

Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security
Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ Complete all entries in accordance with the instructions to the Form 5500.

OMB Nos. 1210-0110
1210-0089

2024

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2024 or fiscal plan year beginning 05/01/2024 and ending 04/30/2025

- A This return/report is for: [X] a multiemployer plan [] a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) [] a single-employer plan [] a DFE (specify) ____
B This return/report is: [] the first return/report [] the final return/report [] an amended return/report [] a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here. [X]
D Check box if filing under: [X] Form 5558 [] automatic extension [] the DFVC program [] special extension (enter description)
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. []

Part II Basic Plan Information—enter all requested information

1a Name of plan: WILCO AUTOMOTIVE RETIREMENT PLAN
1b Three-digit plan number (PN): 001
1c Effective date of plan: 05/01/1968
2a Plan sponsor's name (employer, if for a single-employer plan): TRUSTEES OF WILCO AUTOMOTIVE RETIREMENT TRUST
Mailing address (include room, apt., suite no. and street, or P.O. Box): 701 ESSINGTON ROAD, SUITE 101 JOLIET, IL 60435
2b Employer Identification Number (EIN): 36-6491924
2c Plan Sponsor's telephone number: 815-439-5500
2d Business code (see instructions): 441110

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

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

Table with 4 columns: SIGN HERE, Signature of plan administrator, Date, Enter name of individual signing as plan administrator. Includes rows for 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	192
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)	63
	6a(2)	57
	6b	89
	6c	37
	6d	183
	6e	6
	6f	189
	6g(1)	
	6g(2)	
h		0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	1

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
1I 1B

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 type="checkbox"/> Insurance	(1) <input 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)

<p>a Pension Schedules</p> <p>(1) <input checked="" type="checkbox"/> R (Retirement Plan Information)</p> <p>(2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary</p> <p>(3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary</p> <p>(4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____</p> <p>(5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)</p>	<p>b General Schedules</p> <p>(1) <input checked="" type="checkbox"/> H (Financial Information)</p> <p>(2) <input type="checkbox"/> I (Financial Information – Small Plan)</p> <p>(3) <input type="checkbox"/> A (Insurance Information) – Number Attached <u>0</u></p> <p>(4) <input checked="" type="checkbox"/> C (Service Provider Information)</p> <p>(5) <input type="checkbox"/> D (DFE/Participating Plan Information)</p> <p>(6) <input type="checkbox"/> G (Financial Transaction Schedules)</p>
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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 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 **05/01/2024** and ending **04/30/2025**

A Name of plan WILCO AUTOMOTIVE RETIREMENT PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 TRUSTEES OF WILCO AUTOMOTIVE RETIREMENT TRUST	D Employer Identification Number (EIN) 36-6491924	

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

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

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

MWM CONSULTING GROUP

36-3870584

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11	ACTUARY	86921	Yes <input type="checkbox"/> No <input checked="" 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)

OLD NATIONAL WEALTH MANAGEMENT

35-1799334

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	INVESTMENT MANAGER	22110	Yes <input type="checkbox"/> No <input checked="" 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)

CHERRY BEKAERT

56-0574444

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	ACCOUNTING/AUDITOR	16065	Yes <input type="checkbox"/> No <input checked="" 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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) <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.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 05/01/2024 and ending 04/30/2025	
A Name of plan WILCO AUTOMOTIVE RETIREMENT PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 TRUSTEES OF WILCO AUTOMOTIVE RETIREMENT TRUST	D Employer Identification Number (EIN) 36-6491924

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

		(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)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	7867	6862
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	104628	40811
(2) U.S. Government securities	1c(2)	383424	413636
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	612766	487814
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	332602	296487
(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)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(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)	793936	669960
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	0	0

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	2235223	1915570
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	36738	21360
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	36738	21360
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	2198485	1894210

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)	16726	
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		16726
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)	19556	
(C) Corporate debt instruments.....	2b(1)(C)	14853	
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		34409
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)	6490	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	10282	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		16772
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	116011	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	4877	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	14797	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		74
d Total income. Add all income amounts in column (b) and enter total	2d		193912

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	379229	
(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)		379229
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)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	16065	
(5) Investment advisory and investment management fees	2i(5)	22110	
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)	71543	
(8) Legal fees	2i(8)	1619	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)	517	
(11) Other expenses	2i(11)	7104	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		118958
j Total expenses. Add all expense amounts in column (b) and enter total	2j		498187

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-304275
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: **CHERRY BEKAERT**

(2) EIN: **56-0574444**

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		400000
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.)			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? Yes No
 If "Yes," enter the amount of any plan assets that reverted to the employer this year 0.

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 565797.

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.
--	---	---

For calendar plan year 2024 or fiscal plan year beginning **05/01/2024** and ending **04/30/2025**

A Name of plan WILCO AUTOMOTIVE RETIREMENT PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 TRUSTEES OF WILCO AUTOMOTIVE RETIREMENT TRUST	D Employer Identification Number (EIN) 36-6491924	

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

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

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

1		0
----------	--	----------

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
 EIN(s): 36-6064763

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		0
----------	--	----------

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 N/A

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 _____.

WILCO AUTOMOTIVE RETIREMENT PLAN

FINANCIAL STATEMENTS AND SUPPLEMENTAL SCHEDULES

***As of April 30, 2025 (in Liquidation) and 2024 (in Liquidation)
and for the Year Ended April 30, 2025 (in Liquidation)***

And Report of Independent Auditor

WILCO AUTOMOTIVE RETIREMENT PLAN
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NOTE: All other schedules required under Section 2520.103-10 of the Department of Labor’s Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, have been omitted because they are not applicable.

Report of Independent Auditor

To the Plan Participants and Plan Trustee
Wilco Automotive Retirement Plan
Joliet, Illinois

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

We have performed audits of the financial statements of the Wilco Automotive Retirement Plan (the “Plan”), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (“ERISA”), as permitted by ERISA Section 103(a)(3)(C). The financial statements comprise the statements of net assets available for benefits and of accumulated plan benefits as of April 30, 2025 (in Liquidation) and 2024 (in Liquidation), and the related statements of changes in net assets available for benefits and of changes in accumulated plan benefits for the year ended April 30, 2025 (in Liquidation), and the related notes to the financial statements.

