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

2020

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

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
THE DURANT AUTO GROUP 401(K) PLAN

1b Three-digit plan number (PN) ▶ 002

1c Effective date of plan 01/01/1978

2a Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)
CLASSIC CHEVROLET BUICK GMC, INC.

1101 W HIGHWAY 114
GRAPEVINE, TX 76051

2b Employer Identification Number (EIN) 75-1159462

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

2d Business code (see instructions) 441110

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2021	MARK ESCAMILLA
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address [X] Same as Plan Sponsor

3b Administrator's EIN

3c Administrator's telephone number

4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:
a Sponsor's name
c Plan Name

4b EIN

4d PN

5 Total number of participants at the beginning of the plan year	**5**	3018
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)**	2535
a(2) Total number of active participants at the end of the plan year	**6a(2)**	2559
b Retired or separated participants receiving benefits	**6b**	1
c Other retired or separated participants entitled to future benefits	**6c**	533
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	3093
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	3
f Total. Add lines **6d** and **6e**	**6f**	3096
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	2455
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	341
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:

2E 2F 2G 2J 2K 2S 2T 3D 2R

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

(1)	[X]		**H** (Financial Information)
(2)	[ ]		**I** (Financial Information – Small Plan)
(3)	[ ]	0	**A** (Insurance Information)
(4)	[X]		**C** (Service Provider Information)
(5)	[ ]		**D** (DFE/Participating Plan Information)
(6)	[ ]		**G** (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2020 Form M-1 annual report. If the plan was not required to file the 2020 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2020** **This Form is Open to Public Inspection.**

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

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

B Three-digit plan number (PN) ▶ 002

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

D Employer Identification Number (EIN)
75-1159462

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

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

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

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

MILBERN RAY AND COMPANY

75-1793612

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	ACCOUNTANT/AUDITOR	84355	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

WIMMER CONSULTING LLC

26-0637928

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26	INVESTMENT ADVISOR	46685	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

STRATEGIC ADVISORS, INC.

04-2654524

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	ADVISOR	16030	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)

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
60 64 65 71	RECORDKEEPER	5037	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

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

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

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

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AM CENT OC IN RTM IV - AMERICAN CE 44-0619208	0.35%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AM CENT OC 2025 INV - AMERICAN CEN 44-0619208	0.35%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AM CENT OC 2030 INV - AMERICAN CEN 44-0619208	0.35%

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AM CENT OC 2035 INV - AMERICAN CEN 44-0619208	0.35%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AM CENT OC 2040 INV - AMERICAN CEN 44-0619208	0.35%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AM CENT OC 2045 INV - AMERICAN CEN 44-0619208	0.35%

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AM CENT OC 2050 INV - AMERICAN CEN 44-0619208	0.35%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AM CENT OC 2055 INV - AMERICAN CEN 44-0619208	0.35%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
INVS DIVRS DIVD R5 - INVESCO INVES 11 GREENWAY PLAZA, SUITE 100 HOUSTON, TX 77046	0.35%

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
INVS HIGH YLD R5 - INVESCO CANADA 5140 YONGE STREET, SUITE 900 TORONTO, ON M2N 6 CA	0.35%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
INVS INTL GROWTH R5 - INVESCO CANA 5140 YONGE STREET, SUITE 900 TORONTO, ON M2N 6 CA	0.35%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
J H TRITON T - JANUS SERVICES LLC 43-1804048	0.35%

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
METWEST TOT RTN BD M - BNY MELLON	P.O. BOX 9793 PROVIDENCE, RI 02940	0.35%

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

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
NB MDCP GRTH TRUST - DST ASSET MAN	430 W 7TH STREET STE 219432 KANSAS CITY, MO 64105	0.40%

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

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PIM STKPLUS SM A - DST ASSET MANAG	430 W 7TH STREET STE 219432 KANSAS CITY, MO 64105	0.45%

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
VRTS C MDCP VAL EQ I - VIRTUS FUND	4400 COMPUTER DRIVE WESTBOROUGH, MA 01581-1722	0.40%

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

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
WF EMRG MKTS EQ IS - DST ASSET MAN	430 W 7TH STREET STE 219432 KANSAS CITY, MO 64105	0.15%

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

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
DWS ENHANCED COMMODITY STRATEGY A	280 PARK AVE FINANCE PCAM CTRL 9T NEW YORK, NY 10026	0.40%

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ALPS CORECOMM MGMT COMP COMM STRT 1290 BROADWAY SUITE 1100 DENVER, CO 80203	0.40%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
VIRTUS CEREDEX MID CAP VALUE EQUIT 101 MUNSON ST. STE. 3 GREENFIELD, MA 01301	0.40%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE H (Form 5500)

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

2020

This Form is Open to Public Inspection

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

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

B Three-digit plan number (PN) ▶ 002

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

D Employer Identification Number (EIN)
75-1159462

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	51	5000
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	2917300	2256829
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	159738	1138401
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	0	0
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	50489962	51165640
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	0	0
(15) Other	1c(15)	0	0

			(a) Beginning of Year	**(b)** End of Year
1d	Employer-related investments:			
	(1) Employer securities	**1d(1)**	0	0
	(2) Employer real property	**1d(2)**	0	0
e	Buildings and other property used in plan operation	**1e**	0	0
f	Total assets (add all amounts in lines 1a through 1e)	**1f**	53567051	54565870
	Liabilities			
g	Benefit claims payable	**1g**	0	0
h	Operating payables	**1h**	0	0
i	Acquisition indebtedness	**1i**	0	0
j	Other liabilities	**1j**	0	0
k	Total liabilities (add all amounts in lines 1g through1j)	**1k**	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	**1l**	53567051	54565870

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)**	1631260	
	(B) Participants	**2a(1)(B)**	5586332	
	(C) Others (including rollovers)	**2a(1)(C)**	188279	
	(2) Noncash contributions	**2a(2)**	0	
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	**2a(3)**		7405871
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	**2b(1)(A)**	9027	
	(B) U.S. Government securities	**2b(1)(B)**	0	
	(C) Corporate debt instruments	**2b(1)(C)**	0	
	(D) Loans (other than to participants)	**2b(1)(D)**	0	
	(E) Participant loans	**2b(1)(E)**	0	
	(F) Other	**2b(1)(F)**	0	
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	**2b(1)(G)**		9027
	(2) Dividends: **(A)** Preferred stock	**2b(2)(A)**	0	
	(B) Common stock	**2b(2)(B)**	4977	
	(C) Registered investment company shares (e.g. mutual funds)	**2b(2)(C)**	2792556	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	**2b(2)(D)**		2797533
	(3) Rents	**2b(3)**		0
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	**2b(4)(A)**	5417629	
	(B) Aggregate carrying amount (see instructions)	**2b(4)(B)**	5287714	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	**2b(4)(C)**		129915
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	**2b(5)(A)**	0	
	(B) Other	**2b(5)(B)**	135555	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	**2b(5)(C)**		135555

