

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

2024

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Part I Annual Report Identification Information

For calendar plan year 2024 or fiscal plan year beginning 04/01/2024 and ending 03/31/2025

- A This return/report is for: a multiemployer plan, a multiple-employer plan, a single-employer plan, a DFE, etc.
B This return/report is: the first return/report, the final return/report, an amended return/report, a short plan year return/report, etc.
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, etc.
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: ILLINOIS AUTO TRUCK CO., INC. PROFIT SHARING & SAVINGS PLAN
1b Three-digit plan number (PN): 001
1c Effective date of plan: 04/01/1988
2a Plan sponsor's name, mailing address, city or town, state or province, country, and ZIP or foreign postal code.
2b Employer Identification Number (EIN): 36-2510691
2c Plan Sponsor's telephone number: 847-299-1100
2d Business code (see instructions): 336100

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.

Table with 4 columns: SIGN HERE, Signature, Date, and Name. Rows for plan administrator, employer/plan sponsor, and DFE.

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Form 5500 (2024) v. 240311

3a Plan administrator's name and address <input checked="" type="checkbox"/> 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	159
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)	65
	6a(2)	65
	6b	111
	6c	
	6d	176
	6e	
	6f	176
	6g(1)	159
6g(2)	176	
6h		
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 2H 2J 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)	9b Plan benefit arrangement (check all that apply)
(1) <input checked="" type="checkbox"/> Insurance	(1) <input checked="" type="checkbox"/> Insurance
(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts	(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts
(3) <input checked="" type="checkbox"/> Trust	(3) <input checked="" type="checkbox"/> Trust
(4) <input type="checkbox"/> General assets of the sponsor	(4) <input type="checkbox"/> General assets of the sponsor

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

a Pension Schedules	b General Schedules
(1) <input checked="" type="checkbox"/> R (Retirement Plan Information)	(1) <input checked="" type="checkbox"/> H (Financial Information)
(2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) <input type="checkbox"/> I (Financial Information – Small Plan)
(3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(3) <input checked="" type="checkbox"/> A (Insurance Information) – Number Attached <u>1</u>
(4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____	(4) <input checked="" type="checkbox"/> C (Service Provider Information)
(5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)	(5) <input checked="" type="checkbox"/> D (DFE/Participating Plan Information)
	(6) <input type="checkbox"/> 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 2024 Form M-1 annual report. If the plan was not required to file the 2024 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

2024

This Form is Open to Public Inspection

For calendar plan year 2024 or fiscal plan year beginning **04/01/2024** and ending **03/31/2025**

A Name of plan ILLINOIS AUTO TRUCK CO., INC. PROFIT SHARING & SAVINGS PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 ILLINOIS AUTO TRUCK CO., INC.	D Employer Identification Number (EIN) 36-2510691

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.

1 Coverage Information:

(a) Name of insurance carrier
JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)

(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
01-0233346	65838	109247	158	04/01/2024	03/31/2025

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 0	(b) Total amount of fees paid 10
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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
PENSION ADVISORS GROUP LTD. 175 E. HAWTHORN PKWY, STE 141
VERNON HILLS, IL 60061

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
	10		3

(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
	(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	

(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.
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4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	6510313

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. Specify nature of costs ▶	6d	

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	
c Additions: (1) Contributions deposited during the year	7c(1)	
	7c(2)	
	7c(3)	
	7c(4)	
	7c(5)	
	7c(6)	0
d Total of balance and additions (add lines 7b and 7c(6))	7d	
e Deductions: (1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	
	7e(2)	
	7e(3)	
	7e(4)	
	7e(5)	0
f Balance at the end of the current year (subtract line 7e(5) from line 7d).....	7f	

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)
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)
	(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)
	(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> 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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning **04/01/2024** and ending **03/31/2025**

A Name of plan ILLINOIS AUTO TRUCK CO., INC. PROFIT SHARING & SAVINGS PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 ILLINOIS AUTO TRUCK CO., INC.	D Employer Identification Number (EIN) 36-2510691	

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)..... Yes No

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

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

JOHN HANCOCK LIFE INS. CO. (U.S.A.)

01-0233346

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

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

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

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

(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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 <hr/> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning 04/01/2024 and ending 03/31/2025

A Name of plan <u>ILLINOIS AUTO TRUCK CO., INC. PROFIT SHARING & SAVINGS PLAN</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>ILLINOIS AUTO TRUCK CO., INC.</u>	D Employer Identification Number (EIN) <u>36-2510691</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: JOHN HANCOCK SUB ACCOUNTS

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN <u>01-0233346-001</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>6510313</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

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

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

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

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

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

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

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

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

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

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

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

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

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 04/01/2024 and ending 03/31/2025	
A Name of plan ILLINOIS AUTO TRUCK CO., INC. PROFIT SHARING & SAVINGS PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 ILLINOIS AUTO TRUCK CO., INC.	D Employer Identification Number (EIN) 36-2510691

Part I	Asset and Liability Statement
---------------	--------------------------------------

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

		(a) Beginning of Year	(b) End of Year
Assets			
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	105424	100953
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	10332	
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	46607	72955
(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)	967278	953742
(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)		
(8) Participant loans	1c(8)	38896	50011
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	6083599	6510313
(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)	3554425	2611565
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(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	10806561	10299539
Liabilities			
g Benefit claims payable.....	1g	9216	9595
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	9216	9595
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	10797345	10289944

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)	100953	
(B) Participants.....	2a(1)(B)	117539	
(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)		218492
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)	3450	
(F) Other.....	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		3450
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)	130484	
(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)		130484
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	2293910	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	2220197	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		73713
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	57543	
(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)		366383
(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)		
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		850065

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	1272557	
(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)		1272557
f Corrective distributions (see instructions)	2f		
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)	84909	
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)		
(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)		
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		84909
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		1357466

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-507401
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: GIMBEL ABRAMS + SINGER LLP

(2) EIN: 36-3663184

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.)		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
e Was this plan covered by a fidelity bond?	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.		X	

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? Yes No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