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

Management has obtained certifications from a qualified institution as of April 30, 2025 (in Liquidation) and 2024 (in Liquidation), and for the year ended April 30, 2025 (in Liquidation) stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

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

- The amounts and disclosures in the financial statements referred to above, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- The information in the financial statements referred to above related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

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

Emphasis of Matter – Basis of Accounting

As discussed in Note 1 to the financial statements, the Plan previously contacted the Pension Benefit Guaranty Corporation (“PBGC”) which deemed it terminated by Mass Withdrawal as of October 1, 1998, and management determined liquidation is imminent. As a result, the Plan has changed its basis of accounting from the going concern basis used in presenting the financial statements to the liquidation basis used in presenting the financial statements. Our opinion is not modified with respect to this matter.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management’s election of the ERISA Section 103(a)(3)(C) audit does not affect management’s responsibility for the financial statements.

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

Auditor’s Responsibilities for the Audit of the Financial Statements

Except as described in the *Scope and Nature of the ERISA Section 103(a)(3)(C) Audit* section of our report, our objectives are to obtain reasonable assurance about whether the financial statements, as a whole, are free from material misstatement, whether due to fraud or error, and to issue an auditor’s report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and, therefore, is not a guarantee that an audit conducted in accordance with 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 the Plan’s internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.

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

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

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

Supplemental Schedules Required by ERISA

The supplemental schedules, Schedule of Assets (Held at End of Year) – Form 5500, Schedule H, Part IV, Line 4i as of April 30, 2025 and Schedule of Reportable Transactions – Form 5500, Schedule H, Part IV, Line 4j for the year ended April 30, 2025, are presented for the purpose of additional analysis and are not a required part of the financial statements but are supplementary information required by DOL’s Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion:

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

Cherry Bekaert LLP

Orland Park, Illinois
February 6, 2026

WILCO AUTOMOTIVE RETIREMENT PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

APRIL 30, 2025 (IN LIQUIDATION) AND 2024 (IN LIQUIDATION)

	2025	2024
	(In Liquidation)	(In Liquidation)
ASSETS		
Investments, at fair value	\$ 1,908,708	\$ 2,227,356
Receivables:		
Employers' contributions	21,910	42,341
Accrued interest and dividends	6,862	7,867
Total Receivables	28,772	50,208
Total Assets	1,937,480	2,277,564
LIABILITIES		
Administrative expenses payable	21,360	36,738
Excess contributions payable	141	-
Total Liabilities	21,501	36,738
Net Assets Available for Benefits	\$ 1,915,979	\$ 2,240,826

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

WILCO AUTOMOTIVE RETIREMENT PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

YEAR ENDED APRIL 30, 2025 (IN LIQUIDATION)

Additions to net assets attributed to:

Investment Income:

Net appreciation in fair value of investments	\$	125,931
Interest and dividends		51,181
Less investment fees		<u>(22,110)</u>
Total Investment Income		155,002

Other income		<u>1,542</u>
Total Additions		<u>156,544</u>

Deductions from net assets attributed to:

Benefits paid to participants		379,229
Administrative expenses		89,744
Pension Benefit Guaranty Corporation		7,104
Other expense		<u>5,314</u>
Total Deductions		<u>481,391</u>

Net decrease in net assets available for benefits		(324,847)
Net assets available for benefits, beginning of year		<u>2,240,826</u>
Net assets available for benefits, end of year	\$	<u><u>1,915,979</u></u>

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

WILCO AUTOMOTIVE RETIREMENT PLAN
STATEMENTS OF ACCUMULATED PLAN BENEFITS

APRIL 30, 2025 (IN LIQUIDATION) AND 2024 (IN LIQUIDATION)

	2025	2024
	<u>(In Liquidation)</u>	<u>(In Liquidation)</u>
Actuarial present value of accumulated plan benefits:		
Vested benefits:		
Participants and beneficiaries currently receiving payments	\$ 4,126,703	\$ 3,690,202
Other participants	<u>2,345,185</u>	<u>2,887,014</u>
Total vested benefits	6,471,888	6,577,216
Nonvested benefits	<u>19,947</u>	<u>26,342</u>
Total actuarial present value of accumulated plan benefits	<u><u>\$ 6,491,835</u></u>	<u><u>\$ 6,603,558</u></u>

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

WILCO AUTOMOTIVE RETIREMENT PLAN
STATEMENT OF CHANGES IN ACCUMULATED PLAN BENEFITS

YEAR ENDED APRIL 30, 2025 (IN LIQUIDATION)

Actuarial present value of accumulated plan benefits, beginning of year	<u>\$ 6,603,558</u>
Increase (decrease) during the year attributable to:	
Changes in actuarial assumptions	(19,851)
Benefits accumulated	(53,865)
Increase for interest	341,222
Benefits paid	<u>(379,229)</u>
Net decrease	<u>(111,723)</u>
Actuarial present value of accumulated plan benefits, end of year	<u><u>\$ 6,491,835</u></u>

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

WILCO AUTOMOTIVE RETIREMENT PLAN

NOTES TO THE FINANCIAL STATEMENTS

APRIL 30, 2025 (IN LIQUIDATION) AND 2024 (IN LIQUIDATION)

Note 1—Description of the Plan

The following description of the Wilco Automotive Retirement Plan (the “Plan”) provides only general information. Participants should refer to the Plan Agreement for a more complete description of the Plan’s provisions.

General – The Plan trustee established the Plan as a multi-employer defined benefit plan in accordance with a Trust Agreement among 1) the Will County Auto Trade Association (“Association”), 2) the International Association of Machinists and Aerospace Workers, Lodge No. 1749 or the General Chauffeurs, Sales Drivers and Helpers Union Local No. 179, an Affiliate of the International Brotherhood of Teamsters, Chauffeurs, Warehousemen and Helpers of America (“Unions”), and 3) the Plan trustee. The Plan was maintained pursuant to collective bargaining agreements between the Association and the Unions until the last such collective bargaining agreement expired in December 1998.

The following were employers in the Plan: Bill Jacobs Chevrolet, Inc.; D’Arcy Buick; Gregg Motors, Inc.; Oestreich Sales & Service, Inc.; Rendel’s, Inc.; Ron Tirapelli Ford – Suzuki; and Tyson Motor Corp. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”).

The Plan previously contacted the Pension Benefit Guaranty Corporation (“PBGC”) which deemed the Plan to have terminated by a Mass Withdrawal as of October 1, 1998. On that date, future benefit accruals were frozen and contributions to the Plan ceased. The Plan is under supervision of the PBGC and continues to be administered by Plan management in accordance with the Plan provisions. However, the Plan has changed its basis of accounting used in the presentation of the financial statements from the going concern basis to liquidation basis.

Pension Benefits – Employees with five or more years of service are entitled to annual pension benefits beginning at normal retirement age, which is the older of age 65 or the participant’s age on the five-year anniversary of his or her entry into the Plan. Generally, a participant’s monthly accrued benefit is an amount equal to \$28.40 multiplied by the participant’s accrual service, which is the number of years and fractional years in the Plan. The pension benefit is paid in the form of a monthly annuity. The Plan also permits early retirements at age 55 or 64.

