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

2019

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

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.)
- ☒ a single-employer plan
- ☐ a DFE (specify) ____

B This return/report is:
- ☐ the first return/report
- ☐ the final return/report
- ☐ an amended return/report
- ☐ a short plan year return/report (less than 12 months)

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

D Check box if filing under:
- ☒ Form 5558
- ☐ automatic extension
- ☐ the DFVC program
- ☐ special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
RETIREMENT PLAN FOR GREAT DANE LLC

1b Three-digit plan number (PN) ▶ 005

1c Effective date of plan 01/01/1986

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)
GREAT DANE LLC

222 N LASALLE ST. STE 920
CHICAGO, IL 60601-1010

222 N LASALLE ST. STE 920
CHICAGO, IL 60601-1010

2b Employer Identification Number (EIN)
36-4120610

2c Plan Sponsor's telephone number
773-254-5533

2d Business code (see instructions)
336210

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.	10/09/2020	JAMES PETRARCA
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/09/2020	JAMES PETRARCA
	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**	7102
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)**	3743
a(2) Total number of active participants at the end of the plan year	**6a(2)**	3412
b Retired or separated participants receiving benefits	**6b**	420
c Other retired or separated participants entitled to future benefits	**6c**	1320
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	5152
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	73
f Total. Add lines **6d** and **6e**	**6f**	5225
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	420
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:

1C

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)		**9b** Plan benefit arrangement (check all that apply)	
(1)	[ ] Insurance	**(1)**	[ ] Insurance
(2)	[ ] Code section 412(e)(3) insurance contracts	**(2)**	[ ] Code section 412(e)(3) insurance contracts
(3)	[X] Trust	**(3)**	[X] Trust
(4)	[ ] General assets of the sponsor	**(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)** [X] **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)** [X] **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 2019 Form M-1 annual report. If the plan was not required to file the 2019 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 SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2019

This Form is Open to Public Inspection

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of $1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan
RETIREMENT PLAN FOR GREAT DANE LLC

B Three-digit plan number (PN) ▶ 005

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
GREAT DANE LLC

D Employer Identification Number (EIN)
36-4120610

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2019

2 Assets:

a Market value	**2a**	234081446
b Actuarial value	**2b**	234081446

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	1449	57634918	57634918
b For terminated vested participants	1973	46930294	46930294
c For active participants	3825	79867314	81612520
d Total	7247	184432526	186177732

4 If the plan is in at-risk status, check the box and complete lines (a) and (b) [ ]

a Funding target disregarding prescribed at-risk assumptions	**4a**	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	**4b**	
5 Effective interest rate	**5**	5.70 %
6 Target normal cost	**6**	5637934

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE

Signature of actuary — Date: 09/04/2020

JERED R. EASLEY — Type or print name of actuary

20-07646 — Most recent enrollment number

MERCER — Firm name

816-556-4842 — Telephone number (including area code)

2405 GRAND BOULEVARD
SUITE 900
KANSAS CITY, MO 64108

Address of the firm

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of -10.50 %	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.88 %		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages

14	Funding target attainment percentage	14	125.73 %
15	Adjusted funding target attainment percentage	15	125.73 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	155.55 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/22/2020	6000000	0			
			Totals ► 18(b)	6000000	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years.	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	5580962

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☐ No

c If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	
3.74 %	5.35 %	6.11 %	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	0
22 Weighted average retirement age	**22**	62

23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment	☒ Yes	☐ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment	☐ Yes	☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment	☒ Yes	☐ No

27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	**27**	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	**28**	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	**29**	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	**30**	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):

a Target normal cost (line 6)	**31a**	5637934
b Excess assets, if applicable, but not greater than line 31a	**31b**	5637934

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	0

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0

36 Additional cash requirement (line 34 minus line 35)	**36**	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	5580962

38 Present value of excess contributions for current year (see instructions)

a Total (excess, if any, of line 37 over line 36)	**38a**	5580962
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)

41 If an election was made to use PRA 2010 funding relief for this plan:

a Schedule elected ☐ 2 plus 7 years ☐ 15 years

b Eligible plan year(s) for which the election in line 41a was made ☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011

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.**	**2019** **This Form is Open to Public Inspection.**

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A Name of plan
RETIREMENT PLAN FOR GREAT DANE LLC

B Three-digit plan number (PN) ▶ 005

C Plan sponsor's name as shown on line 2a of Form 5500
GREAT DANE LLC

D Employer Identification Number (EIN)
36-4120610

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

NORTHERN TRUST COMPANY

36-1561860

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

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

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)

MERCER

13-2834414

(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?
11	ACTUARY	991869	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

PRICEWATERHOUSE COOPERS LLP

13-4008324

(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	AUDITOR	39200	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

THE NORTHERN TRUST COMPMAY

36-1561860

(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?
21 27 51 99	TRUSTEE	115206	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] 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)

SILCHESTER INTERNATIONAL INVESTORS

36-7045783

(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 51	INVESTMENT ADVISOR	362739	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

HARRIS ASSOCIATES LP

36-3484078

(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 51	INVESTMENT ADVISOR	555696	Yes [X] No [ ]	Yes [X] No [ ]	33623	Yes [ ] No [X]

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

NUEBERGER BERMAN LLC

02-0654486

(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 51	INVESTMENT ADVISOR	195096	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)

SELECT EQUITY GROUP

46-3465710

(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 51	INVESTMENT ADVISOR	530639	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

LYRICAL ASSET MANAGEMENT

37-1572793

(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 51	INVESTMENT ADVISOR	127845	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

DEUTSCHE BANK SECURITIES, INC.

13-2730828

(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?
68 71	BROKER	0	Yes [X] No [ ]	Yes [X] No [ ]	0	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
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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(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: BONNIE MARR

b EIN: 13-2834414

c Position: PRINCIPAL

d Address: 155 N. WACKER DRIVE
SUITE 1500
CHICAGO, IL 60606

e Telephone: 312-917-9900

Explanation: INTERNAL REASSIGNMENT AT MERCER

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 D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2019

This Form is Open to Public Inspection.

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A Name of plan
RETIREMENT PLAN FOR GREAT DANE LLC

B Three-digit plan number (PN) ▶ 005

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
GREAT DANE LLC

D Employer Identification Number (EIN)
36-4120610

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: COLSHRT TRM INVST FUND

b Name of sponsor of entity listed in (a): NORTHERN TRUST INVESTMENTS, INC.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
45-6138589-084	C	10643430

a Name of MTIA, CCT, PSA, or 103-12 IE: SILCHESTER INT VALUE EQUITY TRUST

b Name of sponsor of entity listed in (a): SILCHESTER INTERNATIONAL INVESTORS, LLP

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
36-7045783-001	E	45683639

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

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

2019

This Form is Open to Public Inspection

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A Name of plan
RETIREMENT PLAN FOR GREAT DANE LLC

B Three-digit plan number (PN) ▶ 005

C Plan sponsor's name as shown on line 2a of Form 5500
GREAT DANE LLC

D Employer Identification Number (EIN)
36-4120610

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		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		6000000
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	231507	190299
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	1062593	1122210
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	448446	553676
(B) Common	1c(4)(B)	179123548	162743989
(5) Partnership/joint venture interests	1c(5)	483420	604879
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	12036495	10643430
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)	39032666	45683639
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	2171354	2

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	234590029	227542124
	Liabilities			
g	Benefit claims payable	1g	267759	499195
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j	240824	
k	Total liabilities (add all amounts in lines 1g through1j)	1k	508583	499195
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	234081446	227042929

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)	6000000	
	(B) Participants	2a(1)(B)		
	(C) Others (including rollovers)	2a(1)(C)		
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		6000000
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	394895	
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)	77324	
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)		
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		472219
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)	31388	
	(B) Common stock	2b(2)(B)	2526258	
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		2557646
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	117593222	
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	105772784	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		11820438
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)	30354504	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		30354504

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		6812642
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		58017449
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	36992746	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)	25144930	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		62137676
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: **(1)** Professional fees	2i(1)	1031069	
(2) Contract administrator fees	2i(2)	93126	
(3) Investment advisory and management fees	2i(3)	1794095	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		2918290
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		65055966
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		-7038517
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) ☐ Unmodified **(2)** ☐ Qualified **(3)** ☒ Disclaimer **(4)** ☐ Adverse

b 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: PRICEWATERHOUSE COOPERS **(2)** EIN: 13-4008324

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	
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		10000000
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 4241450. (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

2019

This Form is Open to Public Inspection.

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A Name of plan
RETIREMENT PLAN FOR GREAT DANE LLC

B Three-digit plan number (PN) ▶ 005

C Plan sponsor's name as shown on line 2a of Form 5500
GREAT DANE LLC

D Employer Identification Number (EIN)
36-4120610

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): _____ _____

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** 2049

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): _____

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: 95.0 % Investment-Grade Debt: 4.0 % High-Yield Debt: _____% Real Estate: _____% Other: 1.0 %

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):

20 **PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation_____

Retirement Plan for
Great Dane LLC

Financial Statements and Supplemental Schedules
December 31, 2019 and 2018

Retirement Plan for Great Dane LLC
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Note: Other schedules of additional financial information required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA") have been omitted because they are not applicable.