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	**2b(6)**		0
(7) Net investment gain (loss) from pooled separate accounts	**2b(7)**		0
(8) Net investment gain (loss) from master trust investment accounts	**2b(8)**		0
(9) Net investment gain (loss) from 103-12 investment entities	**2b(9)**		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	**2b(10)**		3332621
c Other income	**2c**		0
d Total income. Add all **income** amounts in column (b) and enter total	**2d**		13810522
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	**2e(1)**	12580124	
(2) To insurance carriers for the provision of benefits	**2e(2)**	0	
(3) Other	**2e(3)**	0	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	**2e(4)**		12580124
f Corrective distributions (see instructions)	**2f**		79622
g Certain deemed distributions of participant loans (see instructions)	**2g**		0
h Interest expense	**2h**		0
i Administrative expenses: **(1)** Professional fees	**2i(1)**	0	
(2) Contract administrator fees	**2i(2)**	0	
(3) Investment advisory and management fees	**2i(3)**	16030	
(4) Other	**2i(4)**	135927	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	**2i(5)**		151957
j Total expenses. Add all **expense** amounts in column (b) and enter total	**2j**		12811703
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	**2k**		998819
l Transfers of assets:			
(1) To this plan	**2l(1)**		0
(2) From this plan	**2l(2)**		0

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)** [X] Disclaimer **(4)** [ ] Adverse

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

(1) [X] DOL Regulation 2520.103-8 **(2)** [ ] DOL Regulation 2520.103-12(d) **(3)** [ ] neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

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

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

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

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**4a**	X		310159

			Yes	No	Amount
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	
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e	Was this plan covered by a fidelity bond?	**4e**	X		500000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l	Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	**4n**		X	

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ Yes ☒ No

If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

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

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

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

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

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

2020

This Form is Open to Public Inspection.

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

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

B Three-digit plan number (PN) ▶ 002

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

D Employer Identification Number (EIN)
75-1159462

Part I Distributions

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

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

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

EIN(s): 04-6568107

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment)	**14a**	
b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14b**	
c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14c**	

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

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

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

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

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

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

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

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

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

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

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

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_____

DURANT AUTO GROUP 401(K) PLAN

FINANCIAL STATEMENTS

DECEMBER 31, 2020 AND 2019

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

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

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MEMBER:
AMERICAN INSTITUTE
OF CERTIFIED PUBLIC
ACCOUNTANTS

INDEPENDENT AUDITOR'S REPORT

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

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Durant Auto Group 401(k) Plan, which comprise the statements of net assets available for benefits – modified cash basis as of December 31, 2020 and 2019, and the related modified cash basis statement of changes in net assets available for benefits for the year ended December 31, 2020, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with the modified cash basis of accounting; this includes determining that the modified cash basis of accounting is an acceptable basis for the preparation of the financial statements in the circumstances. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4, which was certified by Fidelity Management Trust Company, the custodian of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan administrator that the custodian holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained certifications from the custodian as of December 31, 2020 and 2019, and for the year ended December 31, 2020, that the information provided to the Plan administrator by the custodian is complete and accurate.

CPA™

Disclaimer of Opinion

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

Basis of Accounting

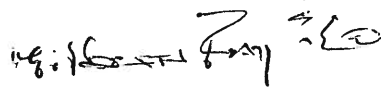
We draw attention to Note 2 to the financial statements, which describes the basis of accounting. The financial statements are prepared on the modified cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our opinion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

Report on Supplementary Information

The supplemental schedules of delinquent participant contributions and assets (held at end of year) as of December 31, 2020 are required by the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on these supplemental schedules.

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

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



October 7, 2021

Grapevine, Texas

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

DURANT AUTO GROUP 401(K) PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS - MODIFIED CASH BASIS

DECEMBER 31, 2020 AND 2019

	2020	2019
ASSETS		
Non interest-bearing cash	$ -	$ -
Investments:		
Mutual funds	50,847,799	50,434,101
Interest-bearing cash	2,019,566	2,611,463
Self-directed brokerage	1,698,505	521,487
At fair value	54,565,870	53,567,051
Total assets	54,565,870	53,567,051
NET ASSETS AVAILABLE FOR BENEFITS	$ 54,565,870	$ 53,567,051

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

DURANT AUTO GROUP 401(K) PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS - MODIFIED CASH BASIS

YEAR ENDED DECEMBER 31, 2020

INVESTMENT AND CONTRIBUTION ACTIVITY		
Additions to net assets attributed to:		
Investment activity:		
Net appreciation in investments carried at fair value	$	3,598,091
Interest and dividends		2,806,560
		6,404,651
Contributions:		
Participants' deferrals		5,586,332
Participants' rollovers		188,279
Employers' matching		1,631,260
		7,405,871
TOTAL INVESTMENT AND CONTRIBUTION ACTIVITY		13,810,522
DEDUCTIONS		
Deductions from net assets attributed to:		
Administrative expenses		151,957
Benefits paid to participants		12,659,746
TOTAL DEDUCTIONS		12,811,703
NET INCREASE		998,819
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year		53,567,051
END OF YEAR	$	54,565,870

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

Note 1 DESCRIPTION OF PLAN

The following description of the Durant Auto Group 401(k) Plan (Plan) provides only general information. Participants should refer to the plan document for a more complete description of the Plan's provisions. The Plan is a defined contribution plan for the benefit of the employees of Classic Chevrolet, Inc. (GPVN), Classic CRCJ of Arlington (ARCJ), Classic Buick GMC, Ltd. (ARLG), Stingray Chevrolet – Bartow, LLC (BART), Classic Autoplex / Nissan of Boerne (BRNE), Classic Kia of Carrollton (CKIA), Classic Chevrolet Buick GMC of Cleburne (CLEB), Classic Buick GMC of Carrollton, LLC (CRLT), Classic Chrysler Jeep Dodge & Mazda (DENT), Classic Autoplex GM, LLC (GALV), Classic Chevrolet Buick GMC, Inc. (GRBY), Classic Chevrolet Houston (HOUS), Classic Lawton Chevrolet (LAWT), Mike Brown Ford, Dodge & Hyundai (MBRN), Classic Honda of Midland (MIDL), Stingray Chevrolet, LLC (PLNT), Classic Chevrolet Sugarland, LLC (SGRL), Classic Chevrolet West Houston, LLC (SGRW), Smart Auto Leasing, LLC (SMAL), Classic Tulsa Buick GMC, dba Mark Allen Buick GMC (TULB), Classic Tulsa, d/b/a Mark Allen Chevrolet (TULS), Classic CC Denison LLC (TXCC), and Classic Texoma (TXOM). These entities (collectively, the Company) are under common ownership and control. During 2020, GRBY and CRLT were sold to third parties. After the sale, employees of those dealerships became unable to contribute to the Plan, although they are eligible to withdraw their balances.

