# Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

## Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

**2020**

**This Form is Open to Public Inspection**

## Part I Annual Report Identification Information

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

**A** This return/report is for:
- [ ] a multiemployer plan
- [ ] a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
- [X] 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:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

## Part II Basic Plan Information—enter all requested information

**1a** Name of plan
BLUE BELL CREAMERIES, INC. EMPLOYEE STOCK OWNERSHIP PLAN

**1b** Three-digit plan number (PN) ▶ 002

**1c** Effective date of plan 01/01/1989

**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)
BLUE BELL CREAMERIES, INC.

P.O. BOX 1807
BRENHAM, TX 77834-1807

**2b** Employer Identification Number (EIN) 74-2983264

**2c** Plan Sponsor's telephone number 979-836-7977

**2d** Business code (see instructions) 311500

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

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

| | | | |
|---|---|---|---|
| **SIGN HERE** | Filed with authorized/valid electronic signature. | 10/08/2021 | SAM SOMMER, CFO |
| | **Signature of plan administrator** | Date | Enter name of individual signing as plan administrator |
| **SIGN HERE** | Filed with authorized/valid electronic signature. | | |
| | **Signature of employer/plan sponsor** | Date | Enter name of individual signing as employer or plan sponsor |
| **SIGN HERE** | Filed with authorized/valid electronic signature. | | |
| | **Signature of DFE** | Date | Enter name of individual signing as DFE |

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

**3b** Administrator's EIN

**3c** Administrator's telephone number

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

**a** Sponsor's name

**c** Plan Name

**4b** EIN

**4d** PN

| | | | |
|---|---|---|---|
| **5** | Total number of participants at the beginning of the plan year | **5** | 3397 |
| **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)** | 3281 |
| **a(2)** | Total number of active participants at the end of the plan year | **6a(2)** | 3353 |
| **b** | Retired or separated participants receiving benefits | **6b** | |
| **c** | Other retired or separated participants entitled to future benefits | **6c** | 203 |
| **d** | Subtotal. Add lines **6a(2)**, **6b**, and **6c** | **6d** | 3556 |
| **e** | Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. | **6e** | 3 |
| **f** | Total. Add lines **6d** and **6e** | **6f** | 3559 |
| **g** | Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) | **6g** | 3559 |
| **h** | Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested | **6h** | 236 |
| **7** | Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) | **7** | |

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

2E

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

**9a** Plan funding arrangement (check all that apply)

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

**9b** Plan benefit arrangement (check all that apply)

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

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

**a Pension Schedules**

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

**b General Schedules**

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

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

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

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

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

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

Receipt Confirmation Code_____

# SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

## Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

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

OMB No. 1210-0110

**2020**

**This Form is Open to Public Inspection**

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

**A** Name of plan
BLUE BELL CREAMERIES, INC. EMPLOYEE STOCK OWNERSHIP PLAN

**B** Three-digit plan number (PN) ▶ 002

**C** Plan sponsor's name as shown on line 2a of Form 5500
BLUE BELL CREAMERIES, INC.

**D** Employer Identification Number (EIN)
74-2983264

## Part I Asset and Liability Statement

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

| Assets | | (a) Beginning of Year | (b) End of Year |
|---|---|---|---|
| **a** Total noninterest-bearing cash | 1a | 125602 | 4339 |
| **b** Receivables (less allowance for doubtful accounts): | | | |
| **(1)** Employer contributions | 1b(1) | 1268447 | 1614278 |
| **(2)** Participant contributions | 1b(2) | | |
| **(3)** Other | 1b(3) | | |
| **c** General investments: | | | |
| **(1)** Interest-bearing cash (include money market accounts & certificates of deposit) | 1c(1) | 383260 | 476169 |
| **(2)** U.S. Government securities | 1c(2) | 2421634 | 1673395 |
| **(3)** Corporate debt instruments (other than employer securities): | | | |
| **(A)** Preferred | 1c(3)(A) | | |
| **(B)** All other | 1c(3)(B) | | |
| **(4)** Corporate stocks (other than employer securities): | | | |
| **(A)** Preferred | 1c(4)(A) | | |
| **(B)** Common | 1c(4)(B) | | 2266165 |
| **(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) | | |
| **(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) | | 1825062 |
| **(14)** Value of funds held in insurance company general account (unallocated contracts) | 1c(14) | | |
| **(15)** Other | 1c(15) | | 1464327 |

| | | | **(a)** Beginning of Year | **(b)** End of Year |
|---|---|---|---|---|
| **1d** | Employer-related investments: | | | |
| | **(1)** Employer securities | **1d(1)** | 18018001 | 30303000 |
| | **(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** | 22216944 | 39626735 |
| | **Liabilities** | | | |
| **g** | Benefit claims payable | **1g** | | |
| **h** | Operating payables | **1h** | | |
| **i** | Acquisition indebtedness | **1i** | | |
| **j** | Other liabilities | **1j** | | |
| **k** | Total liabilities (add all amounts in lines 1g through1j) | **1k** | | |
| | **Net Assets** | | | |
| **l** | Net assets (subtract line 1k from line 1f) | **1l** | 22216944 | 39626735 |

## 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)** | 1614278 | |
| | **(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)** | | 1614278 |
| **b** | **Earnings on investments:** | | | |
| | **(1)** Interest: | | | |
| | **(A)** Interest-bearing cash (including money market accounts and certificates of deposit) | **2b(1)(A)** | 54 | |
| | **(B)** U.S. Government securities | **2b(1)(B)** | 71089 | |
| | **(C)** Corporate debt instruments | **2b(1)(C)** | | |
| | **(D)** Loans (other than to participants) | **2b(1)(D)** | | |
| | **(E)** Participant loans | **2b(1)(E)** | | |
| | **(F)** Other | **2b(1)(F)** | 5883 | |
| | **(G)** Total interest. Add lines **2b(1)(A)** through **(F)** | **2b(1)(G)** | | 77026 |
| | **(2)** Dividends: **(A)** Preferred stock | **2b(2)(A)** | | |
| | **(B)** Common stock | **2b(2)(B)** | 2468190 | |
| | **(C)** Registered investment company shares (e.g. mutual funds) | **2b(2)(C)** | 109085 | |
| | **(D)** Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)** | **2b(2)(D)** | | 2577275 |
| | **(3)** Rents | **2b(3)** | | |
| | **(4)** Net gain (loss) on sale of assets: **(A)** Aggregate proceeds | **2b(4)(A)** | | |
| | **(B)** Aggregate carrying amount (see instructions) | **2b(4)(B)** | | |
| | **(C)** Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result | **2b(4)(C)** | | |
| | **(5)** Unrealized appreciation (depreciation) of assets: **(A)** Real estate | **2b(5)(A)** | | |
| | **(B)** Other | **2b(5)(B)** | 12285000 | |
| | **(C)** Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)** | **2b(5)(C)** | | 12285000 |