Report of Independent Auditors

To the Administrator of
The Retirement Plan for Great Dane LLC

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Retirement Plan for Great Dane LLC (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2019 and 2018, and the related statement of changes in net assets available for benefits for the years then ended and the statement of accumulated plan benefits as of December 31, 2018 and the related statement of changes in accumulated plan benefits for the year then ended, 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 the financial statements in accordance with accounting principles generally accepted in the United States of America; this includes 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.

Auditors' Responsibility

Our responsibility is to express an opinion on the 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 7, which was certified by The Northern Trust Company, the trustee 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 trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of December 31, 2019 and 2018 and for the years then ended, that the information provided to the plan administrator by the trustee 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 the financial statements.

Other Matter

The supplemental schedules of Assets (Held at End of Year) as of December 31, 2019 and of Reportable Transactions for the year ended December 31, 2019 are required by the Department of Labor's 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 trustee, 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.

PricewaterhouseCoopers LLP
Chicago, Illinois
October 7, 2020

Retirement Plan for Great Dane LLC
Statements of Net Assets Available for Benefits
December 31, 2019 and 2018

	2019	2018
Assets		
Investments, at fair value		
Common stocks	$ 162,743,989	$ 179,123,548
Preferred stocks	553,676	448,446
Limited partnerships	604,879	483,420
Common and collective trusts	56,327,069	51,069,161
Corporate bonds	1,122,210	1,062,593
Total investments	221,351,823	232,187,168
Receivables		
Cash collateral held at broker for swap agreements	2	2,171,354
Employer contributions	6,000,000	-
Investment income receivable	190,299	231,507
Total assets	227,542,124	234,590,029
Liabilities		
Accrued expenses	499,195	267,759
Payable for variation margin on swap agreements	-	240,824
Total liabilities	499,195	508,583
Net assets available for benefits	$ 227,042,929	$ 234,081,446

The accompanying notes are an integral part of these financial statements.

Retirement Plan for Great Dane LLC
Statements of Changes in Net Assets Available for Benefits
Years Ended December 31, 2019 and 2018

	2019	2018
Additions to net assets attributed to		
Interest income	$ 394,895	$ 296,940
Investment income	77,324	102,700
Dividend income	2,557,646	2,581,225
Net appreciation in fair value of investments	48,987,584	-
Total investment income	52,017,449	2,980,865
Employer contributions	6,000,000	-
Total additions	58,017,449	2,980,865
Deductions from net assets attributed to		
Net depreciation in fair value of investments	-	30,951,177
Benefit payments to participants	36,992,746	9,085,212
Investment management fees	1,794,095	1,866,537
Administrative expenses	1,124,195	551,482
Annuity purchase	25,144,930	-
Total deductions	65,055,966	42,454,408
Net increase/(decrease)	(7,038,517)	(39,473,543)
Net assets available for benefits		
Beginning of year	234,081,446	273,554,989
End of year	$ 227,042,929	$ 234,081,446

The accompanying notes are an integral part of these financial statements.

Retirement Plan for Great Dane LLC
Statement of Accumulated Plan Benefits
December 31, 2018

Actuarial present value of accumulated plan benefits	
Vested benefits	
Participants currently receiving benefits	$ 46,778,066
Other participants	100,723,173
Total	147,501,239
Nonvested benefits	2,108,647
Total actuarial present value of accumulated plan benefits	$ 149,609,886

The accompanying notes are an integral part of these financial statements.

Retirement Plan for Great Dane LLC
Statement of Changes in Accumulated Plan Benefits
Year Ended December 31, 2018

Actuarial present value of accumulated plan benefits	
Beginning of year	$ 146,511,454
Increase (decrease) during the year	
Benefits paid	(9,085,212)
Changes in actuarial assumptions	(2,808,188)
Increase in interest due to a decrease in the discount period	10,619,272
Benefits accumulated and losses	4,136,607
Change in plan provisions	235,953
Net increase	3,098,432
Actuarial present value of accumulated plan benefits	
End of year	$ 149,609,886

The accompanying notes are an integral part of these financial statements.

1. Description of Plan

The following description provides general information on the provisions of the Retirement Plan for Great Dane LLC (the "Plan") sponsored by Great Dane LLC (the "Company" and "Plan Administrator"). Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan was adopted effective January 1, 1986 (the Great Dane Limited Partnership Bargaining Unit Pension Plan (the "Bargaining Unit Plan") was adopted effective January 1, 1978), and was amended and restated on December 28, 2001, effective January 1, 2001, to comply with the GUST amendments. The Plan and the Bargaining Unit Plan were amended on December 28, 2005 to reflect the merger of the Bargaining Unit Plan into the Plan and to make certain other changes. The Plan was most recently amended and restated effective January 1, 2015.

The Plan is a noncontributory, defined benefit plan currently covering substantially all nonunion employees of the Company as well as certain bargaining unit employees of the Company and provides for retirement and death benefits. Effective January 1, 2012, employees of Johnson Truck Bodies, LLC ("JTB") joined the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

The Northern Trust Company is the trustee of the Plan.

Participation

Generally, employees are eligible to participate after attaining age 21 and completing 12 consecutive months of service.

Funding Policy

The Company makes annual contributions based on the funding recommendations of the Plan's actuary to meet the minimum funding requirements under ERISA. The Plan is in compliance with applicable ERISA funding requirements for 2019 and 2018.

Vesting

Participants become fully vested upon completion of three years of service. Vesting service is credited to a participant for any calendar month in which a participant is credited with one hour of service.

Retirement Benefit Options

Each participant, with the exception of certain prior Plan and former Bargaining Unit Plan participants, having three years of vesting service is entitled to monthly pension benefits beginning at normal retirement age (65) calculated as the greater of (a) or (b) for service prior to January 1, 1998, plus (c) for service after December 31, 1997 and prior to January 15, 2012, plus either (d) for salaried employees or (e) for hourly employees, for service after January 15, 2012:

a. 2% of the participant's average monthly compensation, times years of benefit service (up to 30 years), minus 2-3/16% of monthly primary Social Security benefits, times years of benefit service (up to 30 years).

b. $10.50 times years of benefit service (up to 30 years).

Description of Plan - Continued

c. A monthly amount equal to the actuarial equivalent of a single sum payable at a participant's normal retirement date of 10% of the participant's average annual compensation multiplied by the participant's years of benefit service after December 31, 1997 and before January 15, 2012.

d. For a salaried participant, 0.75% of annual compensation for each year of Plan participation on or after January 15, 2012 divided by twelve.

e. For an hourly paid participant, $25.00 multiplied by participant's years of benefit service earned on or after January 15, 2012.

In no event will a participant's monthly retirement benefit be less than $10.50 multiplied by the years of benefit service up to a maximum of thirty years.

Former Bargaining Unit Plan participants are entitled to normal monthly retirement benefits calculated by multiplying an increasing dollar amount based on participation date by the credited years of service. Credited service may not exceed 30 years when calculating normal retirement benefits. Former Bargaining Unit Plan participants vest upon completing three or more years of credited service and normal retirement age is 65. A former Bargaining Unit Plan participant whose employment is terminated on or after August 1, 2005 and prior to attaining age 55 shall be entitled to a vested retirement benefit commencing at his normal retirement age or as early as age 55, as calculated in accordance with the Plan.

Payment of Benefits
The Plan allows for early retirement, starting at age 55 (age 62 for former Bargaining Unit Plan participants), provided the participant has at least 10 years of vesting service, with reduced benefits as defined by the Plan. The Plan's normal form of benefit for a single participant is a Straight Life Annuity, and for a married participant a 50% Joint and Survivor Annuity, which provides a lifetime benefit payable to the participant and, upon death, 50% of such benefit payable to the participant's surviving spouse.

Each participant, with the exception of former Bargaining Unit Plan participants, may also elect one of the following options:

Contingent Annuity - This option is similar to the Joint and Survivor Annuity described above. However, the individual named as the contingent annuitant can be an individual other than the participant's spouse. The benefits payable to the contingent annuitant can be 100%, 75% or 50% of the benefits earned by the participant, depending upon the election made by the participant.

Lump Sum - Participants may elect a lump-sum distribution of benefits accrued prior to January 15, 2012, to be paid immediately, transferred to an Individual Retirement Account ("IRA") or transferred to another employer's qualified plan. This option is only available if a participant works until retirement age. The remainders of benefits, if any, are available only in the forms outlined above.

Selection of one of these options by a married participant is contingent upon spousal consent.

