

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 2023 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023	
A	This return/report is for: ☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) _____ ☐ 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)
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐

Part II	Basic Plan Information—enter all requested information
1a	Name of plan TOYOTA OF VANCOUVER 401(K) PROFIT SHARING PLAN
1b	Three-digit plan number (PN) ▶ 002
1c	Effective date of plan 07/01/1997
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) MCCORD'S VANCOUVER AUTO CENTER, INC. 10455 NE 53RD STREET VANCOUVER, WA 98662
2b	Employer Identification Number (EIN) 91-1180183
2c	Plan Sponsor's telephone number 360-253-4440
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.	12/18/2024	KYLEE MORRIS
	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 ☒ 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	5 206
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 a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1) 181 6a(2) 188 6b 0 6c 38 6d 226 6e 0 6f 226 6g(1) 160 6g(2) 182 6h 9
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 3D 2T 2K

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) ☒ 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) ☒ Trust (4) ☐ General assets of the sponsor
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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)** ☒ **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
- (4)** ☐ **DCG** (Individual Plan Information) – Number Attached _____
- (5)** ☐ **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- (1)** ☒ **H** (Financial Information)
- (2)** ☐ **I** (Financial Information – Small Plan)
- (3)** ☒ **A** (Insurance Information) – Number Attached 1
- (4)** ☒ **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 2023 Form M-1 annual report. If the plan was not required to file the 2023 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 A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2023 This Form is Open to Public Inspection
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For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023	
A Name of plan TOYOTA OF VANCOUVER 401(K) PROFIT SHARING PLAN	B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 MCCORD'S VANCOUVER AUTO CENTER, INC.	D Employer Identification Number (EIN) 91-1180183

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions	Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier
NATIONWIDE LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
31-4156830	66869	533-80044	182	01/01/2023	12/31/2023

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
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(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
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(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end **4** 680207**5** Current value of plan's interest under this contract in separate accounts at year end **5****6** Contracts With Allocated Funds:**a** State the basis of premium rates ▶**b** Premiums paid to carrier **6b****c** Premiums due but unpaid at the end of the year **6c****d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. **6d**
Specify nature of costs ▶**e** Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity(3) ☐ other (specify) ▶**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)**a** Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee(3) ☒ guaranteed investment (4) ☐ other ▶**b** Balance at the end of the previous year **7b** 1066631**c** Additions: (1) Contributions deposited during the year **7c(1)** 145160(2) Dividends and credits **7c(2)** 0(3) Interest credited during the year **7c(3)** 21162(4) Transferred from separate account **7c(4)** 84644(5) Other (specify below) **7c(5)** 6569

▶ LOAN REPAYMENT - PRINCIPAL; REALLOCATED TRANSFER IN

(6) Total additions **7c(6)** 257535**d** Total of balance and additions (add lines **7b** and **7c(6)**) **7d** 1324166**e** Deductions:(1) Disbursed from fund to pay benefits or purchase annuities during year **7e(1)** 555751(2) Administration charge made by carrier **7e(2)** 9403(3) Transferred to separate account **7e(3)** 74618(4) Other (specify below) **7e(4)** 4187

▶ FORFEITURE; LOAN WITHDRAWAL

(5) Total deductions **7e(5)** 643959**f** Balance at the end of the current year (subtract line **7e(5)** from line **7d**) **7f** 680207

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)		
(2) Increase (decrease) in amount due but unpaid.....	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3)).....		9a(4)	0
b Benefit charges (1) Claims paid.....	9b(1)		
(2) Increase (decrease) in claim reserves	9b(2)		
(3) Incurred claims (add (1) and (2)).....		9b(3)	0
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies.....	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention		9c(1)(H)	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.).....		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves.....		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount	10b	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A?..... ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2023
		This Form is Open to Public Inspection.

For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023

A Name of plan TOYOTA OF VANCOUVER 401(K) PROFIT SHARING PLAN	B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 MCCORD'S VANCOUVER AUTO CENTER, INC.	D Employer Identification Number (EIN) 91-1180183

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

YesNo
- 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

NATIONWIDE

31-1592130

(b)

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

(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)

NATIONWIDE

31-1592130

(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?
15 52 37 51	RECORDKEEPER	44983	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

CONCURRENT INVESTMENT ADVISORS

92-1819393

(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?
22 23 26	INVESTMENT ADVISOR	16661	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PENSION PLAN SPECIALISTS, PC

26-1570786

(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?
13 50 64	TPA	14363	Yes ☐ No ☒	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)

RAYMOND JAMES FIN SERV ADVISORS

59-2937883

(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?
22 23 26	BROKER	9480	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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
		2023
		This Form is Open to Public Inspection