| | | (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) | | 2190333 |
| **c** Other income | 2c | | |
| **d** Total income. Add all **income** amounts in column (b) and enter total | 2d | | 18743912 |
| **Expenses** | | | |
| **e** Benefit payment and payments to provide benefits: | | | |
| **(1)** Directly to participants or beneficiaries, including direct rollovers | 2e(1) | 1321479 | |
| **(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) | | 1321479 |
| **f** Corrective distributions (see instructions) | 2f | | |
| **g** Certain deemed distributions of participant loans (see instructions) | 2g | | |
| **h** Interest expense | 2h | | |
| **i** Administrative expenses: **(1)** Professional fees | 2i(1) | | |
| **(2)** Contract administrator fees | 2i(2) | 12642 | |
| **(3)** Investment advisory and management fees | 2i(3) | | |
| **(4)** Other | 2i(4) | | |
| **(5)** Total administrative expenses. Add lines **2i(1)** through **(4)** | 2i(5) | | 12642 |
| **j** Total expenses. Add all **expense** amounts in column (b) and enter total | 2j | | 1334121 |
| **Net Income and Reconciliation** | | | |
| **k** Net income (loss). Subtract line **2j** from line **2d** | 2k | | 17409791 |
| **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)** [X] 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)** [X] DOL Regulation 2520.103-8 **(2)** [ ] DOL Regulation 2520.103-12(d) **(3)** [ ] neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

**(1)** Name: HAM, LANGSTON & BREZINA, LLP **(2)** EIN: 76-0448495

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

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

## Part IV Compliance Questions

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

During the plan year:

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

| | | | Yes | No | Amount |
|---|---|---|---|---|---|
| **b** | Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.) | **4b** | | X | |
| **c** | Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.) | **4c** | | X | |
| **d** | Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.) | **4d** | | X | |
| **e** | Was this plan covered by a fidelity bond? | **4e** | X | | 5000000 |
| **f** | Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty? | **4f** | | X | |
| **g** | Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser? | **4g** | | X | |
| **h** | Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser? | **4h** | | X | |
| **i** | Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.) | **4i** | X | | |
| **j** | Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.) | **4j** | X | | |
| **k** | Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? | **4k** | | X | |
| **l** | Has the plan failed to provide any benefit when due under the plan? | **4l** | | X | |
| **m** | If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.) | **4m** | | X | |
| **n** | If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3 | **4n** | | X | |

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

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

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

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

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

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

# SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

## Retirement Plan Information

This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

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

OMB No. 1210-0110

**2020**

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

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

**A** Name of plan
BLUE BELL CREAMERIES, INC. EMPLOYEE STOCK OWNERSHIP PLAN

**B** Three-digit plan number (PN) ▶ 002

**C** Plan sponsor's name as shown on line 2a of Form 5500
BLUE BELL CREAMERIES, INC.

**D** Employer Identification Number (EIN)
74-2983264

## Part I Distributions

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

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

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

EIN(s): _____ _____

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

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

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

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

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

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

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

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

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

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

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

## Part III Amendments

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

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

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

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

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

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

## Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

**a** Name of contributing employer

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

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

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

---

**a** Name of contributing employer

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

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

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

---

**a** Name of contributing employer

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

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

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

---

**a** Name of contributing employer

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

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

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

---

**a** Name of contributing employer

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

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

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

---

**a** Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation_____

# BLUE BELL CREAMERIES, INC.
# EMPLOYEE STOCK OWNERSHIP PLAN AND TRUST

## FINANCIAL STATEMENTS AND SUPPLEMENTAL SCHEDULES
## WITH INDEPENDENT AUDITOR'S REPORT
## As of and for the Years Ended December 31, 2020 and 2019

# BLUE BELL CREAMERIES, INC.
# EMPLOYEE STOCK OWNERSHIP PLAN AND TRUST
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* Other schedules required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because they are not applicable.

Ham, Langston & Brezina, L.L.P.
CPAs and Advisors

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Houston, Texas 77034
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# INDEPENDENT AUDITOR'S REPORT

To the Benefit Plan Committee
Blue Bell Creameries, Inc. Employee Stock Ownership Plan and Trust:

**Report on the Financial Statements**

We were engaged to audit the accompanying financial statements of the Blue Bell Creameries, Inc. Employee Stock Ownership Plan and Trust (the "Plan"), which comprise the Statements of Net Assets Available for Benefits as of December 31, 2020 and 2019, and the related Statements of Changes in Net Assets Available for Benefits for the years then ended, and the related notes to the financial statements.

***Management's Responsibility for the Financial Statements***

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

***Auditor's Responsibility***

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

***Basis for Disclaimer of Opinion***

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

***Disclaimer of Opinion***

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

***Other Matters***

The supplemental schedules, Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2020 and Schedule H, Line 4j – Schedule of Reportable Transactions for the year ended December 31, 2020, are required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on these supplemental schedules.

**Report on Form and Content in Compliance with DOL Rules and Regulations**

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

Hann, Langston & Bregina, LLP

Houston, Texas
October 7, 2021

# BLUE BELL CREAMERIES, INC.
# EMPLOYEE STOCK OWNERSHIP PLAN AND TRUST
## STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
### DECEMBER 31, 2020 AND 2019

| | 2020 | 2019 |
|---|---|---|
| Assets: | | |
| Cash | $ 4,339 | $ 125,602 |
| Investments: | | |
| Investments at fair value | 7,705,118 | 2,804,895 |
| Investment in Blue Bell Creameries U.S.A., Inc. common stock | 30,303,000 | 18,018,000 |
| Total investments | 38,008,118 | 20,822,895 |
| Receivables: | | |
| Employer contributions | 1,614,278 | 1,268,447 |
| Total receivables | 1,614,278 | 1,268,447 |
| Net assets available for benefits | $ 39,626,735 | $ 22,216,944 |