Description of Plan - Continued

If a participant terminates their employment with the Company before completing the required years of vesting service, they do not receive Plan benefits. Participants who terminate with vested accumulated Plan benefits that are less than $5,000 receive their accumulated benefits as a lump-sum distribution.

The Plan was amended effective October 1, 2019, to direct the Trustee to purchase a group annuity contract for a certain group of participants. In October 2019, the Company entered into an agreement with Pacific Life Insurance Company to purchase a group annuity contract for approximately 1,100 retirees and beneficiaries who satisfied certain conditions and were receiving a monthly benefit from the Plan. There was no change to the pension benefits for any Plan participants as a result of this transaction. The purchase of the group annuity was funded directly by Plan assets of approximately $25,144,930.

Effective August 1, 2019, the Plan was amended to provide the opportunity for eligible deferred vested participants to elect a lump sum cash distribution during the window period of September 20, 2019 through November 4, 2019. Benefit payments that resulted from the voluntary lump sum window approximated $28,500,000.

Administrative Expenses and Investment Management Fees
Expenses of administration, that are permitted under ERISA regulations, such as legal, accounting, actuary, investment management fees, recordkeeping and trustee fees, are paid from the assets of the Plan.

Plan Termination
Although the Company has not expressed any intent to terminate the Plan, it may do so at any time, subject to the provisions of ERISA. In the event the Plan terminates, the assets of the Plan will be allocated as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated:

a. Benefits for all participants or beneficiaries whose retirement benefits have been or could have been payable three years prior to termination of the Plan.

b. Benefits guaranteed by and up to the insurance limitations of the Pension Benefit Guaranty Corporation (“PBGC”).

c. Benefits that are vested but not guaranteed by the termination insurance provisions of ERISA.

If the Plan terminates, a portion of the benefits under the Plan is insured by the PBGC (a U.S. Government agency). Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor benefits. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan’s net assets to provide those benefits, and may also depend on the level of benefits guaranteed by the PBGC.

2. Summary of Significant Accounting Policies

Basis of Accounting
The financial statements of the Plan are prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (“GAAP”).

Summary of Significant Accounting Policies - Continued

Use of Estimates
The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities and changes therein, disclosure of contingent assets and liabilities, and the actuarial present value of accumulated Plan benefits at the date of the financial statements and changes therein. Actual results could differ from those estimates.

Subsequent Events
Events or transactions occurring after the period end through October 7, 2020, the date that the financial statements were available to be issued, have been evaluated in the preparation of the financial statements. In December 2019, an outbreak of novel strain of coronavirus (COVID-19) emerged globally. Global financial markets have experienced and may continue to experience significant volatility resulting from the spread of COVID-19. The extent of the impact of COVID-19 on the Plan's net assets available for benefits, contributions and benefit obligations will depend on future developments, including the duration and continued spread of the outbreak.

Valuation of Investments and Income Recognition
Investments are valued at fair value. Fair value is the price that would be received to sell an asset in an orderly transaction between market participants at the measurement date. See Note 5 for discussion of fair value measurements. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date.

Net Appreciation (Depreciation) in Fair Value of Investments
Net realized and unrealized appreciation (depreciation), which includes gains and losses on investments bought and sold, as well as held during the year, is recorded in the accompanying Statements of Changes in Net Assets Available for Benefits as net appreciation (depreciation) in fair value of investments.

Payment of Benefits
Benefits are recorded when paid.

Recent Accounting Pronouncement
In August 2018 the Financial Accounting Standards Board ("FASB") issued Accounting Standards Update ("ASU") 2018-13, *Fair Value Measurement (Topic 820): Disclosure Framework – Changes to the Disclosure Requirements for Fair Value Measurement,* which includes additions, modifications and eliminations to existing disclosure requirements for fair value measurement. The prospective application of this guidance is effective for annual periods beginning in 2020. Plan management does not believe the adoption of this guidance will have a material effect on the Plan's financial statements.

3. Actuarial Present Value of Accumulated Plan Benefits

Accumulated Plan benefits are those future periodic payments, including lump-sum distributions that are attributable under the Plan's provisions to the service employees have rendered. Accumulated Plan benefits include benefits expected to be paid to (1) retired or terminated employees or their beneficiaries, (2) beneficiaries of employees who have died, and (3) present employees or their beneficiaries. Benefits payable under all circumstances (i.e., retirement, death, disability and termination of employment) are included, to the extent they are deemed attributable to employee service rendered to the valuation date.

Actuarial Present Value of Accumulated Plan Benefits - Continued

The actuarial present value of accumulated Plan benefits is determined by the Plan's actuary, Mercer, and is that amount that results from applying actuarial assumptions to adjust the accumulated Plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal or retirement) between the valuation date and the expected date of payment.

Significant actuarial assumptions used in the valuations as of January 1, 2019 and 2018, are as follows:

	2019	2018
Discount rate per ASC 960	7.50% per annum	7.50% per annum
Mortality	Mercer Modified RP 2014 employee/retiree tables and Mercer Modified MP 2018 projection scale with white and blue adjustments for salaried and hourly employees, respectively.	Mercer Modified RP 2014 employee/retiree tables and Mercer Modified MP 2014 projection scale with white and blue adjustments for salaried and hourly employees, respectively.
Retirement age	Age 55-70, or if older, age on valuation date.	Age 55-70, or if older, age on valuation date.

The computations of the actuarial present value of accumulated plan benefits were made as of January 1, 2019. Had the valuations been performed as of December 31, 2018 there would be no material difference. The actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated Plan benefits.

4. Investments

The Plan's investments are managed by the Company's investment managers together with The Northern Trust Company, in its role as trustee of the Plan.

The following table presents investments in common and collective trusts for which fair value is measured using the net asset value ("NAV") per share practical expedient.

December 31, 2019		Fair Value	Redemption Frequency	Redemption Notice Period
Northern Trust STIF	(a)	$ 10,643,430	Daily	None
Silchester	(b)	45,683,639	30 days	30 days

December 31, 2018		Fair Value	Redemption Frequency	Redemption Notice Period
Northern Trust STIF	(a)	$ 12,036,495	Daily	None
Silchester	(b)	39,032,666	30 days	30 days

(a) Northern Trust Collective Short Term Investment Fund ("Northern Trust STIF")
(b) Silchester International Value Equity Group Trust ("Silchester")

5. Fair Value

The Plan follows guidance defined in Accounting Standards Codification, *Fair Value Measurement (Topic 820)*, which provides a framework for measuring fair value under GAAP. This framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy are described as follows:

Level 1 – Quoted market prices in active markets for identical assets or liabilities.

Level 2 – Observable inputs other than Level 1 prices such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities.

Level 3 – Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets and liabilities.

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

The Plan's investments are valued at fair value using the following methodologies:

- **Common stocks and preferred stocks:** valued at the closing price of individual shares at year-end as traded in an active market.

- **Common and collective trusts**: valued at the year-end NAV of the underlying investments comprising the common and collective trusts. The Plan holds investments in the Northern Trust STIF and Silchester. The Northern Trust STIF investment reflects high-grade money market instruments with short maturities. The Silchester investment reflects equity securities traded on international exchanges in developed markets.

- **Corporate bonds**: valued based on the yields currently available on comparable securities of issuers with similar credit ratings. When quoted prices are not available, the bond is valued using matrix pricing or models from reputable pricing vendors.

- **Limited Partnership**: The limited partnership is publicly traded and the value is based on quoted market prices.

- **Swap agreements**: Swaps are marked-to-market daily using pricing vendor quotations, counterparty or clearinghouse prices or model prices, and the change in value, if any, as unrealized appreciation (depreciation).

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

Fair Value - Continued

The following table presents the Plan's investment assets measured at fair value as of December 31, 2019:

	Assets at Fair Value as of December 31, 2019			
	Level 1	Level 2	Level 3	Total
Common stocks	$ 162,743,989	$ -	$ -	$ 162,743,989
Limited partnership	604,879	-	-	604,879
Preferred stocks	553,676	-	-	553,676
Corporate bonds	-	1,122,210	-	1,122,210
Total investment assets in fair value hierarchy	163,902,544	1,122,210	-	165,024,754
Common and collective trusts (a)	-	-	-	56,327,069
Total investment assets at fair value	$ 163,902,544	$ 1,122,210	$ -	$ 221,351,823

(a) Assets measured at NAV as a practical expedient are excluded from the fair value hierarchy.

For comparative purposes, the following table presents the Plan's investment assets measured at fair value as of December 31, 2018:

	Assets at Fair Value as of December 31, 2018			
	Level 1	Level 2	Level 3	Total
Common stocks	$ 179,123,548	$ -	$ -	$ 179,123,548
Limited partnership	483,420	-	-	483,420
Preferred stocks	448,446	-	-	448,446
Corporate bonds	-	1,062,593	-	1,062,593
Total investment assets in fair value hierarchy	180,055,414	1,062,593	-	181,118,007
Swap agreements	-	(240,824)	-	(240,824)
Total investment assets in fair value hierarchy including derivatives	180,055,414	821,769	-	180,877,183
Common and collective trusts (a)	-	-	-	51,069,161
Total investment assets at fair value	$ 180,055,414	$ 821,769	$ -	$ 231,946,344

(a) Assets measured at NAV as a practical expedient are excluded from the fair value hierarchy.