For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023		
A Name of plan TOYOTA OF VANCOUVER 401(K) PROFIT SHARING PLAN	B Three-digit plan number (PN) ►	002
C Plan sponsor's name as shown on line 2a of Form 5500 MCCORD'S VANCOUVER AUTO CENTER, INC.	D Employer Identification Number (EIN) 91-1180183	

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)	58663	128971
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	5578723	7245222
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	1066631	680207
(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	6704017	8054400
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j	71106	28012
k Total liabilities (add all amounts in lines 1g through 1j)	1k	71106	28012
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	6632911	8026388

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)	341127	
(B) Participants	2a(1)(B)	864020	
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B), (C), and line 2a(2)	2a(3)		1205147
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	5539	
(F) Other	2b(1)(F)	21163	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		26702
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B), and (C)	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		1000197
c Other income	2c		413
d Total income. Add all income amounts in column (b) and enter total	2d		2232459

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	752109	
(2) To insurance carriers for the provision of benefits.....	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		752109
f Corrective distributions (see instructions)	2f		1386
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees.....	2i(2)	44983	
(3) Recordkeeping fees.....	2i(3)		
(4) IQPA audit fees.....	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	26141	
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	14363	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		85487
j Total expenses. Add all expense amounts in column (b) and enter total	2j		838982

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		1393477
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

b 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) ☒ 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: **WORTHY & COMPANY, LLC**

(2) EIN: **20-8092242**

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) ☐ This form is filed for a CCT, PSA, DCG 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. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

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.)	☒	☐	533442
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.)	☐	☒	
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.)	☐	☒	
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.)	☐	☒	
e Was this plan covered by a fidelity bond?	☒	☐	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?	☐	☒	
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?	☐	☒	
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?	☐	☒	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	☒	☐	
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.)	☐	☒	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	☐	☒	
l Has the plan failed to provide any benefit when due under the plan?	☐	☒	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	☐	☒	
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.	☐	☐	

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 2023 This Form is Open to Public Inspection.	
For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023					
A Name of plan TOYOTA OF VANCOUVER 401(K) PROFIT SHARING PLAN				B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 MCCORD'S VANCOUVER AUTO CENTER, INC.				D Employer Identification Number (EIN) 91-1180183	
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	0
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): 31-4156830					
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					
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.				Schedule R (Form 5500) 2023 v. 230707	

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (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) 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) 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)	14a 14b 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
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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) and (b): a Enter the percentage of plan assets held as: Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____% High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____% b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets: ☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more	
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. _____	

Part VII	IRS Compliance Questions
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21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☐ Yes ☒ No 21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2). ☐ Design-based safe harbor method ☒ "Prior year" ADP test ☒ "Current year" ADP test ☐ N/A	
22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter <u>06 / 30 / 2020</u> (MM/DD/YYYY) and the Opinion Letter serial number <u>Q702842A</u> .	

TOYOTA OF VANCOUVER
401(K) PROFIT SHARING PLAN
Financial Statements and Supplemental Schedules
December 31, 2023 and 2022

Toyota of Vancouver 401(k) Profit Sharing Plan
Index
December 31, 2023 and 2022

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Independent Auditor's Report

To the Participants and Administrator of
Toyota of Vancouver 401(k) Profit Sharing Plan

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit

We have performed audits of the financial statements of Toyota of Vancouver 401(k) Profit Sharing Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), as permitted by ERISA Section 103(a)(3)(C) ("ERISA Section 103(a)(3)(C) audit"). The financial statements comprise the statements of net assets available for benefits as of December 31, 2023 and 2022, and the related statement of changes in net assets available for benefits for the year ended December 31, 2023, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the Plan ("investment information") by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA ("qualified institution").

Management has obtained certifications from a qualified institution as of December 31, 2023 and 2022, and for the year ended December 31, 2023, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the Financial Statements section:

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

Toyota of Vancouver 401(k) Profit Sharing Plan
Independent Auditor's Report, Continued
December 31, 2023 and 2022

- The information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America ("GAAS"). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and 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. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

Management is also responsible for maintaining a current plan instrument, including all plan amendments, administering the Plan, and determining that the Plan's transactions that are presented and disclosed in the financial statements are in conformity with the Plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if, there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

Toyota of Vancouver 401(k) Profit Sharing Plan
Independent Auditor's Report, Continued
December 31, 2023 and 2022

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Supplemental Schedules Required by ERISA

The supplemental schedules of (I) Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2023 and (II) Schedule H, Line 4a – Schedule of Delinquent Participant Contributions for the year ended December 31, 2023 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for

Toyota of Vancouver 401(k) Profit Sharing Plan
Independent Auditor's Report, Continued
December 31, 2023 and 2022

Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including its form and content, are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

- The form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- The information in the supplemental schedules related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Worthy & Company, LLC

Hillsboro, Oregon
October 14, 2024

Toyota of Vancouver 401(k) Profit Sharing Plan
Statements of Net Assets Available for Benefits
December 31, 2023 and 2022