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

# BLUE BELL CREAMERIES, INC.
# EMPLOYEE STOCK OWNERSHIP PLAN AND TRUST
## STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
### FOR THE YEARS ENDED DECEMBER 31, 2020 AND 2019

| | 2020 | 2019 |
|---|---|---|
| Investment income: | | |
| Dividend and interest income | $ 2,648,418 | $ 864,373 |
| Net appreciation in value of investments at fair value | 2,190,333 | 2,424,763 |
| Net appreciation in fair value of Blue Bell Creameries U.S.A., Inc. common stock | 12,285,000 | 351,000 |
| Other income | 5,883 | 7,133 |
| Total investment income | 17,129,634 | 3,647,269 |
| Employer contributions | 1,614,278 | 1,268,447 |
| Total additions | 18,743,912 | 4,915,716 |
| Deductions from net assets attributed to: | | |
| Benefits and withdrawals | 1,321,479 | 1,833,360 |
| Administrative expenses | 12,642 | 6,824 |
| Total deductions | 1,334,121 | 1,840,184 |
| Net increase in net assets available for benefits before transfer to affiliated plan | 17,409,791 | 3,075,532 |
| Transfer to Blue Bell Creameries, Inc. Profit Sharing Plan | - | (27,965,667) |
| Net increase (decrease) in net assets available for benefits | 17,409,791 | (24,890,135) |
| Net assets available for benefits, beginning of year | 22,216,944 | 47,107,079 |
| Net assets available for benefits, end of year | $ 39,626,735 | $ 22,216,944 |

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

# BLUE BELL CREAMERIES, INC.
# EMPLOYEE STOCK OWNERSHIP PLAN AND TRUST
## NOTES TO FINANCIAL STATEMENTS

### 1. Description of the Plan

The following description of Blue Bell Creameries, Inc. (the "Company") Employee Stock Ownership Plan and Trust (the "Plan") provides only general information. Participants should refer to the Plan Document for a more complete description of the Plan's provisions.

#### General

The Plan, adopted by the Company's board of directors and effective December 12, 1989, was established for the exclusive benefit of the participating employees and their beneficiaries. Employees who have attained age 18 become eligible to participate in the Plan on their date of hire.

The Plan has been amended from time to time to comply with the most recent statutory and regulatory changes applicable to plans maintained under Code Section 401(a) and 401(k) of the Internal Revenue Code ("IRC"). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

Effective March 25, 2019, a portion of the Plan's assets totaling $27,965,667, which were allocated to the accounts of active and former participants with account balances as of January 1, 2019, were transferred to the corresponding participant accounts established in the Blue Bell Creameries, Inc. Profit Sharing Plan.

#### Administration

The Plan is administered by an administrative committee (the "Plan Committee") appointed by the Company's board of directors, and accordingly, certain administrative functions are performed by officers or employees of the Company. No officers or employees receive compensation from the Plan.

Lone Star Trust & Investment Services ("Lone Star") serves as trustee of the Plan and as custodian of Blue Bell Creameries U.S.A., Inc. common stock. TD Ameritrade Trust Company served as custodian of all investments in the Plan except for the Blue Bell Creameries U.S.A., Inc. common stock from January 1, 2019 through December 5, 2019. Effective December 6, 2019, Matrix Trust Company serves as custodian of all investments in the Plan, except for the Blue Bell Creameries U.S.A., Inc. common stock. Retirement Horizons Inc. Acquisition dba Definiti LLC., serves as recordkeeper for the Plan.

#### Contributions

The Plan is a non-contributory plan funded by discretionary employer contributions, which may be in the form of cash or in common stock of Blue Bell Creameries U.S.A., Inc. (the "Parent Company"). The Company's contribution is approved by its board of directors and is not to exceed the total amount deductible under Section 404 of the IRC.

#### Participant Accounts

The Plan is a defined contribution plan under which a separate individual account is established for each participant. Participants who are employed on December 31 of each Plan year shall receive their allocable share of any Company contributions. The Company's contributions, if any, are allocated to the accounts of each eligible participant's employer contribution account in that proportion which the participant's annual compensation for the Plan year bears to the total annual compensation of all participants for the Plan year. However, any participant who terminates for any reason other than retirement, death or disability during a Plan year and prior to December 31 of such Plan year shall not participate in the employer contribution for the respective allocation period.

#### Vesting and Payment of Benefits

In the event a participant's employment is terminated due to retirement, disability or death, such participant becomes fully vested in his/her account.

**1. Description of the Plan, continued**

**Vesting and Payment of Benefits, continued**

If a participant terminates service prior to his/her normal retirement date for reasons other than death or disability, such participant's vested interest in his/her account shall be determined as follows:

| Years of Service | Vested Percentage |
|---|---|
| Less than 3 | 0% |
| 3 or greater | 100% |

Distribution of the vested portion of the account balance of terminated employees will generally be made by lump sum cash distribution.

**Diversification**

Diversification is offered to participants close to retirement so that they may have the opportunity to move part of the value of their investment in Company common stock into investments that are more diversified. Participants who are at least age 55 with at least 10 years of participation in the Plan may elect to diversify up to 50% of their account.

**Forfeited Accounts**

All contributions credited to a participant's account, but not vested, are forfeited by the participant. Forfeitures of the unvested portion of the account balance of terminated participants will generally be used to reduce the employer contribution for the Plan year in which forfeiture occurs. Forfeitures available to reduce future employer contributions totaled $0 and $112,901, at December 31, 2020 and 2019, respectively.

During 2020, the Company utilized $112,584 in available forfeitures to reduce the 2019 employer contribution. The employer contribution and employer contribution receivable included in the accompanying 2019 Statement of Net Assets Available for Benefits and the Statement of Changes in Net Assets Available for Benefits, respectively, have been presented net of forfeitures applied.

**Administrative Expenses**

The Plan's expenses are paid either by the Plan or the Company, as provided by the Plan document. Expenses that are paid directly by the Company are excluded from these financial statements. Certain expenses incurred in connection with the general administration of the Plan that are paid by the Plan are recorded as deductions from net assets in the accompanying Statements of Changes in Net Assets Available for Benefits

**Expense Offset Arrangements**

Fees incurred by the Plan for the investment management services are included in net appreciation (depreciation) in fair value of investments, as they are paid through revenue sharing, rather than a direct payment.

**2. Summary of Significant Accounting Policies**

**Basis of Accounting**

The financial statements of the Plan are prepared under the accrual method of accounting in accordance with accounting principles generally accepted in the United States of America ("U.S. GAAP").

**Use of Estimates**

The preparation of the financial statements in conformity with U.S. GAAP requires Plan management to make estimates and assumptions that affect the reported amount of net assets available for benefits and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

**2. Summary of Significant Accounting Policies, continued**

**Risks and Uncertainties**

The Plan invests in the Parent Company's common stock and other investment securities, which are exposed to various risks, such as interest rate, market, and credit risks. The Parent Company's common stock is also exposed to risks related to valuation assumptions based on earnings, cash flows, and other such techniques. Due to the level of risk associated with the investment in the Parent Company's common stock and other investment securities, and to uncertainties inherent in estimates and assumptions used for the valuation of the Parent Company's common stock, it is at least reasonably possible that changes in the value of the common stock and other investment securities will occur in the near term and that such changes could materially affect the amounts reported in the Statements of Net Assets Available for Benefits and the Statements of Changes in Net Assets Available for Benefits.