The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions may require the transfer of financial instruments from one fair value hierarchy to another. In such instances, the transfer is reported at the beginning of the reporting period. The Plan does not hold any investments requiring Level 3 measurements and there have not been any transfers of assets between the levels from 2018 to 2019.

6. Swap agreements

Swap agreements are privately negotiated contracts to exchange investment cash flows at a future date based on the underlying value of the assets. Swap agreements involve elements of credit, market, and documentation risk. Swap agreements are traded Over The Counter ("OTC"). For OTC swap agreements, the Plan could be exposed to risk if the counterparties are unable to meet the terms of the contracts. This risk is mitigated by the posting of collateral by the counterparty and monitored against the contract terms.

An Equity Swap allows the Plan to invest in a market without owning or taking physical custody of securities in circumstances in which direct investment may be restricted or is otherwise disadvantageous. Investment managers may enter into Equity Swaps to gain/reduce exposure on the referenced asset. An Equity Swap allows the parties to the swap agreement to exchange the dividend income and other components of return on the equity investment for another payment stream.

The swap agreements are not designated as hedging instruments. Net return paid or received under the swap agreements is included in net appreciation/depreciation of investments on the Statements of Changes in Net Assets Available for Benefits and Changes in Net Assets.

At December 31, 2018, the Plan had the following open swaps categorized by primary underlying risk:

	Counterparty	Term	Number of Contracts	Notional Amount	Unrealized Depreciation/Variation Margin
Equity price:					
The Blackstone Group LP BX Total Return Swap	Morgan Stanley	13 months	5	$ 3,726,608	(240,824)

The value on the 2018 Statement of Net Assets Available for Benefits represents the daily change in valuation of the unsettled swap agreements and is recorded as a receivable or payable for variation margin. The derivative activities during 2018 are reflective of the year end notional amounts.

As of December 31, 2018, a cash balance of $2,171,354 was pledged to cover margin requirements for unsettled swap agreements and is included in the Statement of Net Assets Available for Benefits as cash collateral held at broker for swap agreements.

7. Information Certified by Trustee

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the trustee has certified that the following data included in the financial statements and supplemental schedule of assets held at end of year is complete and accurate:

- Investments, at fair value (except for third party information related to Silchester amounting to $45,683,639 and $39,032,666 as of December 31, 2019 and 2018, respectively) and investment income receivable as shown in the Statements of Net Assets Available for Benefits as of December 31, 2019 and 2018.

Information Certified by Trustee - Continued

- Cash collateral held at broker for swap agreements as shown in the Statement of Net Assets Available for Benefits as of December 31, 2019 and December 31, 2018**.**

- Payable for variation margin on swap agreements - unrealized depreciation payable, as shown in the Statement of Net Assets Available for Benefits as of December 31, 2018.

- Interest income, investment income, dividend income, net appreciation (depreciation) in fair value of investments and investment management fees (except for third party information related to Silchester amounting to $6,650,974 and ($6,604,820) for the years ended December 31, 2019 and 2018, respectively), as shown in the Statements of Changes in Net Assets Available for Benefits for the years ended December 31, 2019 and 2018.

- Schedule I, Schedule H, Line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2019 (except for third party information related to Silchester).

- Schedule II, Schedule H, Line 4j - Schedule of Reportable Transactions for the year ended December 31, 2019.

The Plan's independent auditors did not perform auditing procedures with respect to this information, except for comparing such information to the related information included in the financial statements and supplemental schedules.

8. Income Tax Status

The IRS has determined and informed the Company by a letter dated July 11, 2017, that the Plan is designed in accordance with the applicable sections of the Internal Revenue Code ("IRC"). The Company and the Plan's tax counsel believe that the Plan is designed and continues to be operated in compliance with the applicable requirements of the IRC.

GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. There are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements as of December 31, 2019 and 2018. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan is no longer subject to income tax examinations for years prior to 2016.

9. Risks and Uncertainties

The determination of contributions to the Plan and the actuarial present value of accumulated plan benefits are based on certain assumptions pertaining to interest rates, inflation rates and employee demographics. Due to the changing nature of these assumptions, it is at least reasonably possible that changes in these assumptions will occur in the near term and due to the uncertainties inherent in setting assumptions, that the effect of such changes could be material to the financial statements.

The Plan also invests in securities that, in general, are exposed to various risks, such as interest rate, credit and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in values of investment securities will occur in the near term and those changes could materially affect the amounts reported in the Statements of Net Assets Available for Benefits and the Statements of Changes in Net Assets Available for Benefits.

10. Related-Party Transactions

Certain Plan investments are managed by The Northern Trust Company. The Northern Trust Company is the trustee of the Plan; therefore, these transactions qualify as party-in-interest transactions.

SUPPLEMENTAL SCHEDULES

Retirement Plan for Great Dane LLC
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2019 Schedule I

(a)	Identity of issue, borrower, lessor or similar party (b)	Description of investment including maturity date, rate of interest, collateral, par or maturity value (c)	Cost (d)	Current value (e)
	Investments			
	Common stocks			
	Arconic Mandatory Exchange	Common Stock	2,967,253	4,307,800
	Activision Blizzard, Inc.	Common Stock	700,958	686,301
	Alibaba Group Holding Limited	Common Stock	1,826,589	3,205,255
	Alphabet, Inc.	Common Stock	2,511,771	4,545,868
	Alphabet, Inc.	Common Stock	657,704	964,361
	American Airlines Group, Inc.	Common Stock	5,723,575	3,298,200
	American International Group, Inc.	Common Stock	3,224,952	4,065,336
	Apple Inc.	Common Stock	755,738	1,115,870
	Ashland Global Holdings, Inc.	Common Stock	782,915	865,937
	BlackRock, Inc.	Common Stock	581,471	615,807
	Blackstone Group Inc.	Common Stock	1,666,458	2,023,070
	Booking Holdings, Inc.	Common Stock	3,801,032	4,723,579
	Brookfield Asset Management, Inc.	Common Stock	973,776	1,317,089
	CBRE Group, Inc.	Common Stock	2,238,178	5,209,650
	CDW Corporation	Common Stock	279,587	628,496
	Charter Communications, Inc.	Common Stock	2,193,711	4,608,260
	Citigroup Inc.	Common Stock	3,831,939	5,192,850
	CME Group Inc.	Common Stock	302,797	459,649
	Core Laboratories	Common Stock	4,897,827	2,372,833
	Corelogic Inc.	Common Stock	4,329,865	4,152,450
	Costco Wholesale Corporation	Common Stock	259,892	462,924
	CVS Health Corporation	Common Stock	4,244,459	4,895,711
	Danaher Corporation	Common Stock	1,857,973	3,458,825
	Delta Air Lines, Inc.	Common Stock	518,655	573,104
	Dentsply Sirona, Inc.	Common Stock	4,558,712	6,164,179
	Equifax Inc.	Common Stock	676,591	774,163
	Equinix, Inc.	Common Stock	591,347	875,550
	Expedia Group Inc.	Common Stock	849,574	692,096
	Facebook, Inc.	Common Stock	641,489	764,556
	Fortive Corporation	Common Stock	1,984,560	2,321,874
	Gates Industrial Corporation plc	Common Stock	600,426	512,904
	General Motors Company	Common Stock	3,923,284	4,758,000
	Gilead Sciences, Inc.	Common Stock	603,300	565,651
	HCA Healthcare, Inc.	Common Stock	2,400,745	4,803,825
	HD Supply Holdings, Inc.	Common Stock	721,548	833,559
	Henry Schein, Inc.	Common Stock	7,275,114	8,502,997
	Humana Inc.	Common Stock	4,273,998	5,681,060
	IHS Markit Limited	Common Stock	406,288	828,850
	Illumina Inc..	Common Stock	1,018,789	1,038,678

Information included in this schedule is certified as complete and accurate by The Northern Trust Company; except for third party information related to the Silchester International Value Equity Group Trust.