	2023	2022
Assets		
Investments, at fair value:		
Registered investment companies	\$ 7,245,222	\$ 5,578,723
Insurance company general accounts	<u>680,207</u>	<u>1,066,631</u>
Total investments	7,925,429	6,645,354
Receivables:		
Notes receivable from participants	<u>128,971</u>	<u>58,663</u>
Total assets	8,054,400	6,704,017
Liabilities		
Excess contributions and other liabilities	<u>28,012</u>	<u>71,106</u>
Net assets available for benefits	<u>\$ 8,026,388</u>	<u>\$ 6,632,911</u>

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

Toyota of Vancouver 401(k) Profit Sharing Plan
Statement of Changes in Net Assets Available for Benefits
For the Year Ended December 31, 2023

Additions

Additions to net assets attributed to:

Investment income:

Interest and dividend income	\$ 21,576
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Net appreciation in fair value of investments	1,000,197
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Total investment income	1,021,773
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Interest income on notes receivable from participants	5,539
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Contributions:

Employer	341,127
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Participant	864,020
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Total contributions	1,205,147
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Total additions	2,232,459
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Deductions

Deductions from net assets attributed to:

Benefits paid to participants	753,495
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Administrative expenses	85,487
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Total deductions	838,982
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Net increase	1,393,477
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Net assets available for benefits

Beginning of year	6,632,911
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End of year	\$ 8,026,388
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The accompanying notes are an integral part of the financial statements.

Toyota of Vancouver 401(k) Profit Sharing Plan
Notes to Financial Statements
December 31, 2023 and 2022

1. Description of the Plan

The following description of the Toyota of Vancouver 401(k) Profit Sharing Plan (the “Plan”) provides only general information. Participants should refer to the plan agreement for a more complete description of the Plan’s provisions. The Plan is subject to the provisions of ERISA.

General

The Plan is a defined contribution plan covering eligible employees of McCord’s Vancouver Auto Center, Inc. (the “Company”) who are not union employees whose employment is governed by a collective bargaining agreement under which retirement benefits were the subject of good faith bargaining. The Company is the administrator of the Plan. The Company has appointed certain members of its management as trustees who are responsible for the management of the Plan. The trustees are responsible for oversight of the Plan including determining the appropriateness of the Plan’s investment offerings and monitoring investment performance. The trustees have appointed Nationwide Trust Company, FSB and Nationwide Life Insurance Company (“Nationwide”) as custodians of the Plan’s assets.

Employees are eligible to participate in the Plan on the first day of the quarter coinciding with, or next following, the date upon which they satisfy the following conditions:

Employee Salary Deferrals. Eligible employees may begin making elective participant salary deferrals upon completion of one year of service and reaching 18 years of age.

Discretionary Employer Matching Contributions. Participants may be eligible to receive discretionary employer matching contributions upon completion of one year of service and reaching 18 years of age. Eligible participants will receive discretionary employer matching contributions regardless of the amount of service completed during the plan year.

Discretionary Employer Profit Sharing Contributions. Participants may be eligible to receive discretionary employer profit sharing contributions upon completion of one year of service and reaching 18 years of age. Participants must be employed on the last day of the plan year and complete a year of service during the plan year to be eligible to receive discretionary employer profit sharing contributions for a given year. A participant will receive discretionary employer profit sharing contributions, regardless of the amount of service completed during the plan year, in the year of the participant’s death, disability or retirement, as defined by the Plan.

Contributions

Participants may elect to contribute up to 100 percent of their compensation, as defined by the Plan. Participants who have attained age 50 before the end of the plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans. The Company may elect to make discretionary matching contributions which are based on a percentage of each eligible employee’s annual salary deferrals that do not exceed 5 percent of the respective employee’s annual compensation. The Company will determine the amount of

Toyota of Vancouver 401(k) Profit Sharing Plan

Notes to Financial Statements

December 31, 2023 and 2022

the discretionary matching contributions each year, if any. The Company may elect to make discretionary profit sharing contributions which are allocated among eligible participants. The Company will determine the amount of the discretionary profit sharing contributions each year, if any. Participants direct the investment of their elective salary deferrals and their allocation of employer contributions into any of the investment options offered by the Plan. The Plan currently offers various investment options into which participants may direct their investments. Contributions are subject to certain limitations.

Participant Accounts

Each participant's account is credited with the participant's contributions and allocations of the Company's contributions, plan earnings, and administrative expenses. Allocations are based on participant earnings, years of service, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are vested immediately in their contributions plus actual earnings thereon. Vesting in the employer contributions portion of participant accounts is based on years of credited service subject to a five year vesting schedule. A participant vests at the rate of 20 percent per year and is 100 percent vested after five years of credited service. Participants will also be 100 percent vested if employed on or after the Plan's normal retirement age, or upon death or becoming disabled while employed by the Company.

