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

2021

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

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)

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
PEOPLES SERVICES, INC. EMPLOYEE STOCK OWNERSHIP PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1986

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)
PEOPLES SERVICES, INC.

P.O. BOX 20109
CANTON, OH 44701-0109

2b Employer Identification Number (EIN) 34-1692443

2c Plan Sponsor's telephone number 330-453-3709

2d Business code (see instructions) 484120

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.	08/18/2022	ADAM HERMAN
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

3b Administrator's EIN

3c Administrator's telephone number

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

a Sponsor's name

c Plan Name

4b EIN

4d PN

5	Total number of participants at the beginning of the plan year	**5**	613
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)**	502
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	456
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	92
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	548
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	
f	Total. Add lines **6d** and **6e**.	**6f**	548
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	548
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	7
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:

2I 2O 3H

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)** [X] **C** (Service Provider Information)
- **(5)** [ ] **D** (DFE/Participating Plan Information)
- **(6)** [ ] **G** (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2021 Form M-1 annual report. If the plan was not required to file the 2021 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2021** **This Form is Open to Public Inspection.**

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan	**B** Three-digit plan number (PN) ▶
PEOPLES SERVICES, INC. EMPLOYEE STOCK OWNERSHIP PLAN	001
C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)
PEOPLES SERVICES, INC.	34-1692443

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)

FARMERS TRUST COMPANY

34-1853512

(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?
19	NONE	89993	Yes [ ] No [X]	Yes [ ] No [X]		Yes [ ] No [X]

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

NATIONAL ASSOCIATES, INC.

34-0677453

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 17 37 38	NONE	12425	Yes [ ] No [X]	Yes [ ] No [X]		Yes [ ] No [X]

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

GBQ CONSULTING

(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?
34	NONE	9000	Yes [ ] No [X]	Yes [ ] No [X]		Yes [ ] No [X]

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)

BROWSE MCDOWELL

(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?
34	NONE	21956	Yes [ ] No [X]	Yes [ ] No [X]		Yes [ ] No [X]

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

THE 415 GROUP

(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?
34	NONE	12500	Yes [ ] No [X]	Yes [ ] No [X]		Yes [ ] No [X]

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2021

This Form is Open to Public Inspection

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan
PEOPLES SERVICES, INC. EMPLOYEE STOCK OWNERSHIP PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
PEOPLES SERVICES, INC.

D Employer Identification Number (EIN)
34-1692443

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 reported on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	11250	
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	528560	736415
(2) U.S. Government securities	1c(2)	2289822	1966381
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	853821	779410
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	2854431	2704692
(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)	2475656	2774526
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

			(a) Beginning of Year	**(b)** End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)	8681932	11326041
	(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	17695472	20287465
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j	66277	33363
k	Total liabilities (add all amounts in lines 1g through1j)	1k	66277	33363
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	17629195	20254102

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)	1807571	
	(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)		1807571
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	76	
	(B) U.S. Government securities	2b(1)(B)	11949	
	(C) Corporate debt instruments	2b(1)(C)	23367	
	(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)		35392
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)	95854	
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	146701	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		242555
	(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)	3352558	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		3352558

		(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		
d Total income. Add all **income** amounts in column (b) and enter total	2d		5438076
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	2662051	
(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)		2662051
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)	151118	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		151118
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		2813169
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		2624907
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: 415 GROUP, INC **(2)** EIN: 34-1341400

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		1000000
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		186801
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**			

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

2021

This Form is Open to Public Inspection.

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan
PEOPLES SERVICES, INC. EMPLOYEE STOCK OWNERSHIP PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
PEOPLES SERVICES, INC.

D Employer Identification Number (EIN)
34-1692443

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): 34-0843660

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 _____

PEOPLES SERVICES, INC.
EMPLOYEE STOCK OWNERSHIP PLAN

FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULES

YEARS ENDED DECEMBER 31, 2021 AND 2020

PEOPLES SERVICES, INC.
EMPLOYEE STOCK OWNERSHIP PLAN

FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULES

YEARS ENDED DECEMBER 31, 2021 AND 2020

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INDEPENDENT AUDITORS' REPORT

Plan Administrator
Peoples Services, Inc. Employee Stock Ownership Plan
Canton, Ohio

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit for the 2021 Financial Statements

We have performed an audit of the accompanying financial statements of Peoples Services, Inc. Employee Stock Ownership Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), as permitted by ERISA Section 103(a)(3)(C) [ERISA Section 103(a)(3)(C) audit]. The financial statements comprise the statement of net assets available for benefits as of December 31, 2021, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audit of Peoples Services, Inc. Employee Stock Ownership Plan's 2021 financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audit need not extend to any statements or information related to assets held for investment of the plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of and for the year ended December 31, 2021, stating that the certified investment information, as described in Note C to the financial statements, is complete and accurate.