Retirement Plan for Great Dane LLC
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2019 Schedule I

(a)	Identity of issue, borrower, lessor or similar party (b)	Description of investment including maturity date, rate of interest, collateral, par or maturity value (c)	Cost (d)	Current value (e)
	Common stocks - continued			
	Interactive Brokers Group, Inc.	Common Stock	3,145,694	2,986,011
	Johnson Controls International plc	Common Stock	3,269,518	3,663,900
	J P Morgan Chase and Company	Common Stock	384,459	578,510
	Kuehne & Nagel International AG	Common Stock	1,895,620	2,304,198
	Lear Corporation	Common Stock	5,365,526	4,802,000
	Lowes Companies, Inc.	Common Stock	904,751	976,044
	McDonald's Corporation	Common Stock	701,753	879,364
	Medtronic PLC	Common Stock	495,984	646,665
	MGM Resorts International	Common Stock	491,929	572,244
	Microcsoft Corporation	Common Stock	636,891	883,120
	Mondelez International	Common Stock	479,336	490,212
	Moody's Corporation	Common Stock	2,235,076	4,748,200
	National Oilwell Varco, Inc.	Common Stock	4,308,396	3,507,000
	NextEra Energy, Inc.	Common Stock	624,832	1,126,044
	Nike Inc.	Common Stock	662,169	790,218
	Nortel Networks Corporation	Common Stock	36	-
	Patterson Companies Inc.	Common Stock	2,192,794	2,058,569
	Regeneron Pharmaceuticals, Inc.	Common Stock	4,045,661	4,881,240
`	Repay Holdings Corporation.	Common Stock	632,048	718,626
	S&P Global Inc.	Common Stock	412,408	600,710
	SeaWorld Entertainment, Inc.	Common Stock	468,393	795,921
	Servicenow Inc.	Common Stock	474,631	522,292
	Spotify Technology S.A.	Common Stock	478,089	459,866
	Thermo Fisher Corporation	Common Stock	2,352,384	4,847,060
	Tradeweb Markets Inc.	Common Stock	469,408	519,120
	Trinity Industries Inc.	Common Stock	3,987,344	4,208,500
	Ulta Beauty Inc.	Common Stock	1,666,120	1,776,790
	Union Pacific Corporation	Common Stock	547,840	596,607
	United Health Group Inc.	Common Stock	439,716	587,960
	Univar, Inc.	Common Stock	1,103,824	990,810
	Versik Analytics, Inc.	Common Stock	193,795	365,883
	Visa Inc.	Common Stock	597,979	930,105
	Wabtec Corporation	Common Stock	4,153,884	4,279,000
	Waters Corporation	Common Stock	1,132,584	1,279,234
	WEX, Inc.	Common Stock	299,443	504,799
		Total common stocks	132,905,155	162,743,989

Information included in this schedule is certified as complete and accurate by The Northern Trust Company; except for third party information related to the Silchester International Value Equity Group Trust.

Retirement Plan for Great Dane LLC
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2019 Schedule I

(a)	Identity of issue, borrower, lessor or similar party (b)	Description of investment including maturity date, rate of interest, collateral, par or maturity value (c)	Cost (d)	Current value (e)
	Limited Partnership			
	Brookfield Infrastructure Partners, L.P.	Limited Partnership	395,734	604,879
		Total limited partnership	395,734	604,879
	Preferred stocks			
	Sempra Energy	Preferred Stock	472,214	553,676
		Total preferred stocks	472,214	553,676
	Common and collective trusts			
*	Northern Trust STIF	Common and Collective Trust	10,643,430	10,643,430
	Silchester Int'l Value Equity Grp Trust	Common and Collective Trust	18,779,500	45,683,639
		Total common and collective trusts	29,422,930	56,327,069
	Corporate bonds			
	APX Group, Inc.	Corporate Bond	266,585	262,000
	MagnaChip Semiconductor Corporation	Corporate Bond	496,648	467,210
	Rockpoint Gas Storage Canada, Ltd.	Corporate Bond	389,472	393,000
		Total corporate bonds	1,152,705	1,122,210
	Cash collateral receivable			
	Morgan Stanley	Cash Collateral Receivable	2	2
		Total investments	$ 164,348,740	$ 221,351,825

Information included in this schedule is certified as complete and accurate by The Northern Trust Company; except for third party information related to the Silchester International Value Equity Group Trust.

Retirement Plan for Great Dane LLC
Schedule H, Line 4j - Schedule of Reportable Transactions
Year Ended December 31, 2019 — Schedule II

(a)	Identity of party involved/description of investment (b)	Transaction Aggregate: Number of transactions	Purchase price (c)	Selling price (d)	Cost of asset (g)	Current value of asset on transaction date (h)	Net gain/ (loss) (i)
	Series of Transactions in excess of 5%						
*	Northern Trust STIF	323	$ 120,059,569	$ -	$ 120,059,569	$ 120,059,569	$ -
*	Northern Trust STIF	136	-	124,688,588	124,688,588	124,688,588	-
*	Northern Trust STIF	1	27,000,000	-	27,000,000	27,000,000	-
*	Northern Trust STIF	1	29,965,908	-	29,965,908	29,965,908	-
*	Northern Trust STIF	1	-	17,000,000	17,000,000	17,000,000	-
*	Northern Trust STIF	1	-	25,144,930	25,144,930	25,144,930	-
*	Northern Trust STIF	1	-	13,993,400	13,993,400	13,993,400	-
*	Northern Trust STIF	1	-	25,273,676	25,273,676	25,273,676	-

* Represents a party-in-interest to the Plan.

Information included in this schedule is certified as complete and accurate by The Northern Trust Company; except for third party information related to the Silchester International Value Equity Group Trust.

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2019

This Form is Open to Public Inspection

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of $1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan
Retirement Plan for Great Dane LLC

B Three-digit plan number (PN) ▶ 005

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
GREAT DANE LLC

D Employer Identification Number (EIN)
36-4120610

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2019

2 Assets:

a Market value	2a	234,081,446
b Actuarial value	2b	234,081,446

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	1,449	57,634,918	57,634,918
b For terminated vested participants	1,973	46,930,294	46,930,294
c For active participants	3,825	79,867,314	81,612,520
d Total	7,247	184,432,526	186,177,732

4 If the plan is in at-risk status, check the box and complete lines (a) and (b) [ ]

a Funding target disregarding prescribed at-risk assumptions	4a	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b	
5 Effective interest rate	5	5.70%
6 Target normal cost	6	5,637,934

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE

J.R.E.
Signature of actuary

9/4/2020
Date

JERED R. EASLEY
Type or print name of actuary

2007646
Most recent enrollment number

MERCER
Firm name

816-556-4842
Telephone number (including area code)

2405 GRAND BOULEVARD
SUITE 900
KANSAS CITY MO 64108
Address of the firm

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of -10.50%	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.88%		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages

14	Funding target attainment percentage	14	125.73%
15	Adjusted funding target attainment percentage	15	125.73%
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	155.55%
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/22/2020	6,000,000	0			
			Totals ► 18(b)	6,000,000	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	5,580,962

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☐ No

c If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	
3.74 %	5.35 %	6.11%	☐ N/A, full yield curve used

b Applicable month (enter code)	21b	0
22 Weighted average retirement age	22	62

23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment	☒ Yes	☐ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment	☐ Yes	☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment	☒ Yes	☐ No

27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	27	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):

a Target normal cost (line 6)	31a	5,637,934
b Excess assets, if applicable, but not greater than line 31a	31b	5,637,934

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	34	0

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0

36 Additional cash requirement (line 34 minus line 35)	36	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	5,580,962
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	38a	5,580,962
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0
40 Unpaid minimum required contributions for all years	40	0

Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)

41 If an election was made to use PRA 2010 funding relief for this plan:

a Schedule elected ☐ 2 plus 7 years ☐ 15 years

b Eligible plan year(s) for which the election in line 41a was made ☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011

Schedule SB, line 22 — Description of Weighted Average Retirement Age

Each employee is assumed to retire in accordance with the table of retirement rates. The proportion of employees expected to retire at each potential retirement age is shown below. The average retirement age is 62.

(A) Retirement age	(B) Retirement Percent	(C) Lx	(D) Number of employees expected to retire (B) x (C)	(E) (A) x (D)
55	5.0%	10,000	500	27,500
56	5.0%	9,500	475	26,600
57	5.0%	9,025	451	25,707
58	5.0%	8,574	429	24,882
59	5.0%	8,145	407	24,013
60	5.0%	7,738	387	23,220
61	15.0%	7,351	1,103	67,283
62	25.0%	6,248	1,562	96,844
63	15.0%	4,686	703	44,289
64	30.0%	3,983	1,195	76,480
65	40.0%	2,788	1,115	72,475
66	35.0%	1,673	586	38,676
67	30.0%	1,087	326	21,842
68	30.0%	761	228	15,504
69	30.0%	533	160	11,040
70	100.0%	373	373	26,110
Total			10,000.00	622,465
Average				62.2

Schedule SB, Part V — Statement of Actuarial Assumptions/Methods

Actuarial Assumptions for January 1, 2019 Funding Valuation

Discount rate sponsor elections		
• Segment rates or full yield curve	Segment	
• Look-back months	0	
	Stabilized	**Nonstabilized**
• First 5 years	3.74%	2.55%
• Next 15 years	5.35%	3.93%
• Over 20 years	6.11%	4.49%
Mortality sponsor elections		
• Healthy and disabled participants	PPA separate generational annuitant and nonannuitant mortality tables	
417(e) lump sums	Liabilities are determined based on the underlying annuity used by the plan to determine the lump sum amount, rather than valuing the lump sum payment. This annuity is valued based on funding interest rates rather than 417(e) rates and the current year static combined unisex mortality table under PPA. For individuals with lump sum payments made on the valuation date, the liability is set equal to the actual lump sum payment.	
Other economic assumptions		
• Salary increases		
— Hourly	N/A – benefit formula is not pay-related	
— Salaried	**Attained age**	**Salary Increases**
	25 – 29	7.00%
	30 – 34	7.00%
	35 – 39	6.00%
	40 – 44	6.00%
	45 – 49	5.00%
	50 – 54	4.50%
	55 – 59	4.50%
	60 – 64	3.50%
	65 – 69	3.00%
	70 and above	3.00%
• Flat-dollar benefit increases	N/A	
• Social Security taxable wage base increases	N/A	
• Inflation	2.20% per year	
• Expenses	$551,000 added to current year normal cost	

Rationale for Economic Assumptions

- Salary increases – The salary scale assumption is based on an experience study covering the period January 1, 2013 to January 1, 2018, adjusted to reflect management's expectations for wage changes in the future.