Notes Receivable from Participants

Participants may borrow from their accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50 percent of their account balance. The loans are collateralized by the balance in the participant's account and bear interest at fixed rates that are determined at the issuance date of each loan by the plan administrator. Principal and interest is paid ratably through payroll deductions.

Payment of Benefits

On termination of service due to death, disability, or retirement a participant may elect to receive either a lump-sum distribution equal to the value of the participant's interest in his or her account or partial withdrawals. On termination of service for other reasons, if a participant's vested interest is less than \$5,000 the participant will receive the value of the vested interest in his or her account as a lump-sum distribution or an IRA rollover; however, if the participant's vested interest exceeds the \$5,000 threshold, the participant may elect to receive either a lump-sum distribution equal to the value of the participant's interest in his or her account or partial withdrawals.

Forfeited Accounts

At December 31, 2023 and 2022, forfeited nonvested accounts totaling \$25,887 and \$26,083, respectively, were held by the Plan. Forfeited accounts may be used to pay administrative expenses or reduce future employer contributions.

Toyota of Vancouver 401(k) Profit Sharing Plan
Notes to Financial Statements
December 31, 2023 and 2022

2. Summary of Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

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. The Plan's trustee determines the Plan's valuation policies utilizing information provided by the Plan's investment advisers and custodians. See Note 4 for discussion of fair value measurements.

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

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2023 or 2022. If a participant ceases to make loan repayments and the plan administrator deems the participant loan to be in default, the participant loan balance is reduced to zero and a corresponding benefit payment is recorded.

Excess Contributions Payable

Amounts payable to participants for contributions in excess of amounts allowed by the IRS are recorded as a liability with a corresponding reduction to contributions.

Payment of Benefits

Benefits are recorded when paid.

Expenses

Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment related expenses are included in net appreciation in fair value of investments.

Toyota of Vancouver 401(k) Profit Sharing Plan
Notes to Financial Statements
December 31, 2023 and 2022

Subsequent Events

Management has evaluated subsequent events through October 14, 2024, the date the financial statements were available to be issued.

3. Certified Investments

Certain information related to investments disclosed in the accompanying financial statements and supplemental schedule, including investments held at December 31, 2023 and 2022, and net appreciation in fair value of investments, and interest and dividends, for the year ended December 31, 2023, was obtained by management and agreed to or derived from information certified as complete and accurate by Nationwide Trust Company, FSB and Nationwide Life Insurance Company.

4. Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under Financial Accounting Standards Board (“FASB”) Accounting Standards Codification (“ASC”) 820 are described as follows:

Level 1. Level 1 inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2. Level 2 inputs to the valuation methodology include (a) quoted prices for similar assets or liabilities in active markets, (b) quoted prices for identical or similar assets or liabilities in inactive markets, (c) inputs other than quoted prices that are observable for the asset or liability, and (d) inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3. Level 3 inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

Toyota of Vancouver 401(k) Profit Sharing Plan
Notes to Financial Statements
December 31, 2023 and 2022

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2023 and 2022:

Registered investment companies: Registered investment company accounts are valued at unit value as reported by Nationwide each day the principal market is open. The fair value of investments in this category has been estimated by Nationwide using the net asset value of the underlying investments, which consist primarily of mutual funds, per unit of participation. The unit values of the Plan's investments are not publicly-quoted prices in an active market.

Insurance company general accounts: Insurance company general account assets consist of investments in guaranteed interest accounts and noninterest-bearing accounts offered and maintained by Nationwide Life Insurance Company. Nationwide Life Insurance Company maintains these assets in an insurance company general account; accordingly, the Plan's ability to receive the amounts due under these unallocated contracts is dependent on the issuer's ability to meet its financial obligations. The issuer's ability to meet its contractual obligations may be affected by future economic and regulatory developments. Guaranteed interest accounts are valued at fair value by the insurance company by discounting the related cash flows based on current yields of similar instruments with comparable durations considering the creditworthiness of the issuer. Because participants transact at contract value, fair value is determined for financial statement reporting purposes only. The guaranteed interest accounts are not considered to be fully benefit-responsive due primarily to certain redemption restrictions; accordingly, they are presented at fair value in the accompanying financial statements. The Nationwide Life Insurance Company fixed select account crediting rate is reset quarterly and was 2.32 percent as of December 31, 2023. Noninterest-bearing accounts are valued at the amount payable on demand.