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

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

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

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

SCHEDULE R (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning 04/01/2024 and ending 03/31/2025

A Name of plan <u>ILLINOIS AUTO TRUCK CO., INC. PROFIT SHARING & SAVINGS PLAN</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>ILLINOIS AUTO TRUCK CO., INC.</u>	D Employer Identification Number (EIN) <u>36-2510691</u>	

Part I	Distributions
---------------	----------------------

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

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

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
 EIN(s): 01-0233346

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

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

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?..... Yes No N/A
If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____
If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a	
b Enter the amount contributed by the employer to the plan for this plan year	6b	
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c	

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

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

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

Part III	Amendments
-----------------	-------------------

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (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: <input type="checkbox"/> last contributing employer <input type="checkbox"/> alternative <input type="checkbox"/> reasonable approximation (see instructions for required attachment).....	14a	
b The plan year immediately preceding the current plan year. <input type="checkbox"/> Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....	14b	
c The second preceding plan year. <input type="checkbox"/> Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....	14c	

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

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

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

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

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

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

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

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

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 ___/___/____ (MM/DD/YYYY) and the Opinion Letter serial number _____.

**ILLINOIS AUTO TRUCK CO., INC.
PROFIT SHARING AND SAVINGS PLAN
AND TRUST**

FINANCIAL STATEMENTS

YEAR ENDED MARCH 31, 2025

ILLINOIS AUTO TRUCK CO., INC.
PROFIT SHARING AND SAVINGS PLAN AND TRUST

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G I M B E L A B R A M S + S I N G E R

Certified Public Accountants

10 South Riverside Plaza, Chicago, Illinois 60606

312.782.1010 FAX 312.782.6574

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INDEPENDENT AUDITOR'S REPORT

Trustee

Illinois Auto Truck Co., Inc. Profit Sharing and Savings Plan and Trust

Opinion

We have audited the accompanying financial statements of Illinois Auto Truck Co., Inc. Profit Sharing and Savings Plan and Trust, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of March 31, 2025 and 2024, and the related statement of changes in net assets available for benefits for the year ended March 31, 2025, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of Illinois Auto Truck Co., Inc. Profit Sharing and Savings Plan and Trust, as of March 31, 2025 and 2024, and the changes in its net assets available for benefits for the year ended March 31, 2025, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. 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 Illinois Auto Truck Co., Inc. Profit Sharing and Savings Plan and Trust, 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 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.

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 Illinois Auto Truck Co., Inc. Profit Sharing and Savings Plan and Trust's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

Certified Public Accountants

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

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 generally accepted auditing standards 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.

In performing an audit in accordance with generally accepted auditing standards, 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 Illinois Auto Truck Co., Inc. Profit Sharing and Savings Plan and Trust'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 Illinois Auto Truck Co., Inc. Profit Sharing and Savings Plan and Trust's ability to continue as a going concern for a reasonable period of time.

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

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule of assets held for investment is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of

GIMBEL ABRAMS + SINGER LLP

Certified Public Accountants

management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the 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 generally accepted auditing standards.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, including its form and content, is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion, the information in the accompanying schedule is fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

Gimbel Abrams + Singer LLP

Chicago, Illinois

January 12, 2026

ILLINOIS AUTO TRUCK CO., INC.
PROFIT SHARING AND SAVINGS PLAN AND TRUST
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
MARCH 31, 2025 AND 2024

	<u>2025</u>	<u>2024</u>
ASSETS:		
EMPLOYER CONTRIBUTION RECEIVABLE	\$ 100,953	\$ 105,424
NOTES RECEIVABLE FROM PARTICIPANTS	50,011	38,896
DUE FROM BROKER FOR SECURITIES SOLD	-	10,332
INVESTMENTS IN SECURITIES:		
Money Market Funds	72,955	46,607
Corporate Equity Securities	953,742	967,278
Mutual and Exchange-Traded Funds	2,611,565	3,554,425
Self-Directed Investments in Pooled Separate Accounts and Stable Value Contract	<u>6,510,313</u>	<u>6,083,599</u>
TOTAL ASSETS	<u>10,299,539</u>	<u>10,806,561</u>
LIABILITIES:		
ACCOUNTS PAYABLE	<u>9,595</u>	<u>9,216</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 10,289,944</u>	<u>\$ 10,797,345</u>

SEE NOTES TO FINANCIAL STATEMENTS

ILLINOIS AUTO TRUCK CO., INC.
PROFIT SHARING AND SAVINGS PLAN AND TRUST
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED MARCH 31, 2025

ADDITIONS ATTRIBUTED TO:

Investment income:

Dividends and interest, net of foreign taxes	\$ 130,484	
Realized gain on investments	73,713	
Unrealized gain on investments	57,543	
Gain on self-directed investments in pooled separate accounts	<u>366,383</u>	
Total Investment Income		628,123

Contributions:

Employer	100,953	
Employee	<u>117,539</u>	
Total Contributions		218,492

Interest on notes receivable from participants		<u>3,450</u>
Total Additions		850,065

DEDUCTIONS ATTRIBUTED TO:

Administrative expense	84,909	
Benefits paid to participants	<u>1,272,557</u>	
Total Deductions		<u>(1,357,466)</u>

Net Decrease in Net Assets Available For Benefits		(507,401)
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NET ASSETS AVAILABLE FOR BENEFITS:

Beginning of year		<u>10,797,345</u>
End of year		<u>\$ 10,289,944</u>

SEE NOTES TO FINANCIAL STATEMENTS

ILLINOIS AUTO TRUCK CO., INC.
 PROFIT SHARING AND SAVINGS PLAN AND TRUST
 NOTES TO FINANCIAL STATEMENTS

NOTE 1 – DESCRIPTION OF PLAN:

The following description of the Illinois Auto Truck Co., Inc. (the Company) Profit Sharing and Savings Plan and Trust (the Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan’s provisions.