The COVID-19 outbreak, which was declared a pandemic by the World Health Organization on March 11, 2020, has triggered volatility in financial markets and a significant negative impact on the global economy. However, because the values of the Plan's individual investments have and will fluctuate in response to changing market conditions, the amount of losses that will be recognized in subsequent periods, if any, cannot be determined. The full impact of the COVID-19 outbreak continues to evolve and is unknown at the date of this report.

**Investment Valuation and Income Recognition**

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

The Plan presents in the Statements of Changes in Net Assets Available for Benefits the net appreciation (depreciation) in the fair value of its investments, which consists of realized gains or losses on investments sold during the year and unrealized appreciation (depreciation) of investments held at the end of the year. 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.

**Benefit Payments**

Benefits are recorded when paid.

**3. Fair Value Measurements**

ASC 820 establishes 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) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy under ASC 820 are described below:

**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.

**3. Fair Value Measurements, continued**

**Level 3** Inputs to the valuation methodology are unobservable and not corroborated by market data and significant to the fair value measurement.

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

In determining fair value, the Plan uses the market approach, which uses prices and other relevant data based on market transactions involving identical or comparable assets and liabilities.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2020 and 2019.

*Money market deposit account, common stocks, and exchange traded funds:* Valued at the daily closing price as reported on the active market in which the individual securities are traded.

*Mutual funds*: Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

*Investment in Blue Bell Creameries U.S.A., Inc. Common Stock*: Valued based on quotations prepared by an independent appraiser.

*Government agency obligations:* Valued based on quoted market values or market values of similar obligations at similar rates.

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

The following tables set forth by level, within the fair value hierarchy, the Plan's assets measured at fair value as of December 31, 2020 and 2019:

| | Assets at Fair Value as of December 31, 2020 | | | |
|---|---|---|---|---|
| | Level 1 | Level 2 | Level 3 | Total |
| Money market deposit account | $ 476,169 | $ - | $ - | $ 476,169 |
| Mutual funds | 1,825,062 | - | - | 1,825,062 |
| Common stocks | 2,266,165 | - | - | 2,266,165 |
| Parent Company common stock | - | 30,303,000 | - | 30,303,000 |
| Government agency obligations | - | 1,673,395 | - | 1,673,395 |
| Exchange traded funds | 1,464,327 | - | - | 1,464,327 |
| Total assets at fair value | $ 6,031,723 | $ 31,976,395 | $ - | $ 38,008,118 |

| | Assets at Fair Value as of December 31, 2019 | | | |
|---|---|---|---|---|
| | Level 1 | Level 2 | Level 3 | Total |
| Money market deposit account | $ 383,260 | $ - | $ - | $ 383,260 |
| Parent Company common stock | - | 18,018,000 | - | 18,018,000 |
| Government agency obligations | - | 2,421,635 | - | 2,421,635 |
| Total assets at fair value | $ 383,260 | $ 20,439,635 | $ - | $ 20,822,895 |

**4. Information Certified by the Plan's Custodians (Unaudited)**

The Plan administrator has elected the method of annual reporting and compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, certain information related to investments disclosed in the accompanying financial statements and supplemental schedules, excluding Blue Bell Creameries, U.S.A., Inc. common stock, held at December 31, 2020 and 2019, and net appreciation (depreciation) in fair value of investments, interest and dividends for the years then ended, were obtained or derived from information supplied to the Plan administrator and certified as complete and accurate by the Custodians.

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

**5. Tax Status**

The Plan obtained its latest determination letter on November 6, 2015, in which the Internal Revenue Service ("IRS") stated that the Plan and related trust, as then designed, was in compliance with the applicable requirements of the IRC. Although the Plan has been amended since receiving the determination letter, the Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC, and therefore, believes that the Plan is qualified, and the related trust is tax-exempt.

U.S. GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the organization has taken a significant uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, no audits for any tax periods are in progress.

**6. Benefit Obligations**

The Plan has a commitment to pay benefits to retired participants or other vested participants withdrawing from the Plan of approximately $1,621,957 and $984,676 at December 31, 2020 and 2019, respectively.

**7. Plan Termination**

Although it has not expressed any intent to do so, the Company has the right to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, all participants become fully vested in their account balances.

**8. Party-In-Interest Transactions**

The Plan invests in the Parent Company's common stock and holds a money market account with the Custodians. Such transactions qualify as party-in-interest transactions, as defined by ERISA. However, such transactions are permitted under the provisions of the Plan and are exempt from the prohibition of party-in-interest transactions under ERISA.

**9. Subsequent Events**

Plan management has evaluated all subsequent events through October 7, 2021, which is the date the financial statements were available to be issued and has concluded that there are no other significant events to be reported.

**SUPPLEMENTAL SCHEDULES**

# BLUE BELL CREAMERIES, INC.
# EMPLOYEE STOCK OWNERSHIP PLAN AND TRUST
## SCHEDULE H, Line 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
### DECEMBER 31, 2020

**EIN: 74-2983264**
**PN: 002**

| (a) | (b) Identity of Issue, Borrower, Lessor, or Similar Party | (c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value | Par Value or Number of Shares | (d) Cost | (e) Current Value |
|---|---|---|---|---|---|
| | **Money market deposit account** | | | | |
| * | TD Ameritrade | MONEY MARKET DEPOSIT ACCOUNT | 476,169 | $ 476,169 | $ 476,169 |
| | **Government agency obligations** | | | | |
| | Federal Home Loan Mortgage Corporation | FEDERAL HOME LOAN FG E02703 4% 07/01/2025 | 1,375 | $ 35,149 | $ 35,718 |
| | Federal Home Loan Mortgage Corporation | FHLMC POOL FG G18519 3.5% 07/01/2029 | 1,015 | 270,525 | 278,545 |
| | Federal Home Loan Mortgage Corporation | FHLMC FG J12073 4% 04/01/2025 | 2,000 | 56,974 | 57,874 |
| | Federal National Mortgage Association | FNMA POOL FN AH6827 4% 03/01/2026 | 1,000 | 51,424 | 52,385 |
| | Federal National Mortgage Association | FNMA FN AJ4093 3.5% 10/01/2026 | 2,125 | 179,867 | 183,760 |
| | Federal National Mortgage Association | FNMA FN AJ7723 104-16 3.5% 12/01/2026 | 1,725 | 172,189 | 175,950 |
| | Federal National Mortgage Association | FNMA FN AK3264 FNCI 3 2012 3% 02/01/2027 | 2,050 | 277,048 | 284,256 |
| | Federal National Mortgage Association | FNMA FN 890112 4% 04/01/2024 | 2,500 | 29,377 | 29,858 |
| | Federal National Mortgage Association | FNMA POOL FN 930527 4.5% 02/01/2024 | 1,559 | 14,747 | 14,970 |
| | Federal National Mortgage Association | FNMA FN AA4315 4% 04/01/2024 | 1,100 | 22,030 | 22,387 |