Death and Disability Benefits – If a participant dies before his or her annuity starting date and before the normal retirement date, and provided on the date of death his or her vesting percentage was greater than zero, then his or her spouse of one year or greater shall receive a qualified preretirement survivor annuity. Participants who become totally disabled receive annual disability benefits that are equal to normal retirement benefits they have accumulated as of the time they become disabled.

Note 2—Summary of significant accounting policies

Basis of Presentation – The financial statements of the Plan are prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (“U.S. GAAP”). As discussed in Note 1, the Plan changed its basis of accounting used in the presentation of the financial statements from the going concern basis to the liquidation basis.

Use of Estimates – The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect certain reported amounts of net assets available for benefits and changes therein, disclosure of contingent assets and liabilities and the actuarial present value of accumulated Plan benefits at the date of the financial statements. Accordingly, actual results may differ from those estimates and assumptions.

Investment Valuation and Income Recognition – The Plan’s investments are reported at fair value. U.S. GAAP defines fair value as the exchange 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.

WILCO AUTOMOTIVE RETIREMENT PLAN

NOTES TO THE FINANCIAL STATEMENTS

APRIL 30, 2025 (IN LIQUIDATION) AND 2024 (IN LIQUIDATION)

Note 2—Summary of significant accounting policies (continued)

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

Payment of Benefits – Benefits are recorded when paid. There were no benefit payments requested and not yet disbursed at April 30, 2025 and 2024.

Administrative Expenses – Expenses of maintaining the Plan are paid by the Plan. Investment related expenses are included in net appreciation (depreciation) in fair value of investments.

Note 3—Information certified by the qualified institution (unaudited)

The Plan administrator has elected the method of annual reporting compliance permitted by ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Old National Bank, a qualified institution, has certified to the completeness and accuracy of the following data included in the accompanying financial statements and supplemental schedules:

Investments at fair value and interest and dividends receivable as shown in the statements of net assets available for benefits as of April 30, 2025 (in liquidation) and 2024 (in liquidation).

Net appreciation in fair value of investments and interest and dividends as shown in the statement of changes in net assets available for benefits for the year ended April 30, 2025 (in liquidation).

Schedule of Assets (Held at End of Year) – Form 5500, Schedule H, Part IV, Line 4i as of April 30, 2025.

Schedule of Reportable Transactions – Form 5500, Schedule H, Part IV, Line 4j for the year ended April 30, 2025.

At the request of the Plan administrator, the Plan's independent auditor did not perform auditing procedures with respect to the certified investment information, except for comparing such information to the related information included in the financial statements and supplemental schedules.

Note 4—Fair value measurements

U.S. GAAP provides a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy are described as follows:

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

Level 2 – 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 asset or liability; inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

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

WILCO AUTOMOTIVE RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS

APRIL 30, 2025 (IN LIQUIDATION) AND 2024 (IN LIQUIDATION)

Note 4—Fair value measurements (continued)

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

The following are descriptions of the valuation methodologies used for investments measured at fair value, including the general classification of such assets pursuant to the valuation hierarchy. There have been no changes in the methodologies used at April 30, 2025 and 2024.

Mutual Funds – Valued at the daily closing price as reported by the fund. The mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their net asset value and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded and are therefore classified within Level 1 of the valuation hierarchy.

Common Stocks – Valued at the closing price reported on the active market on which the individual securities are traded and therefore classified within Level 1 of the valuation hierarchy.

Money Market Fund – The Plan's money market fund includes short-term, United States, dollar-denominated obligations issued or guaranteed by the Treasury. The money market fund is valued based on the amount of cash balances on deposit, which approximates fair value. Accordingly, the money market fund is classified within Level 2 of the valuation hierarchy.

Corporate Bonds – Valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing values on yields currently available on comparable securities of issuers with similar credit ratings. Corporate bonds are classified within Level 2 of the valuation hierarchy.

U.S. Government Securities – Valued using pricing models maximizing the use of observable inputs for similar securities and, therefore, classified within Level 2 of the valuation hierarchy.

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

The following tables set forth by level, within the fair value hierarchy, the Plan's assets measured at fair value on a recurring basis at April 30, 2025 and 2024:

	Assets at Fair Value as of April 30, 2025			
	Level 1	Level 2	Level 3	Total
Mutual funds	\$ 669,960	\$ -	\$ -	\$ 669,960
Common stocks	296,487	-	-	296,487
Money market fund	-	40,811	-	40,811
Corporate bonds	-	487,814	-	487,814
U.S. government securities	-	413,636	-	413,636
Total assets in the fair value hierarchy	<u>\$ 966,447</u>	<u>\$ 942,261</u>	<u>\$ -</u>	<u>\$ 1,908,708</u>

WILCO AUTOMOTIVE RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS

APRIL 30, 2025 (IN LIQUIDATION) AND 2024 (IN LIQUIDATION)

Note 4—Fair value measurements (continued)

	Assets at Fair Value as of April 30, 2024			
	Level 1	Level 2	Level 3	Total
Mutual funds	\$ 793,936	\$ -	\$ -	\$ 793,936
Common stocks	332,602	-	-	332,602
Money market fund	-	104,628	-	104,628
Corporate bonds	-	612,766	-	612,766
U.S. government securities	-	383,424	-	383,424
Total assets in the fair value hierarchy	\$ 1,126,538	\$ 1,100,818	\$ -	\$ 2,227,356

Note 5—Actuarial present value of accumulated plan benefits

Accumulated plan benefits are those future periodic payments, including lump sum distributions, that are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of the employees who have died, and (c) present employees or their beneficiaries. Benefits are based on an amount equal to \$28.40 multiplied by the participant's accrual service, which is the number of years and fractional years in the Plan. Benefits payable under all circumstances - retirement, death, disability, and termination of employment - are included, to the extent they are deemed attributable to employee service. Benefits were frozen as of October 1, 1998 reflecting the mass withdrawal termination date. Withdrawal liability calculations were completed by a prior actuary as of May 1, 2012. As of April 30, 2025, one remaining employer is making contributions toward their withdrawal liability obligation; and six have satisfied their obligation (see Note 7).

The actuarial present value of accumulated plan benefits is determined by an independent actuary and is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment. The significant actuarial assumptions are updated each year and reflect the assumptions prescribed by the PBGC to be used in valuing liabilities for plan termination under mass withdrawal.