The Plan qualifies as a profit-sharing plan under Internal Revenue Code (Code) Section 401(a) and as a cash-or-deferred arrangement under Code Section 401(k).

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

Employee contributions

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

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

Employer contributions

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

Participant accounts

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

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

Vesting

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

Administrative expenses

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

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

Payment of benefits

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

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

The Plan permits in-service withdrawals: (1) for CARES Act distributions, as noted below, (2) of rollover contributions, at the participant's request, (3) for employees over the age of 59 ½, and (4) for certain hardship situations, as defined.

During 2020, the Plan implemented the distribution provision of the Coronavirus Aid, Relief, and Economic Security ("CARES") Act that was signed into law on March 27, 2020. A CARES Act distribution allows the Plan's participants to take a COVID-19 related distribution up to $100,000 from the Plan during 2020. Written amendments to the Plan to reflect these operational changes will be adopted at a later date in accordance with applicable law and IRS guidance.

Other plan provisions

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

Note 2 **SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

Subsequent events

The Plan has evaluated subsequent events through October 7, 2021, the date which the financial statements were available to be issued.

Subsequent to December 31, 2021, the MBRN and DENT locations were sold. MBRN and DENT participants were terminated, and became fully vested and eligible for distributions.

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

Basis of accounting

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

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

Investment valuation and income recognition

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

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

Excess contributions

Amounts payable to participants for contributions in excess of amounts allowed by the IRS are recorded as distributions when paid. These amounts were not material at December 31, 2020 and 2019.

Payment of benefits

Benefits are recorded when paid.

Expenses

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

Note 3 **TAX STATUS**

The Plan has adopted a Volume Submitter Plan (the Volume Submitter Plan) of Fidelity Management & Research Company (FMR). FMR obtained an advisory letter in regard to the Volume Submitter Plan dated June 30, 2020, in which the Internal Revenue Service stated that the Volume Submitter Plan, as then designed, was in compliance with the applicable requirements of the Code. The Plan has been amended since receiving the advisory letter. However, the Plan administrator believes that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the Code and, therefore, believes that the Plan is qualified, and the related trust is tax-exempt. Therefore, no provision for income taxes has been included in the Plan's financial statements.

The modified cash basis of accounting requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that is more likely than not would not be sustained upon examination by the U.S. Internal Revenue Service. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes the Plan is no longer subject to income tax examinations for years prior to 2017.

Note 4 **PLAN TERMINATION**

Although it has not expressed any intent to do so, the Plan's sponsor has the right to discontinue contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of a full or partial termination, affected participants would be fully vested in their accounts.

Note 5 **INFORMATION PREPARED AND CERTIFIED BY FMTC**

Fidelity Workplace Services, LLC (FWS) is a wholly-owned subsidiary of FMR, LLC (Fidelity). Fidelity Management Trust Company (FMTC) is (indirectly) a wholly-owned subsidiary of Fidelity. The December 31, 2020 and 2019 statements of net assets available for benefits – modified cash basis, the investment activities included on the modified cash basis statement of changes in net assets available for benefits for the year ended December 31, 2020, and the accompanying notes to the financial statements were prepared in part or entirely from information certified by FMTC in accordance with 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The information certified includes total investments of $54,565,870 and $53,567,051 at December 31, 2020 and 2019, respectively, and related investment earnings of $6,109,839 for the year ended December 31, 2020.

Note 5 **INFORMATION PREPARED AND CERTIFIED BY FMTC** – (continued)

These accounts are maintained by Fidelity, a party-in-interest. See note 6.

Note 6 **FAIR VALUE MEASUREMENTS**

The fair value measurement accounting literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets or liabilities and have the highest priority. Level 2 inputs consist of observable inputs other than quoted market prices for identical assets or liabilities (Level 1). Level 3 inputs are unobservable and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 2 inputs are used for investments for which Level 1 inputs were not available. Level 3 inputs would only be used if Level 1 or Level 2 inputs were not available. There were no Level 2 or Level 3 transactions at December 31, 2020 or 2019.

Level 1

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

The following table sets forth by level, within the fair value hierarchy, the plan's assets at fair value as of December 31, 2020 and 2019.

	Assets at Fair Value as of December 31, 2020			
	Level 1	Level 2	Level 3	Total
Mutual funds	$ 50,847,799	$ -	$ -	$ 50,847,799
Interest-bearing cash	2,019,566	-	-	2,019,566
Self-directed brokerage	1,698,505	-	-	1,698,505
Total	$ 54,565,870	$ -	$ -	$ 54,565,870

Note 6 **FAIR VALUE MEASUREMENTS** – (continued)

	Assets at Fair Value as of December 31, 2019			
	Level 1	Level 2	Level 3	Total
Mutual funds	$ 50,434,101	$ -	$ -	$ 50,434,101
Interest-bearing cash	2,611,463	-	-	2,611,463
Self-directed brokerage	521,487	-	-	521,487
Total	$ 53,567,051	$ -	$ -	$ 53,567,051

Gains and losses included in changes in net assets available for benefit for the years ended December 31, 2020 and 2019, are reported in net appreciation in fair value of investments.

The Plan's policy is to recognize transfers from levels of the fair value hierarchy as of the date of the event or changes in circumstances that caused the transfer. For the year ended December 31, 2020, there were no significant transfers between different levels of the fair value hierarchy.

Note 7 **PARTY-IN-INTEREST TRANSACTIONS**

Most of the Plan's investments are shares of mutual funds managed by FMTC, the custodian of the Plan.