1. General. The Plan is a defined contribution plan covering all full-time employees of the Company who are twenty-one years of age or older. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Through March 31, 2001, the Plan allowed only employer discretionary contributions. Participant accounts were invested by the trustees in commingled investments. Effective April 1, 2001, the Plan was amended and restated to include a feature whereby participants could contribute amounts on a pretax basis in accordance with the provisions of Section 401(k) of the Internal Revenue Code. In addition, the Plan was amended to allow participants to self-direct contributions as described below. Participant accounts from prior to the Plan’s restatement continue to be invested by the trustee.

Employees are eligible to participate in the Plan upon completion of one year of service (defined as 1,000 hours of employment during the twelve consecutive month period beginning on the day employment commences). The Plan has two entry dates, April 1 and October 1. In addition, eligible employees have the option to make Roth Contributions to the Plan.

2. Contributions. Each year, participants may contribute up to the limits set by the Internal Revenue Code. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. Each year the Company will contribute 3% of each participant’s eligible compensation, as defined. This contribution is known as the Fixed Profit Sharing Contribution. In addition, the Company, at its discretion, may make additional contributions to the Plan pursuant to a nondiscriminatory formula permitted by the Internal Revenue Code. This additional contribution is known as the Discretionary Profit Sharing Contribution. The Company made a Fixed Profit Sharing Contribution of \$100,953 for the year ending March 31, 2025.
3. Participant Accounts. Each participant’s account is credited with the participant’s and Company contributions and allocations of Plan earnings. Allocations are based on participant earnings, account balances, or specific participant transactions, as defined. The Company pays substantially all administrative expenses. The benefit to which a participant is entitled is the benefit that can be provided from the participant’s vested account.
4. Vesting. Participants are immediately vested in their contributions and Fixed Profit Sharing Contributions plus actual earnings thereon. Participants are vested in Discretionary Profit Sharing Contributions as follows:

<u>Years of Service</u>	<u>Percentage of Account that is Vested</u>
Less than two years	0%
Two years, but less than three years	20%
Three years, but less than four years	40%
Four years, but less than five years	60%
Five years, but less than six years	80%
Six years or more	100%

ILLINOIS AUTO TRUCK CO., INC.
PROFIT SHARING AND SAVINGS PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS

NOTE 1 – DESCRIPTION OF PLAN: (continued)

5. Investment Options. Upon enrollment in the Plan, a participant may direct employee contributions and Fixed Profit Sharing Contributions in any of a number of investment options with varying investment strategies. Participants may change their investment options at any time.
6. Notes Receivable from Participants. Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50 percent of their vested account balances. The notes are secured by the balance in the participants' accounts and bear interest at rates commensurate with local prevailing rates as determined by the Plan administrator. Principal and interest are paid ratably through payroll deductions.
7. Payment of Benefits. Upon termination of service, a participant will receive a lump-sum amount equal to the value of the participant's vested interest in his or her account.
8. Forfeited Accounts. Forfeited nonvested accounts will be used to reduce future employer contributions. Outstanding forfeitures totaled \$2,604 and \$636 at March 31, 2025 and 2024, respectively.

NOTE 2 – SUMMARY OF ACCOUNTING POLICIES:

Basis of Accounting:

The financial statements of the Plan are prepared using the accrual method of accounting.

Estimates:

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the plan administrator 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 may differ from those estimates.

Cash and Cash Equivalents:

During the course of operations, the Plan maintains cash balances in excess of federal insurance limits.

Investment Valuation:

The Plan's 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.

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. Investment income 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 valued at their unpaid principal balance plus any accrued but unpaid interest. If a participant ceases to make loan repayments and the loan is deemed to be in default, the participant loan balance is reduced and a benefit payment is recorded. Interest income is recorded on the accrual basis. No allowance for credit losses has been recorded at March 31, 2025 and 2024.

ILLINOIS AUTO TRUCK CO., INC.
PROFIT SHARING AND SAVINGS PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS

NOTE 2 – SUMMARY OF ACCOUNTING POLICIES: (continued)

Expenses:

The Company absorbs the significant administrative expenses of the Plan.

Payment of Benefits:

Benefits are recorded when paid.

NOTE 3 – INVESTMENT CONTRACT WITH INSURANCE COMPANY:

The Plan has an investment contract with John Hancock Life Insurance Company (U.S.A) (John Hancock). John Hancock maintains plan contributions in individual participant accounts. The accounts are credited with earnings on the underlying investments and charged for Plan withdrawals.

Plan assets accumulated through March 31, 2001, are maintained in brokerage accounts with Merrill Lynch Wealth Management and B. Riley Wealth Management.

NOTE 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) and the lowest priority to unobservable inputs (level 3):

The three levels of the fair value hierarchy under FASB ASC 820 are described as follows.

1. Level 1: Inputs to the valuation methodology are unadjusted quoted prices for identical assets in active markets that the Plan has the ability to access.
2. Level 2: Inputs to the valuation methodology include:
 - quoted prices for similar assets or liabilities in active markets;
 - quoted prices for identical or similar assets or liabilities in inactive markets;
 - inputs other than quoted prices that are observable for the assets or liabilities;
 - 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.

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

The asset'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.

ILLINOIS AUTO TRUCK CO., INC.
 PROFIT SHARING AND SAVINGS PLAN AND TRUST
 NOTES TO FINANCIAL STATEMENTS

NOTE 4 – FAIR VALUE MEASUREMENTS: (continued)

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 March 31, 2025 and 2024.

Money Market Funds and Corporate Equity Securities:

The money market funds and corporate equity securities are based on quoted market prices and are deemed to be actively traded.

Mutual and Exchange-Traded Funds:

Mutual funds are valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the U.S. Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded. Exchange-Traded Funds are valued daily as reported by the fund and are measured at NAV.

Pooled Separate Accounts:

The pooled separate accounts are not actively traded and significant other observable inputs are available. Thus, the fair values of the pooled separate accounts are based on quoted values of the underlying mutual funds adjusted for various fees.

Stable Value Investment Contract:

The Stable Value Investment Contract is included in pooled separate accounts and is valued at NAV as a practical expedient, as determined by the managers of the trust. Participant transactions (purchases and sales) may occur daily. If the Plan initiates a full redemption of the contract, the investment adviser reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.