The significant actuarial assumptions used in the valuations as of May 1, 2025 were as follows:

Interest: 5.41%

Mortality: ERISA section 4044 Mortality Rates for 2025 valuation dates
(Pri-2012 Private Retirement Plans Mortality projected generationally with mortality improvement scale MP-2021)

XRA: participant need not retire to receive a benefit after attaining Normal Retirement Age

The significant actuarial assumptions used in the valuations as of May 1, 2024 were as follows:

Interest: 5.50% for 1 to 20 years; 4.83% ultimate

Mortality: ERISA section 4044 Mortality Rates for 2024 valuation dates
(UP94 M&F projected to 2034 for healthy lives using scale AA)

XRA: participant need not retire to receive a benefit after attaining Normal Retirement Age

The computations of the actuarial present value of accumulated plan benefits were made as of May 1, 2025 and 2024. Had the valuations been performed as of April 30, there would be no material differences.

WILCO AUTOMOTIVE RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS

APRIL 30, 2025 (IN LIQUIDATION) AND 2024 (IN LIQUIDATION)

Note 6—Related party and party-in-interest transactions

Plan investments are managed by Old National Bank. Fees paid to Old National Bank qualify as party-in-interest transactions. Fees paid by the Plan for investment management services amount to \$22,110 for the year ended April 30, 2025.

The Plan has also contracted with MWM Consulting Group for actuarial, recordkeeping, and transaction processing services. Fees paid to MWM Consulting Group qualify as party-in-interest transactions. Fees paid and accrued by the Plan for these services totaled \$71,543 for the year ended April 30, 2025.

In addition, for the year ended April 30, 2025, fees were paid by the Plan totaling \$16,065 to Cherry Bekaert LLP for audit services, \$1,619 to Nixon Peabody LLP for legal services, and \$517 to Travelers for insurance services.

All of these party-in-interest transactions are exempt from the prohibited transaction rules of ERISA.

Note 7—Plan termination

As discussed in Note 1, the PBGC deemed the Plan to have terminated by a Mass Withdrawal as of October 1, 1998. Withdrawal liabilities were assessed based upon the October 1, 1998 date per agreement with the PBGC. Seven employers have completed or are making withdrawal liability contributions to the Plan, some on an installment basis. Withdrawal notices were provided to the employers on April 24, 2015. During the year ended April 30, 2025, one employer's liability was recalculated based on the timing of payments. A cumulative interest correction was made and is included in other expense on the statement of changes in accumulated plan benefits. As of April 30, 2025, there was one employer still making contributions toward their withdrawal liability obligation. For the years ended April 30, 2025 and 2024, the employers' withdrawal liability contributions receivable is as follows:

	<u>April 30, 2024</u>	<u>Payments Received</u>	<u>Incremental Interest</u>	<u>Cumulative Interest Correction</u>	<u>April 30, 2025</u>
Oestreich Sales & Service, Inc.	\$ 20,748	\$ -	\$ 1,162	\$ -	\$ 21,910
Rendel's, Inc.	21,593	(16,726)	306	(5,173)	-
Total, net	<u>\$ 42,341</u>	<u>\$ (16,726)</u>	<u>\$ 1,468</u>	<u>\$ (5,173)</u>	<u>\$ 21,910</u>

The Plan is deemed terminated by Mass Withdrawal as noted above. If proceedings are instituted by the Plan trustee or the PBGC, the net assets of the Plan will be allocated, as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated:

1. Benefits attributable to employee contributions, taking into account those paid out before termination.
2. Annuity benefits that former employees or their beneficiaries have been receiving for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under Plan provisions in effect at any time during the five years preceding Plan termination.
3. Other vested benefits insured by the PBGC.
4. All other vested benefits (that is, vested benefits not insured by the PBGC).
5. All nonvested benefits.

WILCO AUTOMOTIVE RETIREMENT PLAN

NOTES TO THE FINANCIAL STATEMENTS

APRIL 30, 2025 (IN LIQUIDATION) AND 2024 (IN LIQUIDATION)

Note 7—Plan termination (continued)

Certain benefits under a Plan are insured by the PBGC if a Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under a Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under a Plan are guaranteed at the level in effect on the date of a Plan's termination.

Whether all participants receive their benefits should a Plan be terminated at some future time depends on the sufficiency, at that time, of a Plan's net assets to provide those benefits, the priority of those benefits to be paid, and the level and type of benefits guaranteed by the PBGC at that time.

Note 8—Income tax status

The Internal Revenue Service ("IRS") has determined and informed the Plan trustee by a letter dated January 28, 2013, that the Plan was designed in accordance with the applicable regulations of the Internal Revenue Code ("IRC"). The Plan administrator believes the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

U.S. GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of April 30, 2025 and 2024, there are no uncertain tax 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.

Note 9—Risks and uncertainties

The Plan invests in various investment securities. Investment securities, in general, 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 such changes could materially affect participant account balances and the amounts reported in the financial statements.

The actuarial present value of accumulated plan benefits is reported based on certain assumptions pertaining to interest rates, inflation rates, and participant demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near-term would be material to the financial statements.

Note 10—Reconciliation of financial statements to Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements to Form 5500 as of April 30:

	<u>2025</u>	<u>2024</u>
Net assets available for benefits per the financial statements	\$ 1,915,979	\$ 2,240,826
Less employers' contributions receivable at end of year	(21,910)	(42,341)
Plus excess contributions payable at end of year	141	-
Net assets per Form 5500	<u>\$ 1,894,210</u>	<u>\$ 2,198,485</u>

WILCO AUTOMOTIVE RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS

APRIL 30, 2025 (IN LIQUIDATION) AND 2024 (IN LIQUIDATION)

Note 10—Reconciliation of financial statements to Form 5500 (continued)

The following is a reconciliation of net decrease in net assets available for benefits per the financial statements to net loss per Form 5500 for the year ended April 30, 2025:

Net decrease in net assets available for benefits per the financial statements	\$ (324,847)
Plus employers' contributions receivable at beginning of year	42,341
Plus excess contributions payable at end of year	141
Less employers' contributions receivable at end of year	<u>(21,910)</u>
Net loss per Form 5500	<u><u>\$ (304,275)</u></u>

Note 11—Subsequent events

The Plan has evaluated all subsequent events through February 6, 2026, which is the date these financial statements were available to be issued and has determined there are no subsequent events that require disclosure.

