1,298	-
735	-	-	735	-
550	-	-	550	-

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2017

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
Check ☐ If Late Participant Loan Repayments are Included	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
(continued)				
$ 1,298	$ -	$ -	$ 1,298	$ -
577	-	-	577	-
523	-	-	523	-
1,308	-	-	1,308	-
553	-	-	553	-
595	-	-	595	-
2,106	-	-	2,106	-
660	-	-	660	-
2,183	-	-	2,183	-
7,036	-	-	7,036	-
13,962	-	-	13,962	-
23,135	-	-	23,135	-
16,293	-	-	16,293	-
$ 177,339	$ -	$ -	$ 177,339	$ -

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(e) Current Value
Investments at fair value:			
*	Fidelity Investments Institutional	Fidelity Contrafund	$ 1,475,621
*	Fidelity Investments Institutional	Fidelity Small Cap Value Fund	378,221
*	Fidelity Investments Institutional	Fidelity Government Money Market	1,750,178
*	Fidelity Investments Institutional	Fidelity Spartan Extended Market Index Fund	343,784
*	Fidelity Investments Institutional	Fidelity Spartan 500 Index Fund	882,573
*	Fidelity Investments Institutional	Fidelity Spartan International Index Fund	369,420
*	Fidelity Investments Institutional	Fidelity Spartan US Bond Index	153,539
*	Fidelity Investments Institutional	Invesco Diversified Dividend Fund R5	655,624
*	Fidelity Investments Institutional	Ridgeworth Investments Mid-Cap Value Equity	546,104
*	Fidelity Investments Institutional	Invesco International Growth R4	354,335
*	Fidelity Investments Institutional	American Century One Choice 2025 Inv.	6,957,680
*	Fidelity Investments Institutional	American Century One Choice 2035 Inv.	4,393,145
*	Fidelity Investments Institutional	American Century One Choice 2045 Inv.	3,116,036
*	Fidelity Investments Institutional	American Century One Choice in Retirement	5,584,462
*	Fidelity Investments Institutional	Janus Triton Fund	711,472
*	Fidelity Investments Institutional	American Century One Choice 2020 Inv.	3,727,153
*	Fidelity Investments Institutional	American Century One Choice 2030 Inv.	5,018,234
*	Fidelity Investments Institutional	American Century One Choice 2040 Inv.	2,787,901
*	Fidelity Investments Institutional	American Century One Choice 2050 Inv.	1,314,576
*	Fidelity Investments Institutional	American Century One Choice 2055 Inv.	1,438,480
*	Fidelity Investments Institutional	Fidelity Spartan Real Estate Index	301,917
*	Fidelity Investments Institutional	Invesco High Yield Fund R5	74,411
*	Fidelity Investments Institutional	Neuberger Berman Mid Cap Growth Trust	196,938
*	Fidelity Investments Institutional	PIMCO Small Cap StocksPLUS	359,911
*	Fidelity Investments Institutional	Fidelity Spartan Intermediate Treasury Bond Index	68,447
*	Fidelity Investments Institutional	Wells Fargo Advantage Emerging Markets	171,278
*	Fidelity Investments Institutional	Metropolitan West Total Return Bond Fund	195,919
	Other	Self-directed brokerage	1,134,058
TOTAL ASSETS (HELD AT END OF YEAR)			$ 44,461,417

* Party-in-interest

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