The following table sets forth, by level, within the fair value hierarchy, the Plan's assets at fair value as of March 31, 2025 and 2024:

	<u>Fair Value Measurements Using:</u>			
	<u>Total</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>
<u>March 31, 2025</u>				
Money market funds	\$ 72,955	\$ 72,955	\$ -	\$ -
Corporate equity securities	953,742	953,742	-	-
Mutual and exchange-traded funds	2,611,565	2,611,565	-	-
Pooled separate accounts	<u>6,413,458</u>	<u>-</u>	<u>6,413,458</u>	<u>-</u>
Total assets in the fair value hierarchy	10,051,720	<u>\$ 3,638,262</u>	<u>\$ 6,413,458</u>	<u>\$ -</u>
Stable Value Investment Contract	<u>96,855</u>			
Investments at fair value	<u>\$ 10,148,575</u>			

ILLINOIS AUTO TRUCK CO., INC.
PROFIT SHARING AND SAVINGS PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS

NOTE 4 – FAIR VALUE MEASUREMENTS: (continued)

	<u>Fair Value Measurements Using:</u>			
	<u>Total</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>
<u>March 31, 2024</u>				
Money market funds	\$ 46,607	\$ 46,607	\$ -	\$ -
Corporate equity securities	967,278	967,278	-	-
Mutual and exchange-traded funds	3,554,425	3,554,425	-	-
Pooled separate accounts	<u>5,991,291</u>	<u>-</u>	<u>5,991,291</u>	<u>-</u>
Total assets in the fair value hierarchy	10,559,601	<u>\$ 4,568,310</u>	<u>\$ 5,991,291</u>	<u>\$ -</u>
Stable Value Investment Contract	<u>92,308</u>			
Investments at fair value	<u>\$ 10,651,909</u>			

The Stable Value Investment Contract that was measured at NAV has not been classified in the fair value hierarchy. The fair value amounts presented in the tables above are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for benefits.

Gains and losses (realized and unrealized) from pooled separate accounts included in changes in net assets available for benefits for the year ended March 31, 2025 are reported as gain on self-directed investments.

NOTE 5 – NONPARTICIPANT-DIRECTED INVESTMENTS:

Information about the net assets and the significant components of the changes in net assets relating to the nonparticipant-directed investments are as follows:

	<u>March 31,</u>	
	<u>2025</u>	<u>2024</u>
Assets:		
Money market funds	\$ 72,955	\$ 46,607
Due from broker for securities sold	-	10,332
Corporate equity securities	953,742	967,278
Mutual and exchange-traded funds	<u>2,611,565</u>	<u>3,554,425</u>
Total assets	3,638,262	4,578,642
Accounts payable	<u>9,595</u>	<u>9,216</u>
Net Assets	<u>\$3,628,667</u>	<u>\$4,569,426</u>

ILLINOIS AUTO TRUCK CO., INC.
PROFIT SHARING AND SAVINGS PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS

NOTE 5 – NONPARTICIPANT-DIRECTED INVESTMENTS: (continued)

		Year Ended March 31, 2025
Changes in Net Assets:		
Investment income:		
Dividends and interest, net of foreign taxes	\$ 130,484	
Realized gain on investments	73,713	
Unrealized gain on investments	<u>57,543</u>	
Total Investment Income		\$ 261,740
Deductions:		
Administrative expense	38,085	
Benefits paid to participants	<u>1,164,414</u>	
Total Deductions		<u>(1,202,499)</u>
Net Decrease in Net Assets Available for Benefits		\$ <u>(940,759)</u>

NOTE 6 – PLAN TERMINATION:

Although it has not expressed any intent to do so, the Company has the right to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will receive 100 percent of the value in their accounts.

NOTE 7 – TAX STATUS:

The Internal Revenue Service has determined and informed the Company that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, 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, believe the Plan is qualified, and the related trust is tax-exempt.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not, would not be sustained upon examination by the Internal Revenue Service. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that, as of March 31, 2025, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements.

The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years ending prior to 2022.

ILLINOIS AUTO TRUCK CO., INC.
PROFIT SHARING AND SAVINGS PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS

NOTE 8 – RISKS AND UNCERTAINTIES:

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is 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 statements of net assets available for benefits.

NOTE 9 – RELATED PARTY TRANSACTIONS:

Certain Plan investments are pooled separate accounts managed by John Hancock and, therefore, these balances and transactions qualify as party-in-interest transactions. Fees paid by the Plan for investment management services to parties-in-interest amounted to \$46,823 for the year ended March 31, 2025.

NOTE 10 – SUBSEQUENT EVENTS:

Management has evaluated subsequent events through January 12, 2026 the date the financial statements were available to be issued.

SUPPLEMENTARY INFORMATION

ILLINOIS AUTO TRUCK CO., INC. PROFIT SHARING AND SAVINGS PLAN AND TRUST
SCHEDULE OF ASSETS HELD FOR INVESTMENT
MARCH 31, 2025

Schedule H, line 4i - Schedule of Assets (Held At End of Year)