Employee deferrals for forty nine pay periods (totaling approximately $107,003) were not remitted to the Plan on a timely basis. These are nonexempt party-in-interest transactions under ERISA.

Note 8 **RISKS AND UNCERTAINTIES**

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

Note 9 **REPORTABLE TRANSACTIONS**

There were no reportable transactions in 2020.

SUPPLEMENTAL SCHEDULES

DURANT AUTO GROUP 401(K) PLAN

EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2020

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
Check here ☐ If Late Participant Loan Repayments are Included	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
$ 27	$ -	$ -	$ -	$ 27
21	-	-	21	-
18	-	-	18	-
4	-	-	4	-
41	-	-	41	-
39	-	-	39	-
105	-	-	105	-
38	-	-	38	-
46	-	-	46	-
64	-	-	64	-
72	-	-	72	-
69	-	-	69	-
620	-	-	-	620
480	-	-	-	480
514	-	-	-	514
416	-	-	-	416
486	-	-	-	486
456	-	-	-	456
365	-	-	-	365
272	-	-	-	272
322	-	-	-	322
12	-	-	-	12
363	-	-	-	363

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2020

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

(continued)

$ 427	$ -	$ -	$ -	$ 427
383	-	-	-	383
307	-	-	-	307
1,835	-	-	-	1,835
1,275	-	-	-	1,275
415	-	-	-	415
306	-	-	-	306
581	-	-	-	581
360	-	-	-	360
1,877	-	-	-	1,877
1,341	-	-	-	1,341
1,095	-	-	-	1,095
1,028	-	-	-	1,028
305	-	-	-	305
113	-	-	-	113
301	-	-	-	301
2,491	-	-	-	2,491
20,138	-	-	-	20,138
37,872	-	-	-	37,872
2,178	-	-	-	2,178
5,883	-	-	-	5,883
6,645	-	-	-	6,645

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2020

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

(continued)

$ 14,864	$ -	$ -	$ -	$	14,864
25	-	-	-		25
88	-	-	-		88
20	-	-	-		20
$ 107,003	$ -	$ -	$ 517	$	106,486

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2020

(a) (b) Identity of issue, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(e) Current Value
Investments at fair value:		
* Fidelity Contrafund	Mutual fund	$ 2,196,033
* Fidelity Small Cap Value Fund	Mutual fund	467,821
* Fidelity US Bond Index	Mutual fund	366,754
* Fidelity 500 Index	Mutual fund	3,038,444
* Fidelity Real Estate Index	Mutual fund	235,791
* Fidelity Intl Index	Mutual fund	276,598
* Fidelity Extd Mkt Index	Mutual fund	692,783
* Fidelity Government Money Market	Interest-bearing cash	2,019,566
* Fidelity Intm TR BD Index	Mutual fund	386,178
* Wells Fargo Advantage Emerging Markets	Mutual fund	471,758
* Neuberger Berman Mid Cap Growth Trust	Mutual fund	556,569
* Metropolitan West Total Return Bond Fund	Mutual fund	421,850
* Invesco High Yield Fund R5	Mutual fund	218,375
* Invesco Diversified Dividend Fund R5	Mutual fund	604,330
* VRTS C Mid-Cap Value Equity	Mutual fund	469,275
* Invesco International Growth R5	Mutual fund	521,834
* American Century One Choice 2025 Inv.	Mutual fund	7,566,773
* American Century One Choice 2035 Inv.	Mutual fund	4,576,782
* American Century One Choice 2045 Inv.	Mutual fund	3,803,682
* American Century One Choice in Retirement	Mutual fund	5,945,070
* Janus Triton Fund	Mutual fund	1,089,943
* PIMCO Small Cap StocksPLUS	Mutual fund	349,875
* American Century One Choice 2030 Inv.	Mutual fund	6,974,124
* American Century One Choice 2040 Inv.	Mutual fund	4,176,440
* American Century One Choice 2050 Inv.	Mutual fund	2,229,311
* American Century One Choice 2055 Inv.	Mutual fund	3,211,406
Self-directed brokerage	Various	1,698,505
TOTAL ASSETS (HELD AT END OF YEAR)		$ 54,565,870

* Party-in-interest
Cost is omitted on all accounts above as all are participant directed accounts

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN

FINANCIAL STATEMENTS

DECEMBER 31, 2020 AND 2019

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FINANCIAL STATEMENTS

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Statement of Changes in Net Assets Available for Benefits – Modified Cash Basis 6
Notes to Financial Statements 7

SUPPLEMENTAL SCHEDULES

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Schedule of Assets (Held at End of Year) 18

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

MILBERN D. RAY, C.P.A., 1933-2006
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MEMBER:
AMERICAN INSTITUTE
OF CERTIFIED PUBLIC
ACCOUNTANTS

INDEPENDENT AUDITOR'S REPORT

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

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Durant Auto Group 401(k) Plan, which comprise the statements of net assets available for benefits – modified cash basis as of December 31, 2020 and 2019, and the related modified cash basis statement of changes in net assets available for benefits for the year ended December 31, 2020, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with the modified cash basis of accounting; this includes determining that the modified cash basis of accounting is an acceptable basis for the preparation of the financial statements in the circumstances. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4, which was certified by Fidelity Management Trust Company, the custodian of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan administrator that the custodian holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained certifications from the custodian as of December 31, 2020 and 2019, and for the year ended December 31, 2020, that the information provided to the Plan administrator by the custodian is complete and accurate.

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Disclaimer of Opinion

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

Basis of Accounting

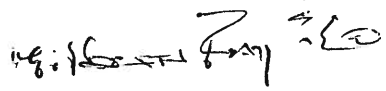
We draw attention to Note 2 to the financial statements, which describes the basis of accounting. The financial statements are prepared on the modified cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our opinion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

Report on Supplementary Information

The supplemental schedules of delinquent participant contributions and assets (held at end of year) as of December 31, 2020 are required by the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on these supplemental schedules.