# BLUE BELL CREAMERIES, INC.
# EMPLOYEE STOCK OWNERSHIP PLAN AND TRUST
## SCHEDULE H, Line 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
### DECEMBER 31, 2020

**EIN: 74-2983264**
**PN: 002**

| (a) | (b) Identity of Issue, Borrower, Lessor, or Similar Party | (c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value | Par Value or Number of Shares | (d) Cost | (e) Current Value |
|---|---|---|---|---|---|
| | **Government agency obligations, continued** | | | | |
| | Federal National Mortgage Association | FNMA POOL FN AC3250 4% 09/01/2024 | 1,050 | $ 25,929 | $ 26,376 |
| | Federal National Mortgage Association | FNMA FN MA0771 3.5% 06/01/2021 | 1,010 | 4,339 | 4,565 |
| | Federal National Mortgage Association | FNMA FN MA1660 3% 11/01/2023 | 1,000 | 103,468 | 106,031 |
| | Federal National Mortgage Association | FNMA FN MA1999 3.5% 08/01/2024 | 1,000 | 137,453 | 140,436 |
| | Federal National Mortgage Association | FNMA POOL FN AE0276 4% 08/01/2025 | 1,575 | 65,797 | 66,895 |
| | Federal National Mortgage Association | FNMA FN AE0971 4% 05/01/2025 | 2,580 | 84,373 | 85,750 |
| | Federal National Mortgage Association | FNMA PASS-THRU INT 20 YEAR 5.5% 11/01/2025 | 1,150 | 24,488 | 25,299 |
| | Federal National Mortgage Association | FNMA PASS-THRU INT 20 YEAR 4.5% 12/01/2025 | 2,020 | 16,676 | 16,990 |
| | Federal National Mortgage Association | FNMA PASS-THRU INT 20 YEAR 5.5% 04/01/2026 | 1,005 | 17,609 | 18,053 |
| | Federal National Mortgage Association | FNMA FN AA7750 4% 06/01/2024 | 1,450 | 22,685 | 23,057 |
| | Federal Home Loan Mortgage Corporation | FHLMC FG G13482 4% 03/01/2024 | 1,670 | 23,857 | 24,242 |
| | **Total government agency obligations** | | | $ 1,636,003 | $ 1,673,395 |

# BLUE BELL CREAMERIES, INC.
## EMPLOYEE STOCK OWNERSHIP PLAN AND TRUST
### SCHEDULE H, Line 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
### DECEMBER 31, 2020

**EIN: 74-2983264**
**PN: 002**

| (a) | (b) Identity of Issue, Borrower, Lessor, or Similar Party | (c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value | Par Value or Number of Shares | (d) Cost | (e) Current Value |
|---|---|---|---|---|---|
| | **Mutual funds** | | | | |
| | AIG FUNDS | SELECT DIV GROWTH A | 1,503 | $ 25,000 | $ 25,030 |
| | BROWN CAPITAL MANAGEMENT | INTL SM CO INVESTOR | 4,412 | 87,919 | 112,904 |
| | BROWN CAPITAL MANAGEMENT | INTL SM CO INST | 2,232 | 29,595 | 57,905 |
| | MORGAN STANLEY | MULTI-CAP GROWTH TRUST I | 1,961 | 131,066 | 180,221 |
| | MORGAN STANLEY | DEVELOPING OPP I | 16,563 | 163,831 | 240,157 |
| | MORGAN STANLEY INSTITUTIONAL FUNDS | ASIA OPP I | 391 | 7,075 | 12,415 |
| | MORGAN STANLEY INSTITUTIONAL FUNDS | GLOBAL COUNTERPOINT I | 9,050 | 110,364 | 172,048 |
| | PIMCO INVESTMENTS | STOCKSPLUS LONG DURATION INST | 88,810 | 600,517 | 803,734 |
| | VIRTUS FUNDS | KAR MID CAP GROWTH A | 3,243 | 160,276 | 220,648 |
| | **Total mutual funds** | | | $ 1,315,642 | $ 1,825,062 |

# BLUE BELL CREAMERIES, INC.
# EMPLOYEE STOCK OWNERSHIP PLAN AND TRUST
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|---|---|---|---|---|---|
| | **Common stocks** | | | | |
| | 1OX GENOMICS INC COM CL A | Common stock | 181 | $ 14,775 | $ 25,630 |
| | ADOBE INC COM | Common stock | 107 | 43,830 | 53,513 |
| | ADYEN NV ADR UNSPONSORED | Common stock | 963 | 34,896 | 44,683 |
| | ALIBABA GROUP HOLDING LTD ADR SPONSORED | Common stock | 114 | 35,003 | 26,531 |
| | AMAZON COM INC COM | Common stock | 23 | 55,471 | 74,909 |
| | AMEDISYS INC COM | Common stock | 100 | 24,912 | 29,333 |
| | AMER WATER WORKS CO INC COM | Common stock | 167 | 21,431 | 25,603 |
| | ASML HOLDING NV ADR SPONSORED | Common stock | 96 | 34,849 | 46,954 |
| | AVALARA INC COM | Common stock | 233 | 23,950 | 38,419 |
| | BILL.COM HLDGS INC COM | Common stock | 462 | 37,681 | 63,063 |
| | BOEING CO COM | Common stock | 1 | 100 | 214 |
| | BRIGHT HORIZONS FAMILY SOLUTIO COM | Common stock | 162 | 14,100 | 28,024 |