SUPPLEMENTAL SCHEDULES

WILCO AUTOMOTIVE RETIREMENT PLAN
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
FORM 5500, SCHEDULE H, PART IV, LINE 4i
EIN: 36-6491924, PLAN NUMBER: 001

APRIL 30, 2025

(a)	(b)	(c)	(d)	(e)
Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost	Current Value	
Common Stocks:				
Adobe Inc.	12 shares common stock	\$ 2,179	\$ 4,500	
Albemarle Corp	42 shares common stock	7,436	2,459	
Ally Financial Inc.	160 shares common stock	4,398	5,226	
Alphabet Inc.	98 shares common stock	4,106	15,562	
Amazon.com Inc.	86 shares common stock	9,492	15,860	
American Electric Power Company	43 shares common stock	3,357	4,659	
Apple Inc.	81 shares common stock	2,092	17,212	
ASML Holding N.V. NY	7 shares common stock	3,915	4,677	
AT&T Inc.	256 shares common stock	5,204	7,091	
Bath and Body Works Inc.	163 shares common stock	6,224	4,973	
Blackrock Inc.	4 shares common stock	2,336	3,657	
Capital One Financial Corp.	26 shares common stock	2,951	4,687	
CarMax Inc.	64 shares common stock	5,317	4,139	
Carnival Corp	172 shares of common stock	4,641	3,154	
Citigroup, Inc.	76 shares common stock	3,492	5,197	
CNH Industrial	338 shares common stock	4,217	3,911	
ConocoPhillips	31 shares common stock	3,225	2,763	
Costco Wholesale Corporation	3 shares common stock	1,267	2,983	
CVS Health Corporation	77 shares common stock	6,226	5,137	
Danaher Corp.	19 shares common stock	4,041	3,787	
Edwards Lifesciences Corp.	65 shares common stock	5,809	4,907	
EOG Resources, Inc.	15 shares common stock	1,675	1,655	
Equifax, Inc.	22 shares common stock	4,691	5,723	
Fortinet, Inc.	77 shares common stock	4,485	7,990	
Franklin Templeton ETF Tr India	255 shares common stock	9,759	9,761	
Huntington Ingalls Industries, Inc.	16 shares common stock	3,790	3,685	
Intel Corp	186 shares common stock	5,199	3,739	
KLA Corp.	8 shares common stock	2,713	5,622	
Kraft Heinz Co	188 shares common stock	5,740	5,471	
Meta Platforms Inc.	16 shares common stock	4,647	8,784	
Microsoft Corporation	57 shares common stock	3,908	22,530	
Molson Coors Beverage Company	88 shares common stock	5,016	5,063	
Mosaic Co	119 shares common stock	3,440	3,618	
NiSource, Inc.	129 shares common stock	3,396	5,045	
Nvidia Corp.	123 shares common stock	13,972	13,397	
PayPal Holdings Inc.	63 shares common stock	4,162	4,148	
Pinterest Inc.	195 shares common stock	5,207	4,937	
Roche Holding Ltd.	101 shares common stock	4,130	4,137	

WILCO AUTOMOTIVE RETIREMENT PLAN
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
FORM 5500, SCHEDULE H, PART IV, LINE 4i (CONTINUED)
EIN: 36-6491924, PLAN NUMBER: 001

APRIL 30, 2025

(a)	(b)	(c)	(d)	(e)
Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost	Current Value	
Common Stocks (continued):				
Salesforce Inc.	19 shares common stock	\$ 3,017	\$ 5,105	
Schlumberger Ltd.	118 shares common stock	4,783	3,923	
Sunrun Inc.	81 shares common stock	1,773	558	
Taiwan Semiconductor Mfg Co	30 shares common stock	2,752	5,001	
Thermo Fisher Scientific Inc.	8 shares common stock	4,285	3,432	
Tyson Foods Inc.	100 shares common stock	5,484	6,124	
United Airlines Holdings Inc.	29 shares common stock	1,287	1,996	
UnitedHealth Group Inc.	11 shares common stock	1,994	4,526	
Veeva Systems Inc.	17 shares common stock	2,771	3,973	
Ventas, Inc.	78 shares common stock	3,524	5,466	
Visa Inc.	19 shares common stock	3,853	6,564	
Warner Bros Discovery Inc.	248 shares common stock	4,289	2,150	
Wells Fargo & Co	82 shares common stock	3,487	5,823	
Total Common Stocks		221,154	296,487	
Mutual Funds:				
Causeway	International Value Fund - Institutional Class; 1,869 shares	38,712	38,675	
Driehaus	Emerging Markets Growth Fund - Institutional Class; 898 shares	29,868	33,569	
Fidelity	International Index Fund; 1,479 shares	70,156	78,992	
Janus Henderson	Enterprise Fund - Class N; 211 shares	29,164	28,722	
JPMorgan	Undiscovered Managers Behavioral Value Fund - Class R6; 244 shares	19,546	18,548	
New York Life	Pinestone International Equity Fund - Class R6; 2016 shares	33,781	34,104	
Oberweis	Small Cap Opportunities Fund - Institutional Class; 948 shares	23,024	22,276	
Putnam	Large Cap Value Fund - Class R6; 1,655 shares	55,468	56,508	
Vanguard	500 Index Fund - Admiral Shares; 375 shares	156,967	193,031	
Vanguard	Growth Index Fund - Admiral Shares; 728 shares	124,116	141,985	
Victory	Sycamore Established Value Fund - Class I; 543 shares	26,206	23,550	
Total Mutual Funds		\$ 607,008	\$ 669,960	

WILCO AUTOMOTIVE RETIREMENT PLAN
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
FORM 5500, SCHEDULE H, PART IV, LINE 4i (CONTINUED)
EIN: 36-6491924, PLAN NUMBER: 001