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

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



October 7, 2021

Grapevine, Texas

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

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Total assets	54,565,870	53,567,051
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DURANT AUTO GROUP 401(K) PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS - MODIFIED CASH BASIS

YEAR ENDED DECEMBER 31, 2020

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TOTAL DEDUCTIONS		12,811,703
NET INCREASE		998,819
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year		53,567,051
END OF YEAR	$	54,565,870

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

Note 1 DESCRIPTION OF PLAN

The following description of the Durant Auto Group 401(k) Plan (Plan) provides only general information. Participants should refer to the plan document for a more complete description of the Plan's provisions. The Plan is a defined contribution plan for the benefit of the employees of Classic Chevrolet, Inc. (GPVN), Classic CRCJ of Arlington (ARCJ), Classic Buick GMC, Ltd. (ARLG), Stingray Chevrolet – Bartow, LLC (BART), Classic Autoplex / Nissan of Boerne (BRNE), Classic Kia of Carrollton (CKIA), Classic Chevrolet Buick GMC of Cleburne (CLEB), Classic Buick GMC of Carrollton, LLC (CRLT), Classic Chrysler Jeep Dodge & Mazda (DENT), Classic Autoplex GM, LLC (GALV), Classic Chevrolet Buick GMC, Inc. (GRBY), Classic Chevrolet Houston (HOUS), Classic Lawton Chevrolet (LAWT), Mike Brown Ford, Dodge & Hyundai (MBRN), Classic Honda of Midland (MIDL), Stingray Chevrolet, LLC (PLNT), Classic Chevrolet Sugarland, LLC (SGRL), Classic Chevrolet West Houston, LLC (SGRW), Smart Auto Leasing, LLC (SMAL), Classic Tulsa Buick GMC, dba Mark Allen Buick GMC (TULB), Classic Tulsa, d/b/a Mark Allen Chevrolet (TULS), Classic CC Denison LLC (TXCC), and Classic Texoma (TXOM). These entities (collectively, the Company) are under common ownership and control. During 2020, GRBY and CRLT were sold to third parties. After the sale, employees of those dealerships became unable to contribute to the Plan, although they are eligible to withdraw their balances.

The Plan qualifies as a profit-sharing plan under Internal Revenue Code (Code) Section 401(a) and as a cash-or-deferred arrangement under Code Section 401(k).

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

Employee contributions

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

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

Employer contributions

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

Participant accounts

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

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

Vesting

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

Administrative expenses

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

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

Payment of benefits

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

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

The Plan permits in-service withdrawals: (1) for CARES Act distributions, as noted below, (2) of rollover contributions, at the participant's request, (3) for employees over the age of 59 ½, and (4) for certain hardship situations, as defined.

During 2020, the Plan implemented the distribution provision of the Coronavirus Aid, Relief, and Economic Security ("CARES") Act that was signed into law on March 27, 2020. A CARES Act distribution allows the Plan's participants to take a COVID-19 related distribution up to $100,000 from the Plan during 2020. Written amendments to the Plan to reflect these operational changes will be adopted at a later date in accordance with applicable law and IRS guidance.

Other plan provisions

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

Note 2 **SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

Subsequent events

The Plan has evaluated subsequent events through October 7, 2021, the date which the financial statements were available to be issued.

Subsequent to December 31, 2021, the MBRN and DENT locations were sold. MBRN and DENT participants were terminated, and became fully vested and eligible for distributions.

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

Basis of accounting

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

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

Investment valuation and income recognition

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

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

Excess contributions

Amounts payable to participants for contributions in excess of amounts allowed by the IRS are recorded as distributions when paid. These amounts were not material at December 31, 2020 and 2019.

Payment of benefits

Benefits are recorded when paid.

Expenses

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

Note 3 **TAX STATUS**

The Plan has adopted a Volume Submitter Plan (the Volume Submitter Plan) of Fidelity Management & Research Company (FMR). FMR obtained an advisory letter in regard to the Volume Submitter Plan dated June 30, 2020, in which the Internal Revenue Service stated that the Volume Submitter Plan, as then designed, was in compliance with the applicable requirements of the Code. The Plan has been amended since receiving the advisory letter. However, the Plan administrator believes that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the Code and, therefore, believes that the Plan is qualified, and the related trust is tax-exempt. Therefore, no provision for income taxes has been included in the Plan's financial statements.

The modified cash basis of accounting requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that is more likely than not would not be sustained upon examination by the U.S. Internal Revenue Service. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes the Plan is no longer subject to income tax examinations for years prior to 2017.

Note 4 **PLAN TERMINATION**

Although it has not expressed any intent to do so, the Plan's sponsor has the right to discontinue contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of a full or partial termination, affected participants would be fully vested in their accounts.

Note 5 **INFORMATION PREPARED AND CERTIFIED BY FMTC**

Fidelity Workplace Services, LLC (FWS) is a wholly-owned subsidiary of FMR, LLC (Fidelity). Fidelity Management Trust Company (FMTC) is (indirectly) a wholly-owned subsidiary of Fidelity. The December 31, 2020 and 2019 statements of net assets available for benefits – modified cash basis, the investment activities included on the modified cash basis statement of changes in net assets available for benefits for the year ended December 31, 2020, and the accompanying notes to the financial statements were prepared in part or entirely from information certified by FMTC in accordance with 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The information certified includes total investments of $54,565,870 and $53,567,051 at December 31, 2020 and 2019, respectively, and related investment earnings of $6,109,839 for the year ended December 31, 2020.

Note 5 **INFORMATION PREPARED AND CERTIFIED BY FMTC** – (continued)

These accounts are maintained by Fidelity, a party-in-interest. See note 6.

Note 6 **FAIR VALUE MEASUREMENTS**

The fair value measurement accounting literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets or liabilities and have the highest priority. Level 2 inputs consist of observable inputs other than quoted market prices for identical assets or liabilities (Level 1). Level 3 inputs are unobservable and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 2 inputs are used for investments for which Level 1 inputs were not available. Level 3 inputs would only be used if Level 1 or Level 2 inputs were not available. There were no Level 2 or Level 3 transactions at December 31, 2020 or 2019.

Level 1

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

The following table sets forth by level, within the fair value hierarchy, the plan's assets at fair value as of December 31, 2020 and 2019.

	Assets at Fair Value as of December 31, 2020			
	Level 1	Level 2	Level 3	Total
Mutual funds	$ 50,847,799	$ -	$ -	$ 50,847,799
Interest-bearing cash	2,019,566	-	-	2,019,566
Self-directed brokerage	1,698,505	-	-	1,698,505
Total	$ 54,565,870	$ -	$ -	$ 54,565,870

Note 6 **FAIR VALUE MEASUREMENTS** – (continued)

	Assets at Fair Value as of December 31, 2019			
	Level 1	Level 2	Level 3	Total
Mutual funds	$ 50,434,101	$ -	$ -	$ 50,434,101
Interest-bearing cash	2,611,463	-	-	2,611,463
Self-directed brokerage	521,487	-	-	521,487
Total	$ 53,567,051	$ -	$ -	$ 53,567,051

Gains and losses included in changes in net assets available for benefit for the years ended December 31, 2020 and 2019, are reported in net appreciation in fair value of investments.