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

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2023:

	Level 1	Level 2	Level 3	Total
Registered investment companies	\$ -	\$ 7,245,222	\$ -	\$ 7,245,222
Insurance company general accounts	-	-	680,207	680,207
Total investments at fair value	<u>\$ -</u>	<u>\$ 7,245,222</u>	<u>\$ 680,207</u>	<u>\$ 7,925,429</u>

Toyota of Vancouver 401(k) Profit Sharing Plan
Notes to Financial Statements
December 31, 2023 and 2022

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2022:

	Level 1	Level 2	Level 3	Total
Registered investment companies	\$ -	\$ 5,578,723	\$ -	\$ 5,578,723
Insurance company general accounts	-	-	1,066,631	1,066,631
Total investments at fair value	<u>\$ -</u>	<u>\$ 5,578,723</u>	<u>\$ 1,066,631</u>	<u>\$ 6,645,354</u>

The following table sets forth a summary of changes in the fair value of the Plan's Level 3 assets for the year ended December 31, 2023:

	Insurance Company General Accounts
Balance, beginning of year	\$ 1,066,631
Purchases	236,373
Interest income	21,162
Withdrawals	(634,556)
Administrative fees	(9,403)
Balance, end of year	<u>\$ 680,207</u>

5. Related Party and Party-In-Interest Transactions

Certain investments are offered through or managed by Nationwide Trust Company, FSB, Nationwide Life Insurance Company, or affiliated entities. Nationwide Trust Company, FSB and Nationwide Life Insurance Company serve as the Plan's investment custodians and, therefore, these transactions qualify as party-in-interest transactions. Fees incurred by the Plan for certain investment expenses are included in net appreciation in fair value of investments, as they are paid through fees charged at the investment level rather than direct payments remitted by the Plan. The Plan made direct payments for plan administration and investment advisory services totaling \$85,487 during the year ended December 31, 2023. The Company pays directly certain other fees related to the Plan's operations.

6. Termination of Plan

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of plan termination, participants would become fully vested in their accounts.

Toyota of Vancouver 401(k) Profit Sharing Plan
Notes to Financial Statements
December 31, 2023 and 2022

7. Tax Status

The Plan has adopted a volume submitter profit sharing plan agreement which the Internal Revenue Service has determined, by a letter dated June 30, 2020, is designed in accordance with applicable sections of the Internal Revenue Code (“IRC”). The Plan has been amended since receiving the opinion letter; however, the plan administrator believes that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan is qualified, and the related trust is tax-exempt.

Accounting principles generally accepted in the United States of America require management to evaluate tax positions taken by the Plan and recognize a tax liability if the organization has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits in progress for any tax periods.

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. Market risks include global events, such as pandemics or international conflicts, which could impact the value of investment securities. Due to the level of risk associated with certain investment securities, it is at least 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.

9. Delinquent Participant Contributions

As reported on the supplemental schedule of (II) Schedule H, Line 4a – Schedule of Delinquent Participant Contributions, certain employee contributions were not remitted to the Plan within the timeframe specified by the Department of Labor, therefore constituting nonexempt transactions between the Plan and the Company during the years ended December 31, 2020 and 2019. The related lost earnings due under applicable regulations to correct the delinquent participant contributions were remitted to the Plan during the year ended December 31, 2023.

10. Subsequent Events

Effective January 1, 2024, the plan document was amended to implement automatic enrollment for newly eligible employees. Unless modified by the employee, a default contribution rate of 3 percent of eligible compensation will be automatically withheld and remitted to the participant's account in the Plan accordingly.

Supplemental Schedules

Toyota of Vancouver 401(k) Profit Sharing Plan
(I) Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
EIN: 91-1180183 / Plan Number: 002
December 31, 2023