Schedule SB, Part V — Statement of Actuarial Assumptions/Methods

- Expenses – Assumed plan-paid expenses for the upcoming year are based on prior year experience, adjusted (if material for the purpose) for expected changes in the upcoming year, rounded to the nearest $1,000.
- Discount rate – The discount rate is prescribed by the plan sponsor through an election from allowable alternatives under IRS regulations.

Demographic assumptions

Demographic assumptions

• Withdrawal	See table of sample rates.
• Disability incidence	See table of sample rates.

• Retirement age

Attained age	Percentage
Under 55	0%
55 – 60	5%
61	15%
62	25%
63	15%
64	30%
65	40%
66	35%
67-69	30%
70 and above	100%

• Benefit commencement age for		
— Future vested deferred	65	
— Current vested deferred	65	
— Future disabled	Immediate if age 55 with 10 years of service, else deferred to 65	
• Spouse assumptions	**Male participants**	**Female participants**
— Percentage married	90%	90%
— Spouse age difference	3 years younger	3 years older

Form of payment

For benefits earned prior to January 1, 2012:

	Lump sum	Single life	50% J&S	100% J&S
• Active retirements	70%	12%	0%	18%
• Future vested deferred	0%	45%	0%	55%
• Future disabilities – deferred	0%	45%	0%	55%
• Future disabilities – immediate	0%	40%	0%	60%
• Future deaths	0%	0%	100%	0%
• Current vested deferred	0%	45%	0%	55%

For benefits earned after January 1, 2012:

	Lump sum	Single life	50% J&S	100% J&S
• Active retirements	0%	40%	0%	60%
• Future vested deferred	0%	45%	0%	55%
• Future disabilities - deferred	0%	45%	0%	55%

Schedule SB, Part V — Statement of Actuarial Assumptions/Methods

• Future disabilities – immediate	0%	40%	0%	60%
• Future deaths	0%	0%	100%	0%
• Current vested deferred	0%	45%	0%	55%
Valuation Pay	Valuation pay for 2019 is equal to [(a) –(b) + (c) – (d) + (e)] multiplied by the funding salary scale: (a) 2018 actual pension compensation, annualized for rehires and new hires during 2018; (b) actual bonus during 2018; (c) an assumed bonus equal to an individual's target bonus percent multiplied by their base compensation for 2018; (d) 2018 actual commissions; and (e) average of commissions for the prior 3 years.			

Table of Sample Rates

	Withdrawal and Disability Percentages				
	Withdrawal				Disability incidence
	Hourly		Salaried		
Attained age	Less than or equal to 5 years of service (Select)	Greater than 5 years of service (Ultimate)	Less than or equal to 5 years of service (Select)	Greater than 5 years of service (Ultimate)	
20	43.90%	25.40%	24.80%	13.70%	0.04%
25	38.10%	18.40%	24.80%	10.20%	0.07%
30	33.00%	12.20%	22.80%	7.10%	0.10%
35	31.00%	10.00%	17.30%	5.00%	0.14%
40	29.40%	9.00%	18.10%	4.50%	0.22%
45	27.70%	8.00%	19.60%	4.00%	0.34%
50	26.10%	6.50%	21.10%	4.50%	0.61%
55	24.80%	8.00%	15.40%	4.00%	1.11%
60	24.80%	8.00%	15.40%	4.00%	1.60%

Rationale for Demographic Assumptions

- Mortality – Prescribed assumption and based on plan sponsor's PPA election.
- Withdrawal – The withdrawal rates are based on an experience study covering the period from January 1, 2013 to January 1, 2018.
- Retirement age – The retirement rates are based on an experience study covering the period from January 1, 2013 to January 1, 2018.
- Form of payment – The form of payment assumption is based on an experience study covering the period from January 1, 2013 to January 1, 2018.
- Benefit commencement age – The benefit commencement age is based on an experience study undertaken in 2010. An experience study in 2018 found that benefit commencement age experience was in line with expectations so the commencement age was not changed.

- The percent married and spouse age difference assumptions were also reviewed during the experience study in 2018 and it was found that experience was in line with expectations so the assumptions were not changed.

Actuarial Methods for Funding

Asset Methods

The asset valuation method is the fair market value.

Participant Methods

Participants or former participants are included or excluded from the valuation as described below:

- **Participants included:** The plan sponsor provides us with data on all employees as of the valuation date, but only those employees who have completed the plan's eligibility requirements are included in the valuation of liabilities.
- **Participants excluded:** No actuarial liability is included for nonvested participants who terminated prior to the valuation date. For this purpose, participants with a break in service on the valuation date are treated as terminated participants.
- **Insurance contracts**: The plan does not have any insurance contracts.

Minimum Funding Methods

The funding target for minimum funding calculations is computed using the traditional unit credit method of funding. The objective under this method is to fund each participant's benefits under the plan as they accrue. Thus, the total pension to which each participant is expected to become entitled at retirement is broken down into units, each associated with a year of past or future credited service.

A detailed description of the calculation follows:

- The plan's valuation date is the beginning of the plan year.
- An individual's **funding target** is the present value of future benefits based on credited service and average pay as of the beginning of the plan year, and an individual's **target normal cost** is the present value of the benefit expected to accrue in the plan year. If multiple decrements are used, the funding target and the target normal cost for an individual are the sum of the component funding targets and target normal costs associated with the various anticipated separation dates.
- This plan provides benefits that are not a function of a participant's accrued benefit or years of service. This benefit is allocated to funding target based on the ratio of the participant's service at the beginning of the plan year to their service at each decrement age and is allocated to target normal cost based on the proportionate benefit attributable to the increase in the participant's service and compensation during the plan year.
- The plan's **target normal cost** is the sum of the individual target normal costs, and the plan's **funding target** is the sum of the individual funding targets for all participants under the plan.

Schedule SB, line 24 — Change in Actuarial Assumptions

Actuarial assumption changes since prior valuation

- The expense component of normal cost increased from $462,000 to $551,000 to reflect expectations for the current plan year.
- Inflation was updated from 2.50% to 2.20% to reflect current market conditions.

Schedule SB, line 26 — Schedule of Active Participant Data

Attained age	Years of credited service										
	Under 1	1–4	5–9	10–14	15–19	20–24	25–29	30–34	35–39	40 & up	Total
Under 25	6	205	8								219
		41,597									
25–29	14	352	121	2							489
		52,896	60,957								
30–34	15	263	119	27	3						427
		59,154	77,249	65,888							
35–39	10	208	109	85	38	1					451
		60,869	70,035	71,321	98,139						
40–44	9	186	91	43	48	30	4				411
		74,474	62,496	82,559	95,160	106,809					
45–49	9	159	81	42	49	52	44				436
		62,416	71,115	66,780	87,244	101,702	63,590				
50–54	5	142	96	52	48	41	55	32	5		476
		90,380	101,257	85,336	88,864	102,061	137,583	79,319			
55–59	5	100	82	57	57	40	32	65	27	25	490
		86,179	70,140	93,495	80,229	119,093	84,539	88,152	116,821	84,074	
60–64	2	56	63	31	39	34	16	31	20	62	354
		71,236	93,262	102,184	85,310	96,253		76,919	147,316	93,482	
65–69		8	9	5	10	5	6	3	3	6	55
70 & up		2	5	1	2	3		2	1	1	17
Total	75	1,681	784	345	294	206	157	133	56	94	3,825

In each cell, the top number is the count of active participants for each age/service combination and the bottom number is average current year valuation pay, as defined in the assumptions, limited in accordance with IRC Secion 417(a)(17) for salaried participants. Average pay is not shown for cells with fewer than 20 participants.