# BLUE BELL CREAMERIES, INC.
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|---|---|---|---|---|---|
| | **Common stocks, continued** | | | | |
| | CINTAS CORP COM | Common stock | 109 | $ 26,292 | $ 38,541 |
| | COSTAR GROUP INC COM | Common stock | 43 | 30,480 | 39,744 |
| | COUPA SOFTWARE INCORPORATED COM | Common stock | 90 | 22,007 | 30,502 |
| | CROWDSTRIKE HOLDINGS INC COM CL A | Common stock | 196 | 18,180 | 41,517 |
| | DATADOG INC COM CL A | Common stock | 339 | 23,864 | 33,371 |
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| | DOMINOS PIZZA INC COM | Common stock | 63 | 23,021 | 24,226 |
| | EQY LIFESTYLE PROP INC COM USD0.01 | Common stock | 429 | 23,935 | 27,192 |
| | EVERBRIDGE INC COM | Common stock | 225 | 28,392 | 33,541 |
| | FISERV INC COM | Common stock | 1 | 87 | 114 |
| | FIVE9 INC COM | Common stock | 242 | 30,853 | 42,205 |
| | GLOBANT SA COM | Common stock | 137 | 16,453 | 29,813 |

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| | **Common stocks, continued** | | | | |
| | GOOSEHEAD INS INC COM CL A | Common stock | 541 | $ 41,635 | $ 67,489 |
| | GROCERY OUTLET HOLDING CORP COM | Common stock | 581 | 22,567 | 22,804 |
| | GSX TECHEDU INC ADR | Common stock | 351 | 17,639 | 18,150 |
| | IDEXX LABORATORIES INC COM | Common stock | 81 | 25,489 | 40,489 |
| | INTUIT INC COM | Common stock | 77 | 20,023 | 29,383 |
| | INTUITIVE SURGICAL INC COM | Common stock | 36 | 18,394 | 29,452 |
| | MARKETAXESS HLDGS INC COM | Common stock | 106 | 47,761 | 60,678 |
| | MASTERCARD INCORPORATED COM CL A | Common stock | 167 | 43,960 | 59,444 |
| | MEITUAN COM | Common stock | 983 | 34,887 | 36,617 |
| | MERCADOLIBRE INC COM | Common stock | 47 | 45,071 | 78,735 |
| | MICROSOFT CORP COM | Common stock | 241 | 42,574 | 53,554 |
| | MSCI INC COM | Common stock | 100 | 31,938 | 44,856 |

# BLUE BELL CREAMERIES, INC.
# EMPLOYEE STOCK OWNERSHIP PLAN AND TRUST
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| | OLD DOMINION FREIGHT LINE INC COM | Common stock | 130 | 19,849 | 25,439 |
| | PAYCOM SOFTWARE INC COM | Common stock | 97 | 24,488 | 43,868 |
| | PAYPAL HOLDINGS INC COM | Common stock | 179 | 26,612 | 41,922 |
| | POOL CORPORATION COM | Common stock | 94 | 24,382 | 35,167 |
| | PROGRESSIVE CORP (OHIO) COM | Common stock | 259 | 20,000 | 25,579 |
| | QUIDEL CORP COM | Common stock | 98 | 17,074 | 17,606 |
| | ROLLINS INC COM | Common stock | 624 | 16,574 | 24,362 |
| | SEA LIMITED ADR | Common stock | 211 | 31,862 | 42,000 |
| | SERVICENOW INC COM | Common stock | 72 | 25,952 | 39,631 |
| | SHOPIFY INC COM CL A | Common stock | 57 | 47,223 | 64,521 |
| | SITEONE LANDSCAPE SUPPLY INC COM | Common stock | 198 | 16,997 | 31,409 |
| | SNOWFLAKE INC COM CL A | Common stock | 100 | 24,129 | 28,140 |

# BLUE BELL CREAMERIES, INC.
# EMPLOYEE STOCK OWNERSHIP PLAN AND TRUST
## SCHEDULE H, Line 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
### DECEMBER 31, 2020

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|---|---|---|---|---|---|
| | **Common stocks, continued** | | | | |
| | SPOTIFY TECHNOLOGY SA COM | Common stock | 89 | 17,679 | 28,005 |
| | STONECO LTD COM | Common stock | 462 | 14,409 | 38,771 |
| | TAL EDUCATION GROUP ADR | Common stock | 899 | 58,375 | 64,287 |
| | TELADOC HEALTH INC COM | Common stock | 104 | 22,625 | 20,796 |
| | TENCENT HOLDINGS LIMITED ADR UNSPONSORED | Common stock | 461 | 35,012 | 33,141 |
| | THE TRADE DESK INC COM CL A | Common stock | 42 | 13,179 | 33,642 |
| | TWILIO INC COM CL A | Common stock | 87 | 16,267 | 29,450 |
| | UNITEDHEALTH GROUP INC COM | Common stock | 78 | 19,748 | 27,312 |
| | VEEVA SYSTEMS INC COM CL A | Common stock | 260 | 60,794 | 70,785 |
| | WASTE CONNECTIONS INC (CA) COM | Common stock | 248 | 21,653 | 25,477 |
| | WINGSTOP INC COM | Common stock | 211 | 26,132 | 28,001 |
| | ZOETIS INC COM CL A | Common stock | 156 | 17,563 | 25,748 |
| | ZOOM VIDEO COMMUNICATIONS INC COM CL A | Common stock | 49 | 24,358 | 16,529 |
| | **Total common stocks** | | | $ 1,662,788 | $ 2,266,165 |

# BLUE BELL CREAMERIES, INC.
# EMPLOYEE STOCK OWNERSHIP PLAN AND TRUST
## SCHEDULE H, Line 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
### DECEMBER 31, 2020

**EIN: 74-2983264**
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| (a) | (b) Identity of Issue, Borrower, Lessor, or Similar Party | (c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value | Par Value or Number of Shares | (d) Cost | (e) Current Value |
|---|---|---|---|---|---|
| | **Exchange traded funds** | | | | |
| | PROSHARES TRUST UL - TRAPRO QQQ ETF | Exchange traded fund | 2,270 | $ 269,598 | $ 412,686 |
| | SPDR SERIES TRUST SPDR BLOOMBERG ETF | Exchange traded fund | 8,647 | 791,525 | 791,397 |
| | VANGUARD SM CP VAL ETF | Exchange traded fund | 1,830 | 255,533 | 260,244 |
| | **Total exchange traded funds** | | | $ 1,316,656 | $ 1,464,327 |
| | **Company common Stock** | | | | |
| * | BLUE BELL CREAMERIES, U.S.A., INC. | Common stock | 234 | $ 18,018,000 | $ 30,303,000 |
| | **Total investments at fair value** | | | $ 24,425,257 | $ 38,008,118 |