(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	(d) Cost **	(e) Current Value
Registered Investment Companies:				
*	Alliance Bernstein	AB Global Bond Fund I		\$ 139,858
*	Alliance Bernstein	AB Large Cap Growth Fund I		60,754
*	AMG Funds	AMG Yacktman Fund		1,396
*	Allspring	Special Small Cap Value Fund - Class Inst		61,911
*	Amana Mutual Funds	Trust Growth Fund		1,656
*	American Beacon	International Equity Fund Institutional Class		13,661
*	American Century	American Century Short Duration R5		29,492
*	American Funds	2015 Target Date Retirement Fund R6		88
*	American Funds	2020 Target Date Retirement Fund R6		89,900
*	American Funds	2025 Target Date Retirement Fund R6		4,967
*	American Funds	2030 Target Date Retirement Fund R6		7,639
*	American Funds	2035 Target Date Retirement Fund R6		33,302
*	American Funds	2040 Target Date Retirement Fund R6		15,639
*	American Funds	2045 Target Date Retirement Fund R6		66,634
*	American Funds	2050 Target Date Retirement Fund R6		308,149
*	American Funds	2055 Target Date Retirement Fund R6		41,825
*	American Funds	2060 Target Date Retirement Fund R6		68,254
*	American Funds	2065 Target Date Retirement Fund R6		3,014
*	Avantis	Avantis US Large Cap Value Inst		312,375
*	Avantis	Avantis US Small Cap Value Inst		97,355
*	Baron Growth	Baron Growth Fund Institutional Shares		1,412
*	BlackRock	High Yield Bond Fund		216,778
*	BlackRock	iShares Russell Mid-Cap Index Fund Class K		1,208
*	BlackRock	iShares S&P 500 Index Fund Class K		76,153
*	BlackRock	MidCap Growth Equity Institutional Class		2,100
*	BlackRock	Strategic Income Opportunities Fund		26,295
*	BlackRock	Total Return Fund Class K Shares		114,516
*	BNY Mellon	BNY Mellon Small/Mid Cap Growth Fund		1,177
*	Carillon Eagle	Carillon Eagle Mid Cap Growth I		1,390
*	Cohen & Steers	Cohen & Steers Real Estate Securities I		1,122
*	Columbia Contrarian	Core Fund Institutional 3 Class		2,926
*	Columbia Select	Large Cap Growth Fund Institutional 2 Class		17,347
*	Delaware	Delaware Small Cap Core I		1,319
*	DFA	Emerging Markets Core Equity I		284,452
*	DFA	Global Real Estate Securities Portfolio		12,447
*	DFA	U.S. Large Cap Value Portfolio Institutional Class		28,103
*	DFA	U.S. Targeted Value Institutional Class		8,630
*	Diamond Hill	Diamond Hill MidCap I		174,788
*	Dodge Cox	Dodge Cox Institutional Stock I		349,056
*	Eventide Gilead	Eventide Gilead Class I		1,285
*	Federated	Government Obligations Fund		24,279
*	Federated	Institutional High Yield Bond Fund Institutional Shares		45,024
*	Fidelity	500 Index Fund		544,154
*	Fidelity	International Index Fund		333,607
*	Fidelity	U.S. Bond Index Fund		306,827
*	Franklin	Franklin Utilities Fund Advisor Class		548
*	Franklin Templeton	Global Bond Fund R6		7,946
*	Frost	Frost Total Return Bond Fund International		15,494
*	Glenmede Quant	US Large Cap Gr Eq Instl		817

Toyota of Vancouver 401(k) Profit Sharing Plan
(I) Schedule H, Line 4i - Schedule of Assets (Held at End of Year), Continued
EIN: 91-1180183 / Plan Number: 002
December 31, 2023

		(c) Description of Investment Including Maturity Date, Rate of Interest,	(d)	(e)
(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	Collateral, Par or Maturity Value	Cost **	Current Value
*	Goldman Sachs	GQG Partners International Opportunities Fund R6		354,897
*	Guggenheim	Total Return Bond Fund Institutional Class		28,898
*	Harbor International	Growth Fund Institutional		12,116
*	Invesco	Invesco Nasdaq 100 Index Fund Class R6		9,804
*	Janus Henderson	Triton Fund Class N		17,823
*	JP Morgan	Equity Income Fund Class R5		295,858
*	JP Morgan	Large Cap Equity Fund Grade R6		272,233
*	JP Morgan	Small Cap Equity Fund Class R5		48,447
*	MFS	Mid Cap Growth Fund Class R6		167,042
*	Nationwide	Loomis All Cap Growth Fund R6		331,806
*	Nuveen Symphony	High Yield Income I		16,829
*	PGIM Funds	Total Return Bond Fund R6		229,788
*	PIMCO	Commodity Real Return Strategy Fund Inst Class		156,798
*	PIMCO	Long-Term Credit Bond Fund		2,692
*	PIMCO	Real Return Fund Institutional Class		163,507
*	PIMCO	StocksPLUS International Fund Institutional Class		20,430
*	Principal	Global Real Estate R6		191,511
*	Principal	Real Estate Securities Fund		7,737
*	TIAA	TIAA-CREF Large-Cap Growth Index Fund Institutional		76,542
*	TIAA	TIAA-CREF Large-Cap Value Index Fund Institutional		1,797
*	Vanguard	Developed Markets Index Fund		691
*	Vanguard	Equity-Income Fund Admiral Shares		11,389
*	Vanguard	Explorer Fund Admiral Shares		105,639
*	Vanguard	GNMA Fund Admiral Shares		20,945
*	Vanguard	Health Care Index Admiral Shares		8,945
*	Vanguard	Information Technology Index Fund Admiral Shares		8,157
*	Vanguard	Intermediate-Term Treasury Index Fund Admiral Shares		11,196
*	Vanguard	Mid-Cap Value Index Fund Admiral Shares		2
*	Vanguard	Small-Cap Growth Index Fund Admiral Shares		963
*	Vanguard	Small-Cap Value Index Fund Admiral Shares		791
*	Vanguard	Strategic Equity Fund Investor Shares		39,649
*	Vanguard	Tax-Managed Small Cap Fund Admiral Shares		15,345
*	Vanguard	Total Bond Market Index Fund Admiral Shares		33,837
*	Vanguard	Total International Stock Index Fund Admiral Shares		86,229
*	Vanguard	Total Stock Market Index Fund Admiral Shares		147,741
*	Vanguard	Wellesley Income Fund Admiral		319,954
*	Victory Sycamore	Established Value Fund Class I		47,147
*	Virtus	Virtus KAR Mid-Cap Core Fund		19,334
*	Virtus Zevenbergen	Virtus Zevenbergen Technology Fund Institutional		1,644
				<u>7,245,222</u>
	Insurance Company General Accounts:			
*	Nationwide	Fixed Select Accounts		680,207
	Notes Receivable from Participants:			
*	Participant loans	Interest at 4.25% to 9.50%, due through 2028	-0-	<u>128,971</u>
				<u>\$ 8,054,400</u>