APRIL 30, 2025

(a)	(b)	(c)	(d)	(e)
Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost	Current Value	
Corporate Bonds:				
Amazon.com Inc.	50,000 Note; 4.55%, due 12/01/2027; callable	\$ 50,315	\$ 50,774	
Amgen Inc.	50,000 Note; 2.20%, due 02/21/2027; callable	52,082	48,219	
Apple Inc.	50,000 Note; 3.20%, due 05/11/2027; callable	49,907	49,414	
Chevron Corporation	50,000 Note; 1.995%, due 05/11/2027; callable	51,810	48,095	
CVS Health Corporation	50,000 Note; 1.30%, due 08/21/2027; callable	48,883	46,488	
Emerson Electric Co.	50,000 Note; 0.875%, due 10/15/2026; callable	49,251	47,672	
Goldman Sachs Group	50,000 Note; fixed to float rate, due 9/29/2026	50,000	50,348	
Oracle Corporation	50,000 Note; 1.65%, due 03/25/2026; callable	50,506	48,727	
United Health Group	50,000 Note; 1.25%, due 01/15/2026; callable	50,586	48,921	
Walt Disney Company	50,000 Note; 1.75%, due 01/13/2026; callable	51,575	49,156	
Total Corporate Bonds		<u>504,915</u>	<u>487,814</u>	
U.S. Governmental Securities:				
U.S. Federal Government	50,000 U.S. Treasury Note; 5.00%; due 08/31/2025	49,980	50,100	
U.S. Federal Government	50,000 U.S. Treasury Note; 5.00%; due 09/30/2025	49,971	50,159	
U.S. Federal Government	50,000 U.S. Treasury Note; 5.00%; due 10/31/2025	49,941	50,203	
U.S. Federal Government	50,000 U.S. Treasury Note; 4.875%; due 11/30/2025	49,924	50,217	
U.S. Federal Government	50,000 U.S. Treasury Note; 4.25%; due 12/31/2025	49,879	50,064	
U.S. Federal Government	66,549 U.S. Treasury Note; 0.125%; treasury inflation protection security	64,871	66,378	
U.S. Federal Government	50,000 U.S. Treasury Note; 2.75%; due 02/15/2028	48,500	48,901	
U.S. Federal Government	50,000 U.S. Treasury Note; 2.375%; due 05/15/2029	49,910	47,614	
Total U.S. Government Securities		<u>412,976</u>	<u>413,636</u>	
Money Market Fund:				
Goldman Sachs	Government Institutional Fund; 40,811 shares	40,811	40,811	
Total Assets (Held at End of Year)		<u>\$ 1,786,864</u>	<u>\$ 1,908,708</u>	

* An asterisk in column (a) denotes party-in-interest to the Plan.

WILCO AUTOMOTIVE RETIREMENT PLAN
SCHEDULE OF REPORTABLE TRANSACTIONS
FORM 5500, SCHEDULE H, PART IV, LINE 4j
EIN: 36-6491924, PLAN NUMBER: 001

YEAR ENDED APRIL 30, 2025

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Identity of Party Involved	Description of Asset	Purchase Price	Selling Price	Number of Transactions	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain (Loss)	
Series of Transactions:								
Fidelity	International Index Fund	\$ 33,734	\$ -	2	\$ 33,734	\$ 33,734	\$ -	
Fidelity	International Index Fund	-	99,589	5	86,366	99,589	13,223	
Goldman Sachs	Government Institutional Fund	543,702	-	168	543,702	543,702	-	
Goldman Sachs	Government Institutional Fund	-	607,519	47	607,519	607,519	-	
iShares	S&P 100 ETF Trust	-	135,357	2	109,582	135,357	25,775	
Vanguard	Growth Index Fund Admiral Shares	77,550	-	2	77,550	77,550	-	
Vanguard	Growth Index Fund Admiral Shares	-	36,987	5	26,816	36,987	10,171	
Single Transaction:								
iShares	S&P 100 ETF Trust	\$ -	\$ 131,063	1	\$ 105,985	\$ 131,063	\$ 25,078	

Columns (e) and (f) are omitted as they are not applicable.

Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security
Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2024

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2024 or fiscal plan year beginning 05/01/2024 and ending 04/30/2025

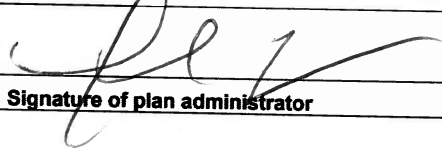
- A** This return/report is for: a multiemployer plan a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
- a single-employer plan a DFE (specify) _____
- B** This return/report is: the first return/report the final return/report
- an amended return/report a short plan year return/report (less than 12 months)
- C** If the plan is a collectively-bargained plan, check here
- D** Check box if filing under: Form 5558 automatic extension the DFVC program
- special extension (enter description) _____
- 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 WILCO AUTOMOTIVE RETIREMENT PLAN		1b Three-digit plan number (PN) ▶	001
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) TRUSTEES OF WILCO AUTOMOTIVE RETIREMENT TRUST 701 ESSINGTON ROAD, SUITE 101 JOLIET IL 60435		1c Effective date of plan	05/01/1968
		2b Employer Identification Number (EIN)	36-6491924
		2c Plan Sponsor's telephone number	815-439-5500
		2d Business code (see instructions)	441110

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

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

SIGN HERE		<u>2/11/20</u>	Mike Polcyn
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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 <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
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	5 192
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1), 6a(2), 6b, 6c, and 6d).	
a(1) Total number of active participants at the beginning of the plan year	6a(1) 63
a(2) Total number of active participants at the end of the plan year	6a(2) 57
b Retired or separated participants receiving benefits	6b 89
c Other retired or separated participants entitled to future benefits	6c 37
d Subtotal. Add lines 6a(2), 6b, and 6c.	6d 183
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e 6
f Total. Add lines 6d and 6e.	6f 189
g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	6g(1)
g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g(2)
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7 1

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
 1 I 1 B

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

9a Plan funding arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules (1) <input checked="" type="checkbox"/> R (Retirement Plan Information) (2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary (4) <input type="checkbox"/> DCG (Individual Plan Information) - Number Attached _____ (5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)	b General Schedules (1) <input checked="" type="checkbox"/> H (Financial Information) (2) <input type="checkbox"/> I (Financial Information - Small Plan) (3) <input type="checkbox"/> A (Insurance Information) - Number Attached _____ (4) <input checked="" type="checkbox"/> C (Service Provider Information) (5) <input type="checkbox"/> D (DFE/Participating Plan Information) (6) <input type="checkbox"/> G (Financial Transaction Schedules)
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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 _____

WILCO AUTOMOTIVE RETIREMENT PLAN
SCHEDULE OF REPORTABLE TRANSACTIONS
FORM 5500, SCHEDULE H, PART IV, LINE 4j
EIN: 36-6491924, PLAN NUMBER: 001

YEAR ENDED APRIL 30, 2025

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Identity of Party Involved	Description of Asset	Purchase Price	Selling Price	Number of Transactions	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain (Loss)	
Series of Transactions:								
Fidelity	International Index Fund	\$ 33,734	\$ -	2	\$ 33,734	\$ 33,734	\$ -	
Fidelity	International Index Fund	-	99,589	5	86,366	99,589	13,223	
Goldman Sachs	Government Institutional Fund	543,702	-	168	543,702	543,702	-	
Goldman Sachs	Government Institutional Fund	-	607,519	47	607,519	607,519	-	
iShares	S&P 100 ETF Trust	-	135,357	2	109,582	135,357	25,775	
Vanguard	Growth Index Fund Admiral Shares	77,550	-	2	77,550	77,550	-	
Vanguard	Growth Index Fund Admiral Shares	-	36,987	5	26,816	36,987	10,171	
Single Transaction:								
iShares	S&P 100 ETF Trust	\$ -	\$ 131,063	1	\$ 105,985	\$ 131,063	\$ 25,078	

Columns (e) and (f) are omitted as they are not applicable.