Schedule SB, Part V — Summary of Plan Provisions

Benefits Included or Excluded

Unless noted below, all benefits provided by the plan, as amended and restated effective January 1, 2015, are included in this valuation:

- **Most recent plan amendments included:** The Third Amendment, effective April 1, 2018, to the January 1, 2015 restated plan is reflected in this valuation.
- **Plan amendments excluded:** None.
- **Late retirement increases:**
  - *Active participants:* Current active participants over normal retirement age are valued using their accrued benefit at the valuation date. The plan sponsor issues suspension of benefit notices to participants who work beyond normal retirement date, so actuarial increases do not apply.
  - *Deferred vested participants:* Current deferred vested participants over normal retirement age are valued using a late retirement actuarial increase using the plan's definition of actuarial equivalence. The age 75 late retirement actuarial increase factor is applied to deferred vested participants who are over age 75 as of the valuation date.
- **Internal Revenue Code limitations:** The limitations of Internal Revenue Code Section 415(b) and 401(a)(17) have been incorporated into our calculations.
- **IRC Section 416 rules for top-heavy plans:** We did not test whether this plan is top-heavy (when the present value of benefits for key employees equals or exceeds 60% of the present value for all participants). However, we expect that the plan is not top-heavy due to the large number of rank-and-file participants; therefore, the funding target and target normal cost do not reflect any liability for top-heavy benefit accruals.

Plan Provisions Specific to Funding

Additional Benefits Included or Excluded

- **IRC Section 436 benefit restrictions:**
  - *Plan amendments:* See above.
  - *Prohibited payments:* Limitations on prohibited benefits (if any) are reflected for annuity starting dates before the valuation date but are ignored for annuity starting dates on or after the valuation date.
  - *Benefit accruals:* The plan's funding target does not reflect any limitation on benefit accruals. The target normal cost does not reflect any limitation on benefit accruals.
- **Scheduled benefit increases:** No scheduled benefit increases exist under the plan.

Schedule SB, Part V — Summary of Plan Provisions

- **Shutdown benefits:** We are not aware of any corporate actions that would create shutdown benefits; therefore, they are excluded.
- **Unpredictable contingent event benefits:** The plan does not have any unpredictable contingent event benefits.

Summary of Major Plan Provisions

Effective date and plan year	Original plan: January 1, 1986 Restated plan: January 1, 2015 Last amended: January 1, 2017 Plan year: The calendar year
Status of the plan	The plan has ongoing benefit accruals and new employees are eligible to participate in the plan once they satisfy the participation requirements.
Significant events that occurred during the year	None.
Definitions	
• Participation	Employees are eligible on the January 1st or July 1st coincident with or next following the anniversary of their employment commencement date following completion of one year of eligibility service and attainment of age 21. Former participants of the Pines Trailer Target Benefit Plan and Trust became participants on January 1, 1998. Former participants of the Great Dane Limited Partnership Bargaining Unit Plan became participants on January 1, 2006. Employees of the Johnson Truck Bodies became participants beginning on January 15, 2012.
• Employee contributions	Contributions are neither permitted nor required.
• Vesting service	Service prior to January 1, 1998 is determined under the terms of the prior plans. On or after January 1, 1998, and prior to January 15, 2012, vesting service is determined as years and completed months of employment with the Company. On or after January 15, 2012, vesting service is determined as years and months in which one has worked for more than one hour of credited service with the Company.
• Benefit service	Service prior to January 1, 1998 is determined under the terms of the prior plans. On or after January 1, 1998, and prior to January 15, 2012, benefit service is determined as years and completed months of employment with the Company. On or after January 15, 2012, benefit service is determined as years and months in which one has worked for more than one hour of credited service with the Company.
• Compensation	Total earnings from the Employer, as reported on Form W-2 including the amount of any authorized reductions pursuant to a salary reduction agreement under Section 401(k) or Section 125 of the Code, but excluding certain non-income related items such as moving expenses and fringe benefits.

Schedule SB, Part V — Summary of Plan Provisions

• Average Monthly Compensation	Compensation received during the highest five consecutive completed calendar years within the last 10 calendar years of service prior to January 15, 2012. If a participant has less than five calendar years of service, the average monthly compensation received in all full consecutive completed calendar years of service prior to January 15, 2012.
• Prior Plan Accrued benefit	The accrued benefit as of December 31, 1985, payable at age 65 for which an annuity has been purchased from Travelers.
• Normal Retirement Date	The first of the month coincident with or next following age 65.
Normal retirement	
• Eligibility	Age 65.
• Benefit	**Past Service Benefit** Frozen Accrued Benefit as of December 31, 1997 earned under the provisions of the prior Great Dane plan, payable as an annuity or converted to a lump sum. 10% of Average Monthly Compensation for each year of Benefit Service earned after December 31, 1997 through January 15, 2012, payable as a lump sum or converted to an annuity. **Future Service Benefit** ***Hourly:*** $25 per completed month of Benefit Service earned after January 15, 2012, payable as an annuity. ***Salaried:*** 0.75% of Compensation earned after January 15, 2012, payable as an annuity
Early retirement	
• Eligibility	Attainment of age 55 and 10 years of Vesting Service.
• Benefit	The Future Service Component is reduced according to the actuarial equivalence definition in effect after January 15, 2012. The Past Service Benefits described above are reduced as follows: The Past Service Component earned after December 31, 1997 and prior to January 15, 2012 is reduced 5% for each year retirement precedes age 65. The Past Service Component earned prior to December 31, 1997 is reduced according to the prior early retirement reduction factors (6% from 60-65 and 3% from 55-60).
Termination benefits	
• Eligibility	3 years of Vesting Service
• Benefit	An amount equal to 100% of the sum of the Past and Future Service Benefits as of date of termination payable as an annuity only. The benefit payment date is deferred to the Normal Retirement Date. Participants with 10 years of Vesting Service at severance of employment may elect a reduced annuity commencing as early as age 55. The Past Service Component earned prior to January 15, 2012 and the Future Service Component are reduced for early retirement based on actuarial equivalent factors in effect at the time accruals were earned.
Deferred retirement benefits	
• Eligibility	Retirement after Normal Retirement Date.

Schedule SB, Part V — Summary of Plan Provisions

• Benefit	Normal Retirement Benefit based on service and pay at late retirement date.
Pre-retirement death benefits	
• Eligibility	3 years of Vesting Service.
• Benefit	If death occurs while the participant is an active employee, the beneficiary receives 50% of the participant's Past Service Components reduced for the 50% joint and survivor form, but not reduced for early retirement, payable beginning on the participant's earliest retirement date. Future Service Components earned after January 15, 2012 are reduced for the 50% joint and survivor form and for early retirement. If death occurs while the participant is no longer employed, 50% of the participant's accrued benefit, reduced for the 50% joint and survivor form, payable at the participant's normal retirement date or reduced according to the applicable early retirement factors if benefits begin prior to the participant's normal retirement date.
Disability benefits	
• Eligibility	3 years of Vesting Service.
• Benefit	An amount equal to 100% of the sum of the Past and Future Service Benefits as of the date of disability payable as an annuity only. The benefit payment date is deferred to the Normal Retirement Date. Participants with 10 years of Vesting Service at severance of employment may elect a reduced annuity commencing as early as age 55. The Past Service Component earned prior to January 15, 2012 and the Future Service Component are reduced for early retirement based on actuarial equivalent factors in effect at the time accruals were earned.
Form of benefits	
• Automatic form for unmarried participants	Life annuity.
• Automatic form for married participants	A reduced, Qualified 50% Joint and Survivor Annuity
• Optional forms	For benefits earned prior to January 15, 2012: Actuarially equivalent Qualified Joint and 50%, 75% or 100% Survivor Annuity. Lump-sum payments are available at early and normal retirement only. Benefits earned after January 15, 2012 are available as actuarially equivalent Life, Qualified Joint and 50%, 75% or 100% Survivor Annuity form only.
• Actuarial Equivalence for Optional form conversion factors and Early Retirement	Valuation assumptions for benefits accrued prior to January 15, 2012. The applicable first, second, and third segment rates under Code Section 417(e)(3)(C) for the month of September preceding the first day of the applicable plan year and mortality prescribed under Section 417(e)(3)(B) as in effect for the applicable plan year. 6% interest and RP2000 mortality projected to 2015 (healthy, 50% male / 50% female, no collar adjustment) for benefits accrued after January 15, 2012.

Schedule SB, Part V — Summary of Plan Provisions

Miscellaneous	
• Maximum compensation	Compensation for any 12-month period used to determine accrued benefits may not exceed the limits in IRC Section 401(a)(17) for the calendar year in which the 12-month period begins. This limit is indexed annually. For 2019, the limit is $280,000.
• Maximum benefits	Annual benefits may not exceed the limits in IRC Section 415. This limit is indexed annually. For 2019, the limit is $225,000.