Plan Name: Illinois Auto Truck Co., Inc. Profit Sharing and Savings Plan and Trust
FEIN No: 36-2510691
Plan Number: 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including rate of interest, collateral, par, or maturity date	(d) Cost	(e) Current Value
	Abbvie Inc	108 shares of common stock	\$ 20,498	\$ 22,628
	Agnico Eagle Mines Ltd	87 shares of common stock	5,512	9,432
	Alphabet Inc CL A	176 shares of common stock	17,516	27,217
	Amazon.com Inc	109 shares of common stock	8,155	20,738
	Amphenol Corp Cl A	222 shares of common stock	11,255	14,561
	Apple Inc	243 shares of common stock	37,362	53,978
	Bank New York Mellon Corp	95 shares of common stock	8,306	7,968
	Blackrock Inc	17 shares of common stock	11,059	16,090
	Blackrock Total Inc + Real Estate	258.81 shares of common stock	23,079	6,685
	Boston Scientific Corp	228 shares of common stock	10,034	23,001
	Broadcom Inc	97 shares of common stock	3,871	16,241
	Cencora Inc	32 shares of common stock	7,540	8,899
	CIM Real Estate Finance Trust Inc (fka Cole Cr Property Tr IV Inc)	13,420.42 shares of common stock	122,196	70,055
	ConocoPhillips	43 shares of common stock	3,713	4,516
	Costco Wholesale Corp	23 shares of common stock	9,010	21,753
	Eli Lilly & Co	25 shares of common stock	14,023	20,648
	Entergy Corp	168 shares of common stock	10,999	14,362
	Exxon Mobil Corp	214 shares of common stock	23,868	25,451
	Ferrari NV	25 shares of common stock	7,570	10,697
	Franklin BSP Capital Corp (fka Franklin BSP Lending Corp)	3,618.54 shares of common stock	71,945	51,021
	Hilton Worldwide Holdings Inc	52 shares of common stock	7,690	11,833
	Home Depot Inc	40 shares of common stock	12,083	14,660
	Honeywell International Inc	35 shares of common stock	7,216	7,411
	Howmet Aerospace Inc	101 shares of common stock	5,587	13,103
	Intercontinental Exchange Inc	81 shares of common stock	12,519	13,973
	J.P. Morgan Chase & Co	109 shares of common stock	14,906	26,738
	Johnson Controls International	151 shares of common stock	11,519	12,097
	Live Nation Entertainment Inc	30 shares of common stock	4,200	3,917
	Martin Marietta Materials	16 shares of common stock	9,655	7,650
	McDonalds Corp	29 shares of common stock	7,796	9,059
	Microsoft Corp	132 shares of common stock	32,832	49,551
	MSC Income Fund Inc (fka HMS Income Fd)	1,785.06 shares of common stock	29,851	29,400
	National Healthcare Properties Inc (fka Healthcare Trust Inc)	978.61 shares of common stock	92,884	31,462
	Netflix com Inc	18 shares of common stock	5,528	16,786
	Nvidia	386 shares of common stock	11,134	41,835
	Palo Alto Networks Inc	68 shares of common stock	7,439	11,604
	Parker-Hannifin Corp	34 shares of common stock	10,647	20,667
	Polypid Ltd	3,909 shares of common stock	45,157	1,798
	Procter & Gamble Co	91 shares of common stock	13,789	15,508
	Progressive Corp Ohio	60 shares of common stock	6,080	16,981
	Prologis Inc	95 shares of common stock	10,952	10,620
	Ross Stores Inc	82 shares of common stock	10,609	10,479
	S&P Global Inc	38 shares of common stock	15,947	19,308
	Schlumberger Ltd	91 shares of common stock	4,540	3,804
	ServiceNow Inc	16 shares of common stock	6,738	12,738
	Tesla Inc	28 shares of common stock	7,475	7,256
	Union Pacific Corp	31 shares of common stock	4,481	7,323
	United Rentals Inc	14 shares of common stock	5,861	8,774
	Visa Inc Cl A	79 shares of common stock	17,419	27,686
	Walmart Inc	264 shares of common stock	13,707	23,177
	Welltower Inc	87 shares of common stock	7,088	13,329
	Western Digital Corp	180 shares of common stock	9,178	9,277
	WT 8.27 Medicenna Therapeutics (right to purchase)	25,000 shares of common stock	250	-
	Baird Core Plus Bond Fund	43,410 shares of exchange-traded fund	451,096	441,480
	Comm Services Select Sector	325 shares of exchange-traded fund	7,656	31,346
	Consumer Discretionary Spdr	155 shares of exchange-traded fund	360	30,606
	Fidelity MSCI Utilities Index	113 shares of exchange-traded fund	5,680	5,757
	First Trust Cloud Computing ETF	56 shares of exchange-traded fund	2,246	5,725
	Global X Funds Shs US Infrastructure DevFd ETF	183 shares of exchange-traded fund	4,921	6,905
	Health Care Select Spdr	205 shares of exchange-traded fund	3,359	29,932
	Invesco Aerospace and Defense ETF	61 shares of exchange-traded fund	6,791	7,110
	Invesco Emerging Mkts Sovereign Debt ETF	379 shares of exchange-traded fund	13,521	7,644
	Invesco KBW Bank ETF	170 shares of exchange-traded fund	8,816	10,671
	Invesco Preferred ETF	714 shares of exchange-traded fund	10,001	8,011
	Ishares 20+ Year Treasury Bond ETF	585 shares of exchange-traded fund	63,526	53,753
	Ishares Biotechnology ETF	46 shares of exchange-traded fund	3,773	5,883
	Ishares Core U.S. Aggregate Bond ETF	3,029 shares of exchange-traded fund	291,744	299,629
	Ishares Edge MSCI Min Vol Emerging Markets ETF	221 shares of exchange-traded fund	15,446	12,893
	Ishares Inc Core MSCI Emerging Markets ETF	2,629 shares of exchange-traded fund	140,502	141,887
	Ishares Inc Core MSCI Emerging Mkts ETF	707 shares of exchange-traded fund	32,456	38,157
	Ishares MBS ETF	991 shares of exchange-traded fund	107,868	92,936
	Ishares Russell 2000 Growth	276 shares of exchange-traded fund	66,544	70,526
	Ishares Russell 2000 Value	472 shares of exchange-traded fund	68,462	71,263
	Ishares Tips Bond ETF	105 shares of exchange-traded fund	10,932	11,664

ILLINOIS AUTO TRUCK CO., INC. PROFIT SHARING AND SAVINGS PLAN AND TRUST
SCHEDULE OF ASSETS HELD FOR INVESTMENT
MARCH 31, 2025

Schedule H, line 4i - Schedule of Assets (Held At End of Year)