WILCO AUTOMOTIVE RETIREMENT PLAN

EIN: 36-6491924 / PN: 001

NOTES TO 2024 FORM 5500

Line 6, a(1) and a(2): The active participants are presumed actively employed within the employers (multiemployer plan) and are retaining (but not earning) frozen credited service but continue to accrue vesting service under the Wilco Automotive Retirement Plan.

Line 7: There were 12 total employers obligated to contribute to the plan as of the mass withdrawal termination on October 1, 1998. For the plan year ending April 30, 2025, there is one employer remaining that is still obligated to contribute to the plan based upon the withdrawal liability schedules.

NOTES TO SCHEDULE R (FORM 5500)

The Plan was determined by the PBGC to have suffered a Mass Withdrawal as of October 1, 1998. All benefits were frozen as of the date. The trustees continue to operate the Plan in accordance with the plan provisions. Withdrawal liabilities were assessed based upon the October 1, 1998 date per agreement with the PBGC. Seven employers have completed or are making withdrawal liability contributions to the Plan, some on an installment basis. The Plan may be terminated by the Trustees or through the proceedings instituted by the PBGC. Withdrawal Notices were provided to employers on April 24, 2015. As of December 31, 2025, there is one employer still required to make contributions toward their withdrawal liability obligation. For the plan year ending April 30, 2025, the contributions that were made are as follows:

Oestreich Sales & Service, Inc.:	\$	0
Rendel's:	\$	<u>16,726</u>
Total:	\$	16,726

WILCO AUTOMOTIVE RETIREMENT PLAN
Multiemployer Plan Terminated by Mass Withdrawal

Background and Original Certification:

On October 1, 1998, Wilco Automotive froze future benefit accruals. At the time of the freeze, accrual and vesting service continued to accrue. After consulting with the PBGC at that time, it was determined that as long as the employers had a requirement under the collective bargaining agreement to contribute to the Plan, a Plan termination had not occurred. Since that time, contributions to the Plan have ceased.

On October 31, 2007, the PBGC was contacted again to discuss recent developments. Based on these discussions, it is likely that Wilco Automotive will claim a Plan termination by mass withdrawal occurring on October 1, 1998. Withdrawal liability calculations were completed as of May 1, 2012.

In accordance with the requirements for terminated plans in mass withdrawal under Section 4281(b) of ERISA, we are providing this attachment to the 5500 filing.

Initial Calculation:

Plan Liability as of May 1, 2009: \$4,959,034

Assumptions:

- Interest: 5.50% 1-20 years; 5.02% ultimate
- Mortality: ERISA Section 4044 Mortality Rates for 2009 Valuation Dates (UP94 M & F Projected to 2019 for healthy lives using Scale AA)
- XRA: participant need not retire to receive a benefit
- Expense load: \$90,151 determined in accordance with Section 4044.75

Plan Assets as of May 1, 2009 (excluding withdrawal liability assets): \$2,397,206

The above calculations were prepared under the direction of the prior actuary, Phillip A. Leder, FSA, EA, MAAA, but the results have been reviewed and appear to be complete and accurate.

In the preparation of this report information supplied by the Plan Sponsor, the prior actuary, current Plan documents and Plan asset information were relied on.

Updated Calculation and Certification:

As an update to the above calculations, the liabilities have been re-calculated under the following PBGC assumptions applicable as of May 1, 2025:

Plan Liability as of May 1, 2025 (assuming no reduction in benefits pursuant to ERISA 4281(c)):

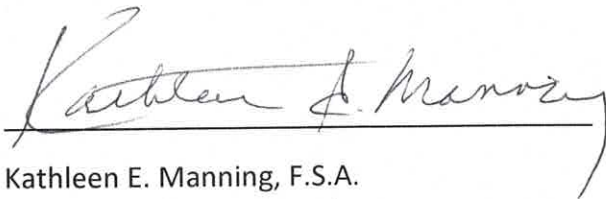
\$6,491,835

Assumptions:

- Interest Rate: 5.41%, April 30, 2025 ERISA 4044 Yield Curve
- Mortality: ERISA 4044 Mortality Rates for 2025 Valuation Dates
Pri-2012 Private Retirement Plans Mortality projected generationally with mortality improvement scale MP-2021

Plan assets as of May 1, 2025 (excluding any unpaid withdrawal liability assets): **\$1,915,570**

The notices for mass withdrawal were sent on April 24, 2015 by the Plan Sponsor notifying employers of their withdrawal liability obligation. The mass withdrawal termination occurred on October 1, 1998. Withdrawal liability calculations were completed by the prior actuary as of May 1, 2012. As of December 31, 2025, one remaining employer has to make contributions toward their withdrawal liability obligation.



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2/11/2026

Date

WILCO AUTOMOTIVE RETIREMENT PLAN
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
FORM 5500, SCHEDULE H, PART IV, LINE 4i
EIN: 36-6491924, PLAN NUMBER: 001

APRIL 30, 2025

(a)	(b)	(c)	(d)	(e)
Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost	Current Value	
Common Stocks:				
Adobe Inc.	12 shares common stock	\$ 2,179	\$ 4,500	
Albemarle Corp	42 shares common stock	7,436	2,459	
Ally Financial Inc.	160 shares common stock	4,398	5,226	
Alphabet Inc.	98 shares common stock	4,106	15,562	
Amazon.com Inc.	86 shares common stock	9,492	15,860	
American Electric Power Company	43 shares common stock	3,357	4,659	
Apple Inc.	81 shares common stock	2,092	17,212	
ASML Holding N.V. NY	7 shares common stock	3,915	4,677	
AT&T Inc.	256 shares common stock	5,204	7,091	
Bath and Body Works Inc.	163 shares common stock	6,224	4,973	
Blackrock Inc.	4 shares common stock	2,336	3,657	
Capital One Financial Corp.	26 shares common stock	2,951	4,687	
CarMax Inc.	64 shares common stock	5,317	4,139	
Carnival Corp	172 shares of common stock	4,641	3,154	
Citigroup, Inc.	76 shares common stock	3,492	5,197	
CNH Industrial	338 shares common stock	4,217	3,911	
ConocoPhillips	31 shares common stock	3,225	2,763	
Costco Wholesale Corporation	3 shares common stock	1,267	2,983	
CVS Health Corporation	77 shares common stock	6,226	5,137	
Danaher Corp.	19 shares common stock	4,041	3,787	
Edwards Lifesciences Corp.	65 shares common stock	5,809	4,907	
EOG Resources, Inc.	15 shares common stock	1,675	1,655	
Equifax, Inc.	22 shares common stock	4,691	5,723	
Fortinet, Inc.	77 shares common stock	4,485	7,990	
Franklin Templeton ETF Tr India	255 shares common stock	9,759	9,761	
Huntington Ingalls Industries, Inc.	16 shares common stock	3,790	3,685	
Intel Corp	186 shares common stock	5,199	3,739	
KLA Corp.	8 shares common stock	2,713	5,622	
Kraft Heinz Co	188 shares common stock	5,740	5,471	
Meta Platforms Inc.	16 shares common stock	4,647	8,784	
Microsoft Corporation	57 shares common stock	3,908	22,530	
Molson Coors Beverage Company	88 shares common stock	5,016	5,063	
Mosaic Co	119 shares common stock	3,440	3,618	
NiSource, Inc.	129 shares common stock	3,396	5,045	
Nvidia Corp.	123 shares common stock	13,972	13,397	
PayPal Holdings Inc.	63 shares common stock	4,162	4,148	
Pinterest Inc.	195 shares common stock	5,207	4,937	
Roche Holding Ltd.	101 shares common stock	4,130	4,137	