* Represents party-in-interest

# BLUE BELL CREAMERIES, INC.
# EMPLOYEE STOCK OWNERSHIP PLAN AND TRUST
## SCHEDULE H, Line 4j - SCHEDULE OF REPORTABLE TRANSACTIONS
### FOR THE YEAR ENDED DECEMBER 31, 2020

**EIN: 74-2983264**
**PN: 002**

| (a) Identity of Party Involved | (b) Description of Asset | Number of Transactions | (c) Purchase Price | (d) Selling Price | (g) Cost of Asset | (h) Current Value of Asset on Transaction Date | (i) Net Gain or (Loss) |
|---|---|---|---|---|---|---|---|
| * TD Ameritrade Trust Company | Deposit Acct. – FDIC Insured Deposit Acct. IDA12 | 142 | $ 8,211,334 | $ - | $ 8,211,334 | $ 8,211,334 | $ - |
| * TD Ameritrade Trust Company | Deposit Acct. – FDIC Insured Deposit Acct. IDA12 | 94 | $ - | $ 7,938,425 | $ 7,938,425 | $ 7,938,425 | $ - |
| INVESCO QQQ TRUST SERIES I | Treasury Bond ETF | 2 | $ 618,586 | $ | $ 618,586 | $ 618,586 | $ - |
| INVESCO QQQ TRUST SERIES I | Treasury Bond ETF | 2 | $ - | $ 606,586 | $ 618,586 | $ 606,637 | $ (11,949) |
| PROSHARES ULTRAPRO | Treasury Bond ETF | 9 | $ 779,523 | $ - | $ 779,523 | $ 779,253 | $ - |
| PROSHARES ULTRAPRO | Treasury Bond ETF | 12 | $ - | $ 789,169 | $ 509,925 | $ 789,169 | $ 279,244 |

* Represents a party-in-interest

** This schedule is a listing of single transactions and series of transactions of the same security that exceed 5% of the Plan's net assets as of January 1, 2020. The information in this schedule was obtained or derived from information supplied to the Company and certified as complete and accurate by the Custodians.

# BLUE BELL CREAMERIES, INC.
# EMPLOYEE STOCK OWNERSHIP PLAN AND TRUST
## SCHEDULE H, Line 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
### DECEMBER 31, 2020

**EIN: 74-2983264**
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| (a) | (b) Identity of Issue, Borrower, Lessor, or Similar Party | (c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value | Par Value or Number of Shares | (d) Cost | (e) Current Value |
|---|---|---|---|---|---|
| | **Money market deposit account** | | | | |
| * | TD Ameritrade | MONEY MARKET DEPOSIT ACCOUNT | 476,169 | $ 476,169 | $ 476,169 |
| | **Government agency obligations** | | | | |
| | Federal Home Loan Mortgage Corporation | FEDERAL HOME LOAN FG E02703 4% 07/01/2025 | 1,375 | $ 35,149 | $ 35,718 |
| | Federal Home Loan Mortgage Corporation | FHLMC POOL FG G18519 3.5% 07/01/2029 | 1,015 | 270,525 | 278,545 |
| | Federal Home Loan Mortgage Corporation | FHLMC FG J12073 4% 04/01/2025 | 2,000 | 56,974 | 57,874 |
| | Federal National Mortgage Association | FNMA POOL FN AH6827 4% 03/01/2026 | 1,000 | 51,424 | 52,385 |
| | Federal National Mortgage Association | FNMA FN AJ4093 3.5% 10/01/2026 | 2,125 | 179,867 | 183,760 |
| | Federal National Mortgage Association | FNMA FN AJ7723 104-16 3.5% 12/01/2026 | 1,725 | 172,189 | 175,950 |
| | Federal National Mortgage Association | FNMA FN AK3264 FNCI 3 2012 3% 02/01/2027 | 2,050 | 277,048 | 284,256 |
| | Federal National Mortgage Association | FNMA FN 890112 4% 04/01/2024 | 2,500 | 29,377 | 29,858 |
| | Federal National Mortgage Association | FNMA POOL FN 930527 4.5% 02/01/2024 | 1,559 | 14,747 | 14,970 |
| | Federal National Mortgage Association | FNMA FN AA4315 4% 04/01/2024 | 1,100 | 22,030 | 22,387 |

# BLUE BELL CREAMERIES, INC.
# EMPLOYEE STOCK OWNERSHIP PLAN AND TRUST
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|---|---|---|---|---|---|
| | **Government agency obligations, continued** | | | | |
| | Federal National Mortgage Association | FNMA POOL FN AC3250 4% 09/01/2024 | 1,050 | $ 25,929 | $ 26,376 |
| | Federal National Mortgage Association | FNMA FN MA0771 3.5% 06/01/2021 | 1,010 | 4,339 | 4,565 |
| | Federal National Mortgage Association | FNMA FN MA1660 3% 11/01/2023 | 1,000 | 103,468 | 106,031 |
| | Federal National Mortgage Association | FNMA FN MA1999 3.5% 08/01/2024 | 1,000 | 137,453 | 140,436 |
| | Federal National Mortgage Association | FNMA POOL FN AE0276 4% 08/01/2025 | 1,575 | 65,797 | 66,895 |
| | Federal National Mortgage Association | FNMA FN AE0971 4% 05/01/2025 | 2,580 | 84,373 | 85,750 |
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| | Federal Home Loan Mortgage Corporation | FHLMC FG G13482 4% 03/01/2024 | 1,670 | 23,857 | 24,242 |
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# BLUE BELL CREAMERIES, INC.
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| | SHOPIFY INC COM CL A | Common stock | 57 | 47,223 | 64,521 |
| | SITEONE LANDSCAPE SUPPLY INC COM | Common stock | 198 | 16,997 | 31,409 |
| | SNOWFLAKE INC COM CL A | Common stock | 100 | 24,129 | 28,140 |

# BLUE BELL CREAMERIES, INC.
# EMPLOYEE STOCK OWNERSHIP PLAN AND TRUST
## SCHEDULE H, Line 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
### DECEMBER 31, 2020