* Party-in-interest.

** Cost information has been omitted for participant directed assets.

Toyota of Vancouver 401(k) Profit Sharing Plan
(II) Schedule H, Line 4a – Schedule of Delinquent Participant Contributions
EIN: 91-1180183 / Plan Number: 002
For the Year Ended December 31, 2023

Participant Contributions Transferred Late to Plan	Total That Constitutes Nonexempt Prohibited Transactions			Contributions Pending Correction In VFCP	Total Fully Corrected Under VFCP and PTE 2002-51
	Contributions Not Corrected	Contributions Corrected Outside VFCP			
Late remittance of participant contributions	\$ -	\$ 533,442		\$ -	\$ -

Check here if late participant loan
repayments are included: ☒

Schedule H/I, Line 4a
Schedule of Delinquent Participant Contributions

Name of Plan:

► Toyota of Vancouver 401(k) Profit Sharing Plan

Employer Identification No.: ► 91-1180183

Plan year (beginning/ending):▶ 1/1/2023 - 12/31/2023 Plan number:▶ 002

[illegible]

TOYOTA OF VANCOUVER 401(K) PROFIT SHARING PLAN
EIN 91-1180183 PLAN 002
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR
December 31, 2023
ATTACHMENT TO SCHEDULE H, PART IV, LINE 4i

(a)	(b) Identity of Issue	(c) Descriptions of Investment	(d) ** Cost	(e) Current Value
	Alliance Bernstein	AB Large Cap Growth Fund I	\$ 0	\$ 60,754
	Alliance Bernstein	AB Global Bond Fund I	0	139,858
	Allspring	Special Small Cap Value Fund - Class Inst	0	61,911
	Amana Mutual Funds	Trust Growth Fund	0	1,656
	American Beacon	International Equity Fund Institutional Class	0	13,661
	American Century	American Century Short Duration R5	0	29,492
	American Funds	2015 Target Date Retirement Fund R6	0	88
	American Funds	2020 Target Date Retirement Fund R6	0	89,900
	American Funds	2025 Target Date Retirement Fund R6	0	4,967
	American Funds	2030 Target Date Retirement Fund R6	0	7,639
	American Funds	2035 Target Date Retirement Fund R6	0	33,302
	American Funds	2040 Target Date Retirement Fund R6	0	15,639
	American Funds	2045 Target Date Retirement Fund R6	0	66,634
	American Funds	2050 Target Date Retirement Fund R6	0	308,149
	American Funds	2055 Target Date Retirement Fund R6	0	41,825
	American Funds	2060 Target Date Retirement Fund R6	0	68,254
	American Funds	2065 Target Date Retirement Fund R6	0	3,014
	AMG Funds	AMG Yacktman Fund	0	1,396
	Avantis	Avantis US Small Cap Value Inst	0	97,355
	Avantis	Avantis US Large Cap Value Inst	0	312,375
	Baron Growth	Baron Growth Fund Institutional Shares	0	1,412
	BlackRock	iShares S&P 500 Index Fund Class K	0	76,153
	BlackRock	iShares Russell Mid-Cap Index Fund Class K	0	1,208
	BlackRock	Strategic Income Opportunities Fund	0	26,295
	BlackRock	Total Return Fund Class K Shares	0	114,516
	BlackRock	MidCap Growth Equity Institutional Class	0	2,100
	BlackRock	High Yield Bond Fund K	0	216,778
	BNY Mellon	BNY Mellon Small/Mid Cap Growth Fund	0	1,177
	Carillon Eagle	Carillon Eagle Mid Cap Growth I	0	1,390
	Cohen & Steers	Cohen & Steers Real Estate Securities I	0	1,122
	Columbia Contrarian	Core Fund Institutional 3 Class	0	2,926
	Columbia Select	Large Cap Growth Fund Institutional 2 Class	0	17,347
	Delaware	Delaware Small Cap Core I	0	1,319
	DFA	Global Real Estate Securities Portfolio	0	12,447
	DFA	U.S. Targeted Value Institutional Class	0	8,630
	DFA	U.S. Large Cap Value Portfolio Institutional Class	0	28,103
	DFA	Emerging Markets Core Equity I	0	284,452
	Diamond Hill	Diamond Hill MidCap I	0	174,788
	Dodge Cox	Dodge Cox Institutional Stock I	0	349,056
	Eventide Gilead	Eventide Gilead Class I	0	1,285
	Federated	Government Obligations Fund	0	24,279
	Federated	Institutional High Yield Bond Fund Institutional Shares	0	45,024
	Fidelity	U.S. Bond Index Fund	0	306,827
	Fidelity	International Index Fund	0	333,607
	Fidelity	500 Index Fund	0	544,154
	Franklin	Franklin Utilities Fund Advisor Class	0	548
	Franklin Templeton	Global Bond Fund R6	0	7,946
	Frost	Frost Total Return Bond Fund International	0	15,494
	Glenmede Quant	US Large Cap Gr Eq Instl	0	817
	GoldmanSachs	Goldman Sachs GQG Partners Instl Opportunities Fund R6	0	354,897
	Guggenheim	Total Return Bond Fund Institutional Class	0	28,898
	Harbor International	Growth Fund Institutional	0	12,116
	Invesco	Invesco Nasdaq 100 Index Fund Class R6	0	9,804
	Janus Henderson	Triton Fund Class N	0	17,823
	JP Morgan	Small Cap Equity Fund Class R5	0	48,447
	JP Morgan	Large Cap Equity Fund Grade R6	0	272,233
	JP Morgan	Equity Income Fund Class R5	0	295,858
	MFS	Mid Cap Growth Fund Class R6	0	167,042
*	Nationwide	Loomis All Cap Gr R6	0	331,806
	Nuveen Symphony	High Yield Income I	0	16,829
	PGIM Funds	Total Return Bond Fund -Class R6	0	229,788
	PIMCO	Commodity Real Return Strategy Fund Inst Class	0	156,798
	PIMCO	Real Return Fund Institutional Class	0	163,507
	PIMCO	StocksPLUS International Fund Institutional Class	0	20,430