Plan Name: Illinois Auto Truck Co., Inc. Profit Sharing and Savings Plan and Trust
FEIN No: 36-2510691
Plan Number: 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including rate of interest, collateral, par, or maturity date	(d) Cost	(e) Current Value
	Ishares Tr Core MSCI Eaf ETF	1,602 shares of exchange-traded fund	111,940	121,191
	Ishares Tr Core MSCI International Developed Mkts	3,766 shares of exchange-traded fund	230,844	259,440
	Ishares Tr US Infrastructure ETF	126 shares of exchange-traded fund	4,426	5,679
	Ishares U.S. Home Construction ETF	79 shares of exchange-traded fund	8,350	7,522
	Ishares USD High Yield Corporate Bond ETF	1,294 shares of exchange-traded fund	47,451	47,632
	Materials Select Sector Spdr Fund	48 shares of exchange-traded fund	1,655	4,127
	Pacer Data & Infrastructure Real Estate ETF (fka Pacer Benchmark Data and Infrastructure)	47 shares of exchange-traded fund	2,233	1,379
	PIMCO International Bond Fund	7,252 shares of exchange-traded fund	68,771	71,432
	Real Estate Select Sector Spdr Fd Shs	143 shares of exchange-traded fund	6,287	5,985
	Schwab Short-Term U.S. Treasury ETF	1,374 shares of exchange-traded fund	33,894	33,443
	Sector Spdr Consumers STPL	194 shares of exchange-traded fund	5,863	15,844
	Sector Spdr Energy	87 shares of exchange-traded fund	6,417	8,130
	Sector Spdr Industrial	106 shares of exchange-traded fund	(8,144)	13,893
	Spdr Portfolio High Yield Bond ETF	1,093 shares of exchange-traded fund	25,489	25,598
	Vaneck Semiconductors ETF	96 shares of exchange-traded fund	15,349	20,301
	Vanguard Financials ETF	360 shares of exchange-traded fund	15,201	43,009
	Vanguard Information Tech ETF	135 shares of exchange-traded fund	(18,251)	73,221
	Vanguard Intermediate Term Corp Bond (Scottsdale Fds)	962 shares of exchange-traded fund	83,241	78,653
	Vanguard Intermediate Term Government Bond ETF	783 shares of exchange-traded fund	45,759	46,510
	Vanguard Russell 1000 Growth	503 shares of exchange-traded fund	37,805	46,673
	Vanguard Russell 1000 Value	1,767 shares of exchange-traded fund	119,986	145,848
	Vanguard Short Term Corporate Bond	993 shares of exchange-traded fund	79,994	78,387
	Vanguard Small Cap	254 shares of exchange-traded fund	41,490	56,325
	Vanguard Total International Bond ETF	370 shares of exchange-traded fund	17,678	18,063
	Vanguard Target Retirement Income	Vanguard Target Retirement Income		5,346
	Vanguard Target Retirement 2025	Vanguard Target Retirement 2025		66,815
	Vanguard Target Retirement 2035	Vanguard Target Retirement 2035		43,142
	Vanguard Target Retirement 2040	Vanguard Target Retirement 2040		62,803
	Vanguard Target Retirement 2045	Vanguard Target Retirement 2045		36,205
	Vanguard Target Retirement 2050	Vanguard Target Retirement 2050		37,265
	Vanguard Target Retirement 2055	Vanguard Target Retirement 2055		18,703
	Vanguard Target Retirement 2060	Vanguard Target Retirement 2060		6,321
	Vanguard Target Retirement 2065	Vanguard Target Retirement 2065		11,490
**	John Hancock Multimanager Conservative Lifestyle Portfolio	John Hancock Multimanager Conservative Lifestyle Portfolio		43,760
**	John Hancock Multimanager Balanced Lifestyle Portfolio	John Hancock Multimanager Balanced Lifestyle Portfolio		2,855
**	John Hancock Multimanager Growth Lifestyle Portfolio	John Hancock Multimanager Growth Lifestyle Portfolio		136,754
**	John Hancock Multimanager Aggressive Lifestyle Portfolio	John Hancock Multimanager Aggressive Lifestyle Portfolio		150,488
**	John Hancock Stable Value Fund	John Hancock Stable Value Fund		96,855
	Templeton Global Bond Fund	Templeton Global Bond Fund		9,274
	Strategic Income Opportunities Fund	Strategic Income Opportunities Fund		74,937
**	John Hancock Bond Fund	John Hancock Bond Fund		190,467
	American Funds U.S. Government Money Market Fund Class F-2	American Funds U.S. Government Money Market Fund Class F-2		33,085
	Vanguard Balanced Index Fund	Vanguard Balanced Index Fund		62,032
	BlackRock Global Allocation Fund	BlackRock Global Allocation Fund		751,206
	MFS Massachusetts Investors Fund	MFS Massachusetts Investors Fund		2,621,422
**	John Hancock Disciplined Value Fund	John Hancock Disciplined Value Fund		34,299
	International Equity Index Fund	International Equity Index Fund		12,228
	American Funds Washington Mutual Investors Fund Class A	American Funds Washington Mutual Investors Fund Class A		1,509,305
	New Perspective Fund	New Perspective Fund		48,787
	American Funds Capital World Growth and Income Fund Class F-2	American Funds Capital World Growth and Income Fund Class F-2		69,965
	500 Index Fund	500 Index Fund		102,709
	Vanguard Small Cap Value Index Fund	Vanguard Small Cap Value Index Fund		10,189
	Vanguard Growth Index Fund	Vanguard Growth Index Fund		47,719
	Small Cap Index Fund	Small Cap Index Fund		54,493
	Mid Cap Index Fund	Mid Cap Index Fund		159,397
	Merrill Lynch Money Market	42,901 shares of money market	42,901	42,901
	B. Riley Wealth Management Money Market	30,053 shares of money market	30,053	30,053
*	Participant loans	8.5% to 9.5%	-	50,011
				<u>\$ 10,198,586</u>
**	Party-in-interest			

ILLINOIS AUTO TRUCK CO., INC. PROFIT SHARING AND SAVINGS PLAN AND TRUST
SCHEDULE OF ASSETS HELD FOR INVESTMENT
MARCH 31, 2025

Schedule H, line 4i - Schedule of Assets (Held At End of Year)