**EIN: 74-2983264**
**PN: 002**

| (a) | (b) Identity of Issue, Borrower, Lessor, or Similar Party | (c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value | Par Value or Number of Shares | (d) Cost | (e) Current Value |
|---|---|---|---|---|---|
| | **Common stocks, continued** | | | | |
| | SPOTIFY TECHNOLOGY SA COM | Common stock | 89 | 17,679 | 28,005 |
| | STONECO LTD COM | Common stock | 462 | 14,409 | 38,771 |
| | TAL EDUCATION GROUP ADR | Common stock | 899 | 58,375 | 64,287 |
| | TELADOC HEALTH INC COM | Common stock | 104 | 22,625 | 20,796 |
| | TENCENT HOLDINGS LIMITED ADR UNSPONSORED | Common stock | 461 | 35,012 | 33,141 |
| | THE TRADE DESK INC COM CL A | Common stock | 42 | 13,179 | 33,642 |
| | TWILIO INC COM CL A | Common stock | 87 | 16,267 | 29,450 |
| | UNITEDHEALTH GROUP INC COM | Common stock | 78 | 19,748 | 27,312 |
| | VEEVA SYSTEMS INC COM CL A | Common stock | 260 | 60,794 | 70,785 |
| | WASTE CONNECTIONS INC (CA) COM | Common stock | 248 | 21,653 | 25,477 |
| | WINGSTOP INC COM | Common stock | 211 | 26,132 | 28,001 |
| | ZOETIS INC COM CL A | Common stock | 156 | 17,563 | 25,748 |
| | ZOOM VIDEO COMMUNICATIONS INC COM CL A | Common stock | 49 | 24,358 | 16,529 |
| | **Total common stocks** | | | $ 1,662,788 | $ 2,266,165 |

# BLUE BELL CREAMERIES, INC.
# EMPLOYEE STOCK OWNERSHIP PLAN AND TRUST
## SCHEDULE H, Line 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
### DECEMBER 31, 2020

**EIN: 74-2983264**
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|---|---|---|---|---|---|
| | **Exchange traded funds** | | | | |
| | PROSHARES TRUST UL - TRAPRO QQQ ETF | Exchange traded fund | 2,270 | $ 269,598 | $ 412,686 |
| | SPDR SERIES TRUST SPDR BLOOMBERG ETF | Exchange traded fund | 8,647 | 791,525 | 791,397 |
| | VANGUARD SM CP VAL ETF | Exchange traded fund | 1,830 | 255,533 | 260,244 |
| | **Total exchange traded funds** | | | $ 1,316,656 | $ 1,464,327 |
| | **Company common Stock** | | | | |
| * | BLUE BELL CREAMERIES, U.S.A., INC. | Common stock | 234 | $ 18,018,000 | $ 30,303,000 |
| | **Total investments at fair value** | | | $ 24,425,257 | $ 38,008,118 |

* Represents party-in-interest

# Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

## Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210 - 0110
1210 - 0089

**2020**

**This Form is Open to Public Inspection**

## Part I Annual Report Identification Information

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

**A** This return/report is for:
- ☐ a multiemployer plan
- ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instr.)
- ☒ a single-employer plan
- ☐ a DFE (specify) _____

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

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

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

## Part II Basic Plan Information - enter all requested information

**1a** Name of plan
BLUE BELL CREAMERIES, INC. EMPLOYEE STOCK OWNERSHIP PLAN

**1b** Three-digit plan number (PN) ▶ 002

**1c** Effective date of plan 01/01/1989

**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)
BLUE BELL CREAMERIES, INC.

P.O. BOX 1807

BRENHAM TX 77834-1807

**2b** Employer Identification Number (EIN) 74-2983264

**2c** Plan Sponsor's telephone number 979-836-7977

**2d** Business code (see instructions) 311500

**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 | Samuel Sommer | 10/8/2021 | SAM SOMMER, CFO |
| | **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 (2020) v. 200204**

018401 12-03-20

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

**3b** Administrator's EIN

**3c** Administrator's telephone number

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

**4b** EIN

**4d** PN

| | | | |
|---|---|---|---|
| **5** | Total number of participants at the beginning of the plan year | **5** | 3,397 |
| **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)** | 3,281 |
| **a (2)** | Total number of active participants at the end of the plan year | **6a(2)** | 3,353 |
| **b** | Retired or separated participants receiving benefits | **6b** | |
| **c** | Other retired or separated participants entitled to future benefits | **6c** | 203 |
| **d** | Subtotal. Add lines **6a(2), 6b,** and **6c** | **6d** | 3,556 |
| **e** | Deceased participants whose beneficiaries are receiving or are entitled to receive benefits | **6e** | 3 |
| **f** | Total. Add lines **6d** and **6e** | **6f** | 3,559 |
| **g** | Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) | **6g** | 3,559 |
| **h** | Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested | **6h** | 236 |
| **7** | Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) | **7** | |

**8a** If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
2E

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

**9a** Plan funding arrangement (check all that apply)
- **(1)** [ ] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] Trust
- **(4)** [ ] General assets of the sponsor

**9b** Plan benefit arrangement (check all that apply)
- **(1)** [ ] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] Trust
- **(4)** [ ] General assets of the sponsor

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

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

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

# BLUE BELL CREAMERIES, INC.
# EMPLOYEE STOCK OWNERSHIP PLAN AND TRUST
## SCHEDULE H, Line 4j - SCHEDULE OF REPORTABLE TRANSACTIONS
### FOR THE YEAR ENDED DECEMBER 31, 2020

**EIN: 74-2983264**
**PN: 002**

| (a) Identity of Party Involved | (b) Description of Asset | Number of Transactions | (c) Purchase Price | (d) Selling Price | (g) Cost of Asset | (h) Current Value of Asset on Transaction Date | (i) Net Gain or (Loss) |
|---|---|---|---|---|---|---|---|
| * TD Ameritrade Trust Company | Deposit Acct. – FDIC Insured Deposit Acct. IDA12 | 142 | $ 8,211,334 | $ - | $ 8,211,334 | $ 8,211,334 | $ - |
| * TD Ameritrade Trust Company | Deposit Acct. – FDIC Insured Deposit Acct. IDA12 | 94 | $ - | $ 7,938,425 | $ 7,938,425 | $ 7,938,425 | $ - |
| INVESCO QQQ TRUST SERIES I | Treasury Bond ETF | 2 | $ 618,586 | $ | $ 618,586 | $ 618,586 | $ - |
| INVESCO QQQ TRUST SERIES I | Treasury Bond ETF | 2 | $ - | $ 606,586 | $ 618,586 | $ 606,637 | $ (11,949) |
| PROSHARES ULTRAPRO | Treasury Bond ETF | 9 | $ 779,523 | $ - | $ 779,523 | $ 779,253 | $ - |
| PROSHARES ULTRAPRO | Treasury Bond ETF | 12 | $ - | $ 789,169 | $ 509,925 | $ 789,169 | $ 279,244 |

* Represents a party-in-interest

** This schedule is a listing of single transactions and series of transactions of the same security that exceed 5% of the Plan's net assets as of January 1, 2020. The information in this schedule was obtained or derived from information supplied to the Company and certified as complete and accurate by the Custodians.