WILCO AUTOMOTIVE RETIREMENT PLAN
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
FORM 5500, SCHEDULE H, PART IV, LINE 4i (CONTINUED)
EIN: 36-6491924, PLAN NUMBER: 001

APRIL 30, 2025

(a)	(b)	(c)	(d)	(e)
Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost	Current Value	
Common Stocks (continued):				
Salesforce Inc.	19 shares common stock	\$ 3,017	\$ 5,105	
Schlumberger Ltd.	118 shares common stock	4,783	3,923	
Sunrun Inc.	81 shares common stock	1,773	558	
Taiwan Semiconductor Mfg Co	30 shares common stock	2,752	5,001	
Thermo Fisher Scientific Inc.	8 shares common stock	4,285	3,432	
Tyson Foods Inc.	100 shares common stock	5,484	6,124	
United Airlines Holdings Inc.	29 shares common stock	1,287	1,996	
UnitedHealth Group Inc.	11 shares common stock	1,994	4,526	
Veeva Systems Inc.	17 shares common stock	2,771	3,973	
Ventas, Inc.	78 shares common stock	3,524	5,466	
Visa Inc.	19 shares common stock	3,853	6,564	
Warner Bros Discovery Inc.	248 shares common stock	4,289	2,150	
Wells Fargo & Co	82 shares common stock	3,487	5,823	
Total Common Stocks		<u>221,154</u>	<u>296,487</u>	
Mutual Funds:				
Causeway	International Value Fund - Institutional Class; 1,869 shares	38,712	38,675	
Driehaus	Emerging Markets Growth Fund - Institutional Class; 898 shares	29,868	33,569	
Fidelity	International Index Fund; 1,479 shares	70,156	78,992	
Janus Henderson	Enterprise Fund - Class N; 211 shares	29,164	28,722	
JPMorgan	Undiscovered Managers Behavioral Value Fund - Class R6; 244 shares	19,546	18,548	
New York Life	Pinestone International Equity Fund - Class R6; 2016 shares	33,781	34,104	
Oberweis	Small Cap Opportunities Fund - Institutional Class; 948 shares	23,024	22,276	
Putnam	Large Cap Value Fund - Class R6; 1,655 shares	55,468	56,508	
Vanguard	500 Index Fund - Admiral Shares; 375 shares	156,967	193,031	
Vanguard	Growth Index Fund - Admiral Shares; 728 shares	124,116	141,985	
Victory	Sycamore Established Value Fund - Class I; 543 shares	26,206	23,550	
Total Mutual Funds		<u>\$ 607,008</u>	<u>\$ 669,960</u>	

WILCO AUTOMOTIVE RETIREMENT PLAN
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
FORM 5500, SCHEDULE H, PART IV, LINE 4i (CONTINUED)
EIN: 36-6491924, PLAN NUMBER: 001

APRIL 30, 2025

(a)	(b)	(c)	(d)	(e)
Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost	Current Value	
Corporate Bonds:				
Amazon.com Inc.	50,000 Note; 4.55%, due 12/01/2027; callable	\$ 50,315	\$ 50,774	
Amgen Inc.	50,000 Note; 2.20%, due 02/21/2027; callable	52,082	48,219	
Apple Inc.	50,000 Note; 3.20%, due 05/11/2027; callable	49,907	49,414	
Chevron Corporation	50,000 Note; 1.995%, due 05/11/2027; callable	51,810	48,095	
CVS Health Corporation	50,000 Note; 1.30%, due 08/21/2027; callable	48,883	46,488	
Emerson Electric Co.	50,000 Note; 0.875%, due 10/15/2026; callable	49,251	47,672	
Goldman Sachs Group	50,000 Note; fixed to float rate, due 9/29/2026	50,000	50,348	
Oracle Corporation	50,000 Note; 1.65%, due 03/25/2026; callable	50,506	48,727	
United Health Group	50,000 Note; 1.25%, due 01/15/2026; callable	50,586	48,921	
Walt Disney Company	50,000 Note; 1.75%, due 01/13/2026; callable	51,575	49,156	
Total Corporate Bonds		<u>504,915</u>	<u>487,814</u>	
U.S. Governmental Securities:				
U.S. Federal Government	50,000 U.S. Treasury Note; 5.00%; due 08/31/2025	49,980	50,100	
U.S. Federal Government	50,000 U.S. Treasury Note; 5.00%; due 09/30/2025	49,971	50,159	
U.S. Federal Government	50,000 U.S. Treasury Note; 5.00%; due 10/31/2025	49,941	50,203	
U.S. Federal Government	50,000 U.S. Treasury Note; 4.875%; due 11/30/2025	49,924	50,217	
U.S. Federal Government	50,000 U.S. Treasury Note; 4.25%; due 12/31/2025	49,879	50,064	
U.S. Federal Government	66,549 U.S. Treasury Note; 0.125%; treasury inflation protection security	64,871	66,378	
U.S. Federal Government	50,000 U.S. Treasury Note; 2.75%; due 02/15/2028	48,500	48,901	
U.S. Federal Government	50,000 U.S. Treasury Note; 2.375%; due 05/15/2029	49,910	47,614	
Total U.S. Government Securities		<u>412,976</u>	<u>413,636</u>	
Money Market Fund:				
Goldman Sachs	Government Institutional Fund; 40,811 shares	40,811	40,811	
Total Assets (Held at End of Year)		<u>\$ 1,786,864</u>	<u>\$ 1,908,708</u>	

* An asterisk in column (a) denotes party-in-interest to the Plan.