TOYOTA OF VANCOUVER 401(K) PROFIT SHARING PLAN
EIN 91-1180183 PLAN 002
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR
December 31, 2023
ATTACHMENT TO SCHEDULE H, PART IV, LINE 4i

(a)	(b)	(c)	(d)	(e)
Identity of	Issue	Descriptions of Investment	** Cost	Current Value
	PIMCO	Long-Term Credit Bond Fund	0	2,692
	Principal	Real Estate Securities Fund	0	7,737
	Principal	Global Real Estate R6	0	191,511
	TIAA	TIAA-CREF Large-Cap Value Index Fund Institutional CI	0	1,797
	TIAA	TIAA-CREF Large-Cap Growth Index Fund Institutional CI	0	76,542
	Vanguard	Developed Markets Index Fund	0	691
	Vanguard	Equity-Income Fund Admiral Shares	0	11,389
	Vanguard	Explorer Fund Admiral Shares	0	105,639
	Vanguard	GNMA Fund Admiral Shares	0	20,945
	Vanguard	Health Care Index Admiral Shares	0	8,945
	Vanguard	Information Technology Index Fund Admiral Shares	0	8,157
	Vanguard	Intermediate-Term Treasury Index Fund Admiral Shares	0	11,196
	Vanguard	Mid-Cap Value Index Fund Admiral Shares	0	2
	Vanguard	Small-Cap Growth Index Fund Admiral Shares	0	963
	Vanguard	Small-Cap Value Index Fund Admiral Shares	0	791
	Vanguard	Strategic Equity Fund Investor Shares	0	39,649
	Vanguard	Tax-Managed Small Cap Fund Admiral Shares	0	15,345
	Vanguard	Total Bond Market Index Fund Admiral Shares	0	33,837
	Vanguard	Total International Stock Index Fund Admiral Shares	0	86,229
	Vanguard	Total Stock Market Index Fund Admiral Shares	0	147,741
	Vanguard	Wellesley Income Fund Admiral	0	319,954
	Victory Sycamore	Established Value Fund Class I	0	47,147
	Virtus	Virtus KAR Mid-Cap Core R6	0	19,334
	Virtus	Virtus Zevenbergen Technology Fund Institutional	0	1,644
		Subtotal	0	7,245,222
*	Nationwide	Fixed Select Option		680,207
	Nationwide	Participant Loans - interest: 4.25% - 9.50% maturity date range: 2024 to 2028	0	128,971
		Total Investments	\$ 0	\$ 8,054,400

*Party-in-Interest

**Historical cost is omitted under ERISA regulations as these investments are participant directed.