Plan Name: Illinois Auto Truck Co., Inc. Profit Sharing and Savings Plan and Trust
FEIN No: 36-2510691
Plan Number: 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including rate of interest, collateral, par, or maturity date	(d) Cost	(e) Current Value
	Abbvie Inc	108 shares of common stock	\$ 20,498	\$ 22,628
	Agnico Eagle Mines Ltd	87 shares of common stock	5,512	9,432
	Alphabet Inc CL A	176 shares of common stock	17,516	27,217
	Amazon.com Inc	109 shares of common stock	8,155	20,738
	Amphenol Corp Cl A	222 shares of common stock	11,255	14,561
	Apple Inc	243 shares of common stock	37,362	53,978
	Bank New York Mellon Corp	95 shares of common stock	8,306	7,968
	Blackrock Inc	17 shares of common stock	11,059	16,090
	Bluerock Total Inc + Real Estate	258.81 shares of common stock	23,079	6,685
	Boston Scientific Corp	228 shares of common stock	10,034	23,001
	Broadcom Inc	97 shares of common stock	3,871	16,241
	Cencora Inc	32 shares of common stock	7,540	8,899
	CIM Real Estate Finance Trust Inc (fka Cole Cr Property Tr IV Inc)	13,420.42 shares of common stock	122,196	70,055
	ConocoPhillips	43 shares of common stock	3,713	4,516
	Costco Wholesale Corp	23 shares of common stock	9,010	21,753
	Eli Lilly & Co	25 shares of common stock	14,023	20,648
	Entergy Corp	168 shares of common stock	10,999	14,362
	Exxon Mobil Corp	214 shares of common stock	23,868	25,451
	Ferrari NV	25 shares of common stock	7,570	10,697
	Franklin BSP Capital Corp (fka Franklin BSP Lending Corp)	3,618.54 shares of common stock	71,945	51,021
	Hilton Worldwide Holdings Inc	52 shares of common stock	7,690	11,833
	Home Depot Inc	40 shares of common stock	12,083	14,660
	Honeywell International Inc	35 shares of common stock	7,216	7,411
	Howmet Aerospace Inc	101 shares of common stock	5,587	13,103
	Intercontinental Exchange Inc	81 shares of common stock	12,519	13,973
	J.P. Morgan Chase & Co	109 shares of common stock	14,906	26,738
	Johnson Controls International	151 shares of common stock	11,519	12,097
	Live Nation Entertainment Inc	30 shares of common stock	4,200	3,917
	Martin Marietta Materials	16 shares of common stock	9,655	7,650
	McDonalds Corp	29 shares of common stock	7,796	9,059
	Microsoft Corp	132 shares of common stock	32,832	49,551
	MSC Income Fund Inc (fka HMS Income Fd)	1,785.06 shares of common stock	29,851	29,400
	National Healthcare Properties Inc (fka Healthcare Trust Inc)	978.61 shares of common stock	92,884	31,462
	Netflix com Inc	18 shares of common stock	5,528	16,786
	Nvidia	386 shares of common stock	11,134	41,835
	Palo Alto Networks Inc	68 shares of common stock	7,439	11,604
	Parker-Hannifin Corp	34 shares of common stock	10,647	20,667
	Polypid Ltd	3,909 shares of common stock	45,157	1,798
	Procter & Gamble Co	91 shares of common stock	13,789	15,508
	Progressive Corp Ohio	60 shares of common stock	6,080	16,981
	Prologis Inc	95 shares of common stock	10,952	10,620
	Ross Stores Inc	82 shares of common stock	10,609	10,479
	S&P Global Inc	38 shares of common stock	15,947	19,308
	Schlumberger Ltd	91 shares of common stock	4,540	3,804
	ServiceNow Inc	16 shares of common stock	6,738	12,738
	Tesla Inc	28 shares of common stock	7,475	7,256
	Union Pacific Corp	31 shares of common stock	4,481	7,323
	United Rentals Inc	14 shares of common stock	5,861	8,774
	Visa Inc Cl A	79 shares of common stock	17,419	27,686
	Walmart Inc	264 shares of common stock	13,707	23,177
	Welltower Inc	87 shares of common stock	7,088	13,329
	Western Digital Corp	180 shares of common stock	9,178	7,277
	WT 8.27 Medicenna Therapeutics (right to purchase)	25,000 shares of common stock	250	-
	Baird Core Plus Bond Fund	43,410 shares of exchange-traded fund	451,096	441,480
	Comm Services Select Sector	325 shares of exchange-traded fund	7,656	31,346
	Consumer Discretionary Spdr	155 shares of exchange-traded fund	360	30,606
	Fidelity MSCI Utilities Index	113 shares of exchange-traded fund	5,680	5,757
	First Trust Cloud Computing ETF	56 shares of exchange-traded fund	2,246	5,725
	Global X Funds Shs US Infrastructure DevFd ETF	183 shares of exchange-traded fund	4,921	6,905
	Health Care Select Spdr	205 shares of exchange-traded fund	3,359	29,932
	Invesco Aerospace and Defense ETF	61 shares of exchange-traded fund	6,791	7,110
	Invesco Emerging Mkts Sovereign Debt ETF	379 shares of exchange-traded fund	13,521	7,644
	Invesco KBW Bank ETF	170 shares of exchange-traded fund	8,816	10,671
	Invesco Preferred ETF	714 shares of exchange-traded fund	10,001	8,011
	Ishares 20+ Year Treasury Bond ETF	585 shares of exchange-traded fund	63,526	53,253
	Ishares Biotechnology ETF	46 shares of exchange-traded fund	3,773	5,883
	Ishares Core U.S. Aggregate Bond ETF	3,029 shares of exchange-traded fund	291,744	299,629
	Ishares Edge MSCI Min Vol Emerging Markets ETF	221 shares of exchange-traded fund	15,446	12,893
	Ishares Inc Core MSCI Emerging Markets ETF	2,629 shares of exchange-traded fund	140,502	141,887
	Ishares Inc Core MSCI Emerging Mkts ETF	707 shares of exchange-traded fund	32,456	38,157
	Ishares MBS ETF	991 shares of exchange-traded fund	107,868	92,936
	Ishares Russell 2000 Growth	276 shares of exchange-traded fund	66,544	70,526
	Ishares Russell 2000 Value	472 shares of exchange-traded fund	68,462	71,263
	Ishares Tips Bond ETF	105 shares of exchange-traded fund	10,932	11,664