The Plan's policy is to recognize transfers from levels of the fair value hierarchy as of the date of the event or changes in circumstances that caused the transfer. For the year ended December 31, 2020, there were no significant transfers between different levels of the fair value hierarchy.

Note 7 **PARTY-IN-INTEREST TRANSACTIONS**

Most of the Plan's investments are shares of mutual funds managed by FMTC, the custodian of the Plan.

Employee deferrals for forty nine pay periods (totaling approximately $107,003) were not remitted to the Plan on a timely basis. These are nonexempt party-in-interest transactions under ERISA.

Note 8 **RISKS AND UNCERTAINTIES**

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

Note 9 **REPORTABLE TRANSACTIONS**

There were no reportable transactions in 2020.

SUPPLEMENTAL SCHEDULES

DURANT AUTO GROUP 401(K) PLAN

EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2020

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
Check here ☐ If Late Participant Loan Repayments are Included	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
$ 27	$ -	$ -	$ -	$ 27
21	-	-	21	-
18	-	-	18	-
4	-	-	4	-
41	-	-	41	-
39	-	-	39	-
105	-	-	105	-
38	-	-	38	-
46	-	-	46	-
64	-	-	64	-
72	-	-	72	-
69	-	-	69	-
620	-	-	-	620
480	-	-	-	480
514	-	-	-	514
416	-	-	-	416
486	-	-	-	486
456	-	-	-	456
365	-	-	-	365
272	-	-	-	272
322	-	-	-	322
12	-	-	-	12
363	-	-	-	363

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2020

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

(continued)

$ 427	$ -	$ -	$ -	$ 427
383	-	-	-	383
307	-	-	-	307
1,835	-	-	-	1,835
1,275	-	-	-	1,275
415	-	-	-	415
306	-	-	-	306
581	-	-	-	581
360	-	-	-	360
1,877	-	-	-	1,877
1,341	-	-	-	1,341
1,095	-	-	-	1,095
1,028	-	-	-	1,028
305	-	-	-	305
113	-	-	-	113
301	-	-	-	301
2,491	-	-	-	2,491
20,138	-	-	-	20,138
37,872	-	-	-	37,872
2,178	-	-	-	2,178
5,883	-	-	-	5,883
6,645	-	-	-	6,645

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2020

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

(continued)

$ 14,864	$ -	$ -	$ -	$	14,864
25	-	-	-		25
88	-	-	-		88
20	-	-	-		20
$ 107,003	$ -	$ -	$ 517	$	106,486

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2020

(a) (b) Identity of issue, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(e) Current Value
Investments at fair value:		
* Fidelity Contrafund	Mutual fund	$ 2,196,033
* Fidelity Small Cap Value Fund	Mutual fund	467,821
* Fidelity US Bond Index	Mutual fund	366,754
* Fidelity 500 Index	Mutual fund	3,038,444
* Fidelity Real Estate Index	Mutual fund	235,791
* Fidelity Intl Index	Mutual fund	276,598
* Fidelity Extd Mkt Index	Mutual fund	692,783
* Fidelity Government Money Market	Interest-bearing cash	2,019,566
* Fidelity Intm TR BD Index	Mutual fund	386,178
* Wells Fargo Advantage Emerging Markets	Mutual fund	471,758
* Neuberger Berman Mid Cap Growth Trust	Mutual fund	556,569
* Metropolitan West Total Return Bond Fund	Mutual fund	421,850
* Invesco High Yield Fund R5	Mutual fund	218,375
* Invesco Diversified Dividend Fund R5	Mutual fund	604,330
* VRTS C Mid-Cap Value Equity	Mutual fund	469,275
* Invesco International Growth R5	Mutual fund	521,834
* American Century One Choice 2025 Inv.	Mutual fund	7,566,773
* American Century One Choice 2035 Inv.	Mutual fund	4,576,782
* American Century One Choice 2045 Inv.	Mutual fund	3,803,682
* American Century One Choice in Retirement	Mutual fund	5,945,070
* Janus Triton Fund	Mutual fund	1,089,943
* PIMCO Small Cap StocksPLUS	Mutual fund	349,875
* American Century One Choice 2030 Inv.	Mutual fund	6,974,124
* American Century One Choice 2040 Inv.	Mutual fund	4,176,440
* American Century One Choice 2050 Inv.	Mutual fund	2,229,311
* American Century One Choice 2055 Inv.	Mutual fund	3,211,406
Self-directed brokerage	Various	1,698,505
TOTAL ASSETS (HELD AT END OF YEAR)		$ 54,565,870

* Party-in-interest
Cost is omitted on all accounts above as all are participant directed accounts

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN

FINANCIAL STATEMENTS

DECEMBER 31, 2020 AND 2019

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

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AMERICAN INSTITUTE
OF CERTIFIED PUBLIC
ACCOUNTANTS

INDEPENDENT AUDITOR'S REPORT

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

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Durant Auto Group 401(k) Plan, which comprise the statements of net assets available for benefits – modified cash basis as of December 31, 2020 and 2019, and the related modified cash basis statement of changes in net assets available for benefits for the year ended December 31, 2020, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with the modified cash basis of accounting; this includes determining that the modified cash basis of accounting is an acceptable basis for the preparation of the financial statements in the circumstances. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4, which was certified by Fidelity Management Trust Company, the custodian of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan administrator that the custodian holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained certifications from the custodian as of December 31, 2020 and 2019, and for the year ended December 31, 2020, that the information provided to the Plan administrator by the custodian is complete and accurate.

CPA™

Disclaimer of Opinion

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

Basis of Accounting

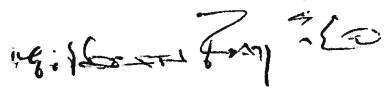
We draw attention to Note 2 to the financial statements, which describes the basis of accounting. The financial statements are prepared on the modified cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our opinion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

Report on Supplementary Information

The supplemental schedules of delinquent participant contributions and assets (held at end of year) as of December 31, 2020 are required by the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on these supplemental schedules.