Plan Provision Changes Since Prior Valuation

- Maximum compensation amounts and maximum benefit amounts under IRS rules were updated from 2018 to 2019.

- Late retirement increases are included in the valuation for current deferred vested participants over normal retirement age. Previously, no increases were valued as they were deemed immaterial.

Retirement Plan for Great Dane LLC
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2019

Schedule I

(a)	Identity of issue, borrower, lessor or similar party (b)	Description of investment including maturity date, rate of interest, collateral, par or maturity value (c)	Cost (d)	Current value (e)
	Investments			
	Common stocks			
	Arconic Mandatory Exchange	Common Stock	2,967,253	4,307,800
	Activision Blizzard, Inc.	Common Stock	700,958	686,301
	Alibaba Group Holding Limited	Common Stock	1,826,589	3,205,255
	Alphabet, Inc.	Common Stock	2,511,771	4,545,868
	Alphabet, Inc.	Common Stock	657,704	964,361
	American Airlines Group, Inc.	Common Stock	5,723,575	3,298,200
	American International Group, Inc.	Common Stock	3,224,952	4,065,336
	Apple Inc.	Common Stock	755,738	1,115,870
	Ashland Global Holdings, Inc.	Common Stock	782,915	865,937
	BlackRock, Inc.	Common Stock	581,471	615,807
	Blackstone Group Inc.	Common Stock	1,666,458	2,023,070
	Booking Holdings, Inc.	Common Stock	3,801,032	4,723,579
	Brookfield Asset Management, Inc.	Common Stock	973,776	1,317,089
	CBRE Group, Inc.	Common Stock	2,238,178	5,209,650
	CDW Corporation	Common Stock	279,587	628,496
	Charter Communications, Inc.	Common Stock	2,193,711	4,608,260
	Citigroup Inc.	Common Stock	3,831,939	5,192,850
	CME Group Inc.	Common Stock	302,797	459,649
	Core Laboratories	Common Stock	4,897,827	2,372,833
	Corelogic Inc.	Common Stock	4,329,865	4,152,450
	Costco Wholesale Corporation	Common Stock	259,892	462,924
	CVS Health Corporation	Common Stock	4,244,459	4,895,711
	Danaher Corporation	Common Stock	1,857,973	3,458,825
	Delta Air Lines, Inc.	Common Stock	518,655	573,104
	Dentsply Sirona, Inc.	Common Stock	4,558,712	6,164,179
	Equifax Inc.	Common Stock	676,591	774,163
	Equinix, Inc.	Common Stock	591,347	875,550
	Expedia Group Inc.	Common Stock	849,574	692,096
	Facebook, Inc.	Common Stock	641,489	764,556
	Fortive Corporation	Common Stock	1,984,560	2,321,874
	Gates Industrial Corporation plc	Common Stock	600,426	512,904
	General Motors Company	Common Stock	3,923,284	4,758,000
	Gilead Sciences, Inc.	Common Stock	603,300	565,651
	HCA Healthcare, Inc.	Common Stock	2,400,745	4,803,825
	HD Supply Holdings, Inc.	Common Stock	721,548	833,559
	Henry Schein, Inc.	Common Stock	7,275,114	8,502,997
	Humana Inc.	Common Stock	4,273,998	5,681,060
	IHS Markit Limited	Common Stock	406,288	828,850
	Illumina Inc..	Common Stock	1,018,789	1,038,678

Information included in this schedule is certified as complete and accurate by The Northern Trust Company; except for third party information related to the Silchester International Value Equity Group Trust.

Retirement Plan for Great Dane LLC
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2019

Schedule I

(a)	Identity of issue, borrower, lessor or similar party (b)	Description of investment including maturity date, rate of interest, collateral, par or maturity value (c)	Cost (d)	Current value (e)
	Common stocks - continued			
	Interactive Brokers Group, Inc.	Common Stock	3,145,694	2,986,011
	Johnson Controls International plc	Common Stock	3,269,518	3,663,900
	J P Morgan Chase and Company	Common Stock	384,459	578,510
	Kuehne & Nagel International AG	Common Stock	1,895,620	2,304,198
	Lear Corporation	Common Stock	5,365,526	4,802,000
	Lowes Companies, Inc.	Common Stock	904,751	976,044
	McDonald's Corporation	Common Stock	701,753	879,364
	Medtronic PLC	Common Stock	495,984	646,665
	MGM Resorts International	Common Stock	491,929	572,244
	Microcsoft Corporation	Common Stock	636,891	883,120
	Mondelez International	Common Stock	479,336	490,212
	Moody's Corporation	Common Stock	2,235,076	4,748,200
	National Oilwell Varco, Inc.	Common Stock	4,308,396	3,507,000
	NextEra Energy, Inc.	Common Stock	624,832	1,126,044
	Nike Inc.	Common Stock	662,169	790,218
	Nortel Networks Corporation	Common Stock	36	-
	Patterson Companies Inc.	Common Stock	2,192,794	2,058,569
	Regeneron Pharmaceuticals, Inc.	Common Stock	4,045,661	4,881,240
	Repay Holdings Corporation.	Common Stock	632,048	718,626
	S&P Global Inc.	Common Stock	412,408	600,710
	SeaWorld Entertainment, Inc.	Common Stock	468,393	795,921
	Servicenow Inc.	Common Stock	474,631	522,292
	Spotify Technology S.A.	Common Stock	478,089	459,866
	Thermo Fisher Corporation	Common Stock	2,352,384	4,847,060
	Tradeweb Markets Inc.	Common Stock	469,408	519,120
	Trinity Industries Inc.	Common Stock	3,987,344	4,208,500
	Ulta Beauty Inc.	Common Stock	1,666,120	1,776,790
	Union Pacific Corporation	Common Stock	547,840	596,607
	United Health Group Inc.	Common Stock	439,716	587,960
	Univar, Inc.	Common Stock	1,103,824	990,810
	Versik Analytics, Inc.	Common Stock	193,795	365,883
	Visa Inc.	Common Stock	597,979	930,105
	Wabtec Corporation	Common Stock	4,153,884	4,279,000
	Waters Corporation	Common Stock	1,132,584	1,279,234
	WEX, Inc.	Common Stock	299,443	504,799
		Total common stocks	132,905,155	162,743,989

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Retirement Plan for Great Dane LLC
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2019

Schedule I

(a)	Identity of issue, borrower, lessor or similar party (b)	Description of investment including maturity date, rate of interest, collateral, par or maturity value (c)	Cost (d)	Current value (e)
	Limited Partnership			
	Brookfield Infrastructure Partners, L.P.	Limited Partnership	395,734	604,879
		Total limited partnership	395,734	604,879
	Preferred stocks			
	Sempra Energy	Preferred Stock	472,214	553,676
		Total preferred stocks	472,214	553,676
	Common and collective trusts			
*	Northern Trust STIF	Common and Collective Trust	10,643,430	10,643,430
	Silchester Int'l Value Equity Grp Trust	Common and Collective Trust	18,779,500	45,683,639
		Total common and collective trusts	29,422,930	56,327,069
	Corporate bonds			
	APX Group, Inc.	Corporate Bond	266,585	262,000
	MagnaChip Semiconductor Corporation	Corporate Bond	496,648	467,210
	Rockpoint Gas Storage Canada, Ltd.	Corporate Bond	389,472	393,000
		Total corporate bonds	1,152,705	1,122,210
	Cash collateral receivable			
	Morgan Stanley	Cash Collateral Receivable	2	2
		Total investments	$ 164,348,740	$ 221,351,825

Information included in this schedule is certified as complete and accurate by The Northern Trust Company; except for third party information related to the Silchester International Value Equity Group Trust.

Retirement Plan for Great Dane LLC
Schedule H, Line 4j - Schedule of Reportable Transactions
Year Ended December 31, 2019

Schedule II

(a)	Identity of party involved/description of investment (b)	Transaction Aggregate: Number of transactions	Purchase price (c)	Selling price (d)	Cost of asset (g)	Current value of asset on transaction date (h)	Net gain/ (loss) (i)
	Series of Transactions in excess of 5%						
*	Northern Trust STIF	323	$ 120,059,569	$ -	$ 120,059,569	$ 120,059,569	$ -
*	Northern Trust STIF	136	-	124,688,588	124,688,588	124,688,588	-
*	Northern Trust STIF	1	27,000,000	-	27,000,000	27,000,000	-
*	Northern Trust STIF	1	29,965,908	-	29,965,908	29,965,908	-
*	Northern Trust STIF	1	-	17,000,000	17,000,000	17,000,000	-
*	Northern Trust STIF	1	-	25,144,930	25,144,930	25,144,930	-
*	Northern Trust STIF	1	-	13,993,400	13,993,400	13,993,400	-
*	Northern Trust STIF	1	-	25,273,676	25,273,676	25,273,676	-

* Represents a party-in-interest to the Plan.

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