ILLINOIS AUTO TRUCK CO., INC. PROFIT SHARING AND SAVINGS PLAN AND TRUST
SCHEDULE OF ASSETS HELD FOR INVESTMENT
MARCH 31, 2025

Schedule H, line 4i - Schedule of Assets (Held At End of Year)

Plan Name: Illinois Auto Truck Co., Inc. Profit Sharing and Savings Plan and Trust
FEIN No: 36-2510691
Plan Number: 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including rate of interest, collateral, par, or maturity date	(d) Cost	(e) Current Value
	Ishares Tr Core MSCI Eaf ETF	1,602 shares of exchange-traded fund	111,940	121,191
	Ishares Tr Core MSCI International Developed Mkts	3,766 shares of exchange-traded fund	230,844	259,440
	Ishares Tr US Infrastructure ETF	126 shares of exchange-traded fund	4,426	5,679
	Ishares U.S. Home Construction ETF	79 shares of exchange-traded fund	8,350	7,522
	Ishares USD High Yield Corporate Bond ETF	1,294 shares of exchange-traded fund	47,451	47,632
	Materials Select Sector Spdr Fund	48 shares of exchange-traded fund	1,655	4,127
	Pacer Data & Infrastructure Real Estate ETF (fka Pacer Benchmark Data and Infrastructure)	47 shares of exchange-traded fund	2,233	1,379
	PIMCO International Bond Fund	7,252 shares of exchange-traded fund	68,771	71,432
	Real Estate Select Sector Spdr Fd Shs	143 shares of exchange-traded fund	6,287	5,985
	Schwab Short-Term U.S. Treasury ETF	1,374 shares of exchange-traded fund	33,894	33,443
	Sector Spdr Consumers STPL	194 shares of exchange-traded fund	5,863	15,844
	Sector Spdr Energy	87 shares of exchange-traded fund	6,417	8,130
	Sector Spdr Industrial	106 shares of exchange-traded fund	(8,144)	13,893
	Spdr Portfolio High Yield Bond ETF	1,093 shares of exchange-traded fund	25,489	25,598
	Vaneck Semiconductors ETF	96 shares of exchange-traded fund	15,349	20,301
	Vanguard Financials ETF	360 shares of exchange-traded fund	15,201	43,009
	Vanguard Information Tech ETF	135 shares of exchange-traded fund	(18,251)	73,221
	Vanguard Intermediate Term Corp Bond (Scottsdale Fds)	962 shares of exchange-traded fund	83,241	78,653
	Vanguard Intermediate Term Government Bond ETF	783 shares of exchange-traded fund	45,759	46,510
	Vanguard Russell 1000 Growth	503 shares of exchange-traded fund	37,805	46,673
	Vanguard Russell 1000 Value	1,767 shares of exchange-traded fund	119,986	145,848
	Vanguard Short Term Corporate Bond	993 shares of exchange-traded fund	79,994	78,387
	Vanguard Small Cap	254 shares of exchange-traded fund	41,490	56,325
	Vanguard Total International Bond ETF	370 shares of exchange-traded fund	17,678	18,063
	Vanguard Target Retirement Income	Vanguard Target Retirement Income		5,346
	Vanguard Target Retirement 2025	Vanguard Target Retirement 2025		66,815
	Vanguard Target Retirement 2035	Vanguard Target Retirement 2035		43,142
	Vanguard Target Retirement 2040	Vanguard Target Retirement 2040		62,803
	Vanguard Target Retirement 2045	Vanguard Target Retirement 2045		36,205
	Vanguard Target Retirement 2050	Vanguard Target Retirement 2050		37,265
	Vanguard Target Retirement 2055	Vanguard Target Retirement 2055		18,703
	Vanguard Target Retirement 2060	Vanguard Target Retirement 2060		6,321
	Vanguard Target Retirement 2065	Vanguard Target Retirement 2065		11,490
**	John Hancock Multimanager Conservative Lifestyle Portfolio	John Hancock Multimanager Conservative Lifestyle Portfolio		43,760
**	John Hancock Multimanager Balanced Lifestyle Portfolio	John Hancock Multimanager Balanced Lifestyle Portfolio		2,855
**	John Hancock Multimanager Growth Lifestyle Portfolio	John Hancock Multimanager Growth Lifestyle Portfolio		136,754
**	John Hancock Multimanager Aggressive Lifestyle Portfolio	John Hancock Multimanager Aggressive Lifestyle Portfolio		150,488
**	John Hancock Stable Value Fund	John Hancock Stable Value Fund		96,855
	Templeton Global Bond Fund	Templeton Global Bond Fund		9,274
	Strategic Income Opportunities Fund	Strategic Income Opportunities Fund		74,937
**	John Hancock Bond Fund	John Hancock Bond Fund		190,467
	American Funds U.S. Government Money Market Fund Class F-2	American Funds U.S. Government Money Market Fund Class F-2		33,085
	Vanguard Balanced Index Fund	Vanguard Balanced Index Fund		62,032
	BlackRock Global Allocation Fund	BlackRock Global Allocation Fund		751,206
	MFS Massachusetts Investors Fund	MFS Massachusetts Investors Fund		2,621,422
**	John Hancock Disciplined Value Fund	John Hancock Disciplined Value Fund		34,299
	International Equity Index Fund	International Equity Index Fund		12,228
	American Funds Washington Mutual Investors Fund Class A	American Funds Washington Mutual Investors Fund Class A		1,509,305
	New Perspective Fund	New Perspective Fund		48,787
	American Funds Capital World Growth and Income Fund Class F-2	American Funds Capital World Growth and Income Fund Class F-2		69,965
	500 Index Fund	500 Index Fund		102,709
	Vanguard Small Cap Value Index Fund	Vanguard Small Cap Value Index Fund		10,189
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