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

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



October 7, 2021

Grapevine, Texas

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

DURANT AUTO GROUP 401(K) PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS - MODIFIED CASH BASIS

DECEMBER 31, 2020 AND 2019

	2020	2019
ASSETS		
Non interest-bearing cash	$ -	$ -
Investments:		
Mutual funds	50,847,799	50,434,101
Interest-bearing cash	2,019,566	2,611,463
Self-directed brokerage	1,698,505	521,487
At fair value	54,565,870	53,567,051
Total assets	54,565,870	53,567,051
NET ASSETS AVAILABLE FOR BENEFITS	$ 54,565,870	$ 53,567,051

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

DURANT AUTO GROUP 401(K) PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS - MODIFIED CASH BASIS

YEAR ENDED DECEMBER 31, 2020

INVESTMENT AND CONTRIBUTION ACTIVITY		
Additions to net assets attributed to:		
Investment activity:		
Net appreciation in investments carried at fair value	$	3,598,091
Interest and dividends		2,806,560
		6,404,651
Contributions:		
Participants' deferrals		5,586,332
Participants' rollovers		188,279
Employers' matching		1,631,260
		7,405,871
TOTAL INVESTMENT AND CONTRIBUTION ACTIVITY		13,810,522
DEDUCTIONS		
Deductions from net assets attributed to:		
Administrative expenses		151,957
Benefits paid to participants		12,659,746
TOTAL DEDUCTIONS		12,811,703
NET INCREASE		998,819
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year		53,567,051
END OF YEAR	$	54,565,870

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

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The following description of the Durant Auto Group 401(k) Plan (Plan) provides only general information. Participants should refer to the plan document for a more complete description of the Plan's provisions. The Plan is a defined contribution plan for the benefit of the employees of Classic Chevrolet, Inc. (GPVN), Classic CRCJ of Arlington (ARCJ), Classic Buick GMC, Ltd. (ARLG), Stingray Chevrolet – Bartow, LLC (BART), Classic Autoplex / Nissan of Boerne (BRNE), Classic Kia of Carrollton (CKIA), Classic Chevrolet Buick GMC of Cleburne (CLEB), Classic Buick GMC of Carrollton, LLC (CRLT), Classic Chrysler Jeep Dodge & Mazda (DENT), Classic Autoplex GM, LLC (GALV), Classic Chevrolet Buick GMC, Inc. (GRBY), Classic Chevrolet Houston (HOUS), Classic Lawton Chevrolet (LAWT), Mike Brown Ford, Dodge & Hyundai (MBRN), Classic Honda of Midland (MIDL), Stingray Chevrolet, LLC (PLNT), Classic Chevrolet Sugarland, LLC (SGRL), Classic Chevrolet West Houston, LLC (SGRW), Smart Auto Leasing, LLC (SMAL), Classic Tulsa Buick GMC, dba Mark Allen Buick GMC (TULB), Classic Tulsa, d/b/a Mark Allen Chevrolet (TULS), Classic CC Denison LLC (TXCC), and Classic Texoma (TXOM). These entities (collectively, the Company) are under common ownership and control. During 2020, GRBY and CRLT were sold to third parties. After the sale, employees of those dealerships became unable to contribute to the Plan, although they are eligible to withdraw their balances.

The Plan qualifies as a profit-sharing plan under Internal Revenue Code (Code) Section 401(a) and as a cash-or-deferred arrangement under Code Section 401(k).

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

Employee contributions

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

Employer contributions

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

Participant accounts

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

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

Vesting

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

Administrative expenses

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

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

Payment of benefits

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

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

The Plan permits in-service withdrawals: (1) for CARES Act distributions, as noted below, (2) of rollover contributions, at the participant's request, (3) for employees over the age of 59 ½, and (4) for certain hardship situations, as defined.

During 2020, the Plan implemented the distribution provision of the Coronavirus Aid, Relief, and Economic Security ("CARES") Act that was signed into law on March 27, 2020. A CARES Act distribution allows the Plan's participants to take a COVID-19 related distribution up to $100,000 from the Plan during 2020. Written amendments to the Plan to reflect these operational changes will be adopted at a later date in accordance with applicable law and IRS guidance.

Other plan provisions

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

Note 2 **SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

Subsequent events

The Plan has evaluated subsequent events through October 7, 2021, the date which the financial statements were available to be issued.

Subsequent to December 31, 2021, the MBRN and DENT locations were sold. MBRN and DENT participants were terminated, and became fully vested and eligible for distributions.

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

Basis of accounting

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

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

Investment valuation and income recognition

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

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

Excess contributions

Amounts payable to participants for contributions in excess of amounts allowed by the IRS are recorded as distributions when paid. These amounts were not material at December 31, 2020 and 2019.

Payment of benefits

Benefits are recorded when paid.

Expenses

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

Note 3 **TAX STATUS**

The Plan has adopted a Volume Submitter Plan (the Volume Submitter Plan) of Fidelity Management & Research Company (FMR). FMR obtained an advisory letter in regard to the Volume Submitter Plan dated June 30, 2020, in which the Internal Revenue Service stated that the Volume Submitter Plan, as then designed, was in compliance with the applicable requirements of the Code. The Plan has been amended since receiving the advisory letter. However, the Plan administrator believes that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the Code and, therefore, believes that the Plan is qualified, and the related trust is tax-exempt. Therefore, no provision for income taxes has been included in the Plan's financial statements.

The modified cash basis of accounting requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that is more likely than not would not be sustained upon examination by the U.S. Internal Revenue Service. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes the Plan is no longer subject to income tax examinations for years prior to 2017.

Note 4 **PLAN TERMINATION**

Although it has not expressed any intent to do so, the Plan's sponsor has the right to discontinue contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of a full or partial termination, affected participants would be fully vested in their accounts.

Note 5 **INFORMATION PREPARED AND CERTIFIED BY FMTC**

Fidelity Workplace Services, LLC (FWS) is a wholly-owned subsidiary of FMR, LLC (Fidelity). Fidelity Management Trust Company (FMTC) is (indirectly) a wholly-owned subsidiary of Fidelity. The December 31, 2020 and 2019 statements of net assets available for benefits – modified cash basis, the investment activities included on the modified cash basis statement of changes in net assets available for benefits for the year ended December 31, 2020, and the accompanying notes to the financial statements were prepared in part or entirely from information certified by FMTC in accordance with 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The information certified includes total investments of $54,565,870 and $53,567,051 at December 31, 2020 and 2019, respectively, and related investment earnings of $6,109,839 for the year ended December 31, 2020.

Note 5 **INFORMATION PREPARED AND CERTIFIED BY FMTC** – (continued)

These accounts are maintained by Fidelity, a party-in-interest. See note 6.

Note 6 **FAIR VALUE MEASUREMENTS**

The fair value measurement accounting literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets or liabilities and have the highest priority. Level 2 inputs consist of observable inputs other than quoted market prices for identical assets or liabilities (Level 1). Level 3 inputs are unobservable and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 2 inputs are used for investments for which Level 1 inputs were not available. Level 3 inputs would only be used if Level 1 or Level 2 inputs were not available. There were no Level 2 or Level 3 transactions at December 31, 2020 or 2019.

Level 1

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

The following table sets forth by level, within the fair value hierarchy, the plan's assets at fair value as of December 31, 2020 and 2019.

	Assets at Fair Value as of December 31, 2020			
	Level 1	Level 2	Level 3	Total
Mutual funds	$ 50,847,799	$ -	$ -	$ 50,847,799
Interest-bearing cash	2,019,566	-	-	2,019,566
Self-directed brokerage	1,698,505	-	-	1,698,505
Total	$ 54,565,870	$ -	$ -	$ 54,565,870

Note 6 **FAIR VALUE MEASUREMENTS** – (continued)

	Assets at Fair Value as of December 31, 2019			
	Level 1	Level 2	Level 3	Total
Mutual funds	$ 50,434,101	$ -	$ -	$ 50,434,101
Interest-bearing cash	2,611,463	-	-	2,611,463
Self-directed brokerage	521,487	-	-	521,487
Total	$ 53,567,051	$ -	$ -	$ 53,567,051

Gains and losses included in changes in net assets available for benefit for the years ended December 31, 2020 and 2019, are reported in net appreciation in fair value of investments.

The Plan's policy is to recognize transfers from levels of the fair value hierarchy as of the date of the event or changes in circumstances that caused the transfer. For the year ended December 31, 2020, there were no significant transfers between different levels of the fair value hierarchy.

Note 7 **PARTY-IN-INTEREST TRANSACTIONS**

Most of the Plan's investments are shares of mutual funds managed by FMTC, the custodian of the Plan.

Employee deferrals for forty nine pay periods (totaling approximately $107,003) were not remitted to the Plan on a timely basis. These are nonexempt party-in-interest transactions under ERISA.

Note 8 **RISKS AND UNCERTAINTIES**

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

Note 9 **REPORTABLE TRANSACTIONS**

There were no reportable transactions in 2020.

SUPPLEMENTAL SCHEDULES

DURANT AUTO GROUP 401(K) PLAN

EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2020

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
Check here ☐ If Late Participant Loan Repayments are Included	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
$ 27	$ -	$ -	$ -	$ 27
21	-	-	21	-
18	-	-	18	-
4	-	-	4	-
41	-	-	41	-
39	-	-	39	-
105	-	-	105	-
38	-	-	38	-
46	-	-	46	-
64	-	-	64	-
72	-	-	72	-
69	-	-	69	-
620	-	-	-	620
480	-	-	-	480
514	-	-	-	514
416	-	-	-	416
486	-	-	-	486
456	-	-	-	456
365	-	-	-	365
272	-	-	-	272
322	-	-	-	322
12	-	-	-	12
363	-	-	-	363

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2020

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

(continued)

$ 427	$ -	$ -	$ -	$ 427
383	-	-	-	383
307	-	-	-	307
1,835	-	-	-	1,835
1,275	-	-	-	1,275
415	-	-	-	415
306	-	-	-	306
581	-	-	-	581
360	-	-	-	360
1,877	-	-	-	1,877
1,341	-	-	-	1,341
1,095	-	-	-	1,095
1,028	-	-	-	1,028
305	-	-	-	305
113	-	-	-	113
301	-	-	-	301
2,491	-	-	-	2,491
20,138	-	-	-	20,138
37,872	-	-	-	37,872
2,178	-	-	-	2,178
5,883	-	-	-	5,883
6,645	-	-	-	6,645

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4a -
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2020

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

(continued)

$ 14,864	$ -	$ -	$ -	$	14,864
25	-	-	-		25
88	-	-	-		88
20	-	-	-		20
$ 107,003	$ -	$ -	$ 517	$	106,486

See independent auditor's report.

DURANT AUTO GROUP 401(K) PLAN
EIN - 75-1159462
PLAN NUMBER - 002
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2020

(a) (b) Identity of issue, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(e) Current Value
Investments at fair value:		
* Fidelity Contrafund	Mutual fund	$ 2,196,033
* Fidelity Small Cap Value Fund	Mutual fund	467,821
* Fidelity US Bond Index	Mutual fund	366,754
* Fidelity 500 Index	Mutual fund	3,038,444
* Fidelity Real Estate Index	Mutual fund	235,791
* Fidelity Intl Index	Mutual fund	276,598
* Fidelity Extd Mkt Index	Mutual fund	692,783
* Fidelity Government Money Market	Interest-bearing cash	2,019,566
* Fidelity Intm TR BD Index	Mutual fund	386,178
* Wells Fargo Advantage Emerging Markets	Mutual fund	471,758
* Neuberger Berman Mid Cap Growth Trust	Mutual fund	556,569
* Metropolitan West Total Return Bond Fund	Mutual fund	421,850
* Invesco High Yield Fund R5	Mutual fund	218,375
* Invesco Diversified Dividend Fund R5	Mutual fund	604,330
* VRTS C Mid-Cap Value Equity	Mutual fund	469,275
* Invesco International Growth R5	Mutual fund	521,834
* American Century One Choice 2025 Inv.	Mutual fund	7,566,773
* American Century One Choice 2035 Inv.	Mutual fund	4,576,782
* American Century One Choice 2045 Inv.	Mutual fund	3,803,682
* American Century One Choice in Retirement	Mutual fund	5,945,070
* Janus Triton Fund	Mutual fund	1,089,943
* PIMCO Small Cap StocksPLUS	Mutual fund	349,875
* American Century One Choice 2030 Inv.	Mutual fund	6,974,124
* American Century One Choice 2040 Inv.	Mutual fund	4,176,440
* American Century One Choice 2050 Inv.	Mutual fund	2,229,311
* American Century One Choice 2055 Inv.	Mutual fund	3,211,406
Self-directed brokerage	Various	1,698,505
TOTAL ASSETS (HELD AT END OF YEAR)		$ 54,565,870

* Party-in-interest
Cost is omitted on all accounts above as all are participant directed accounts

See independent auditor's report.