Opinion on the 2021 Financial Statements

In our opinion, based on our audit and on the procedures performed as described in the Auditors' Responsibilities for the Audit of the 2021 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 on the 2021 Financial Statements

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the 2021 Financial Statements section of our report. We are required to be independent of Peoples Services, Inc. Employee Stock Ownership Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the 2021 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.

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

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

Auditors' Responsibilities for the Audit of the 2021 Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit for the 2021 Financial Statements 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 auditors' 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 Peoples Services, Inc. Employee Stock Ownership Plan's internal control. Accordingly, no such opinion is expressed.

- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.

- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Peoples Services, Inc. Employee Stock Ownership Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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

2021 Supplemental Schedules Required by ERISA

The supplemental Schedule of Assets (Held at End of Year) and Schedule of Reportable Transactions as of and for the year ended December 31, 2021, are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for 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 audit 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, is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion -

- the form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, is presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

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

Auditors' Report on the 2020 Financial Statements

We were engaged to audit the 2020 financial statements of Peoples Services, Inc. Employee Stock Ownership Plan. As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA, the plan administrator instructed us not to perform and we did not perform any auditing procedures with respect to the information certified by a qualified institution. In our report dated June 25, 2021, we indicated that (a) because of the significance of the information that we did not audit, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion and accordingly, we did not express an opinion on the 2020 financial statements, and (b) the form and content of the information included in the 2020 financial statements other than that derived from the certified information were presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

Four - Fifteen Group

Certified Public Accountants

Canton, Ohio
August 15, 2022

PEOPLES SERVICES, INC.
EMPLOYEE STOCK OWNERSHIP PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

(Form 5500 - Schedule H - Part I)

	December 31, 2021	December 31, 2020
ASSETS:		
Investments, at fair value:		
Common stocks	**$ 14,030,733**	$ 11,536,363
Certificates of deposit	**100,409**	-
Mutual funds	**2,553,484**	2,334,415
Exchange-traded funds	**221,042**	141,241
Money market fund	**636,006**	528,560
Government securities	**1,843,798**	2,238,788
Municipal bonds	**122,583**	51,034
Corporate bonds	**779,410**	853,821
Total investments	**20,287,465**	17,684,222
Receivables:		
Dividends	**-**	11,250
Total receivables	**-**	11,250
Total assets	**20,287,465**	17,695,472
LIABILITIES:		
Derivative instruments	**33,363**	66,277
NET ASSETS AVAILABLE FOR BENEFITS	**$ 20,254,102**	$ 17,629,195

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

PEOPLES SERVICES, INC.
EMPLOYEE STOCK OWNERSHIP PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

(Form 5500 - Schedule H - Part II)

	Year Ended December 31, 2021
ADDITIONS TO NET ASSETS ATTRIBUTED TO:	
Investment income:	
Net appreciation in fair value of investments	$ 3,352,558
Interest and dividends	277,947
	3,630,505
Contributions:	
Employer	1,807,571
Total additions	5,438,076
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:	
Benefit payments	(2,662,051)
Administrative expenses	(151,118)
Total deductions	(2,813,169)
NET INCREASE	2,624,907
NET ASSETS AVAILABLE FOR BENEFITS:	
Beginning of year	17,629,195
End of year	$ 20,254,102

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

PEOPLES SERVICES, INC.
EMPLOYEE STOCK OWNERSHIP PLAN

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2021 AND 2020

A. PLAN DESCRIPTION AND BASIS OF PRESENTATION:

The following description of Peoples Services, Inc. Employees Stock Ownership Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

Peoples Services, Inc. (the "Company") established the Plan effective as of January 1, 1986. As of January 1, 2020, the Plan was amended and restated and operates, in relevant part, as an employee stock ownership plan ("ESOP") and is designed to comply with Section 4975(e)(7) and the regulations thereunder of the Internal Revenue Code of 1986, as amended ("IRC"), and is subject to the applicable provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"). The Plan is administered by individuals appointed by the Company's board of directors. An independent third-party is the Plan's trustee (the "Trustee").

The Plan acquired Company common shares (the "Employer Stock") and holds the common stock in a trust established under the Plan and all common shares of the Company have been allocated.

Eligibility – Employees of the Company and its participating subsidiaries are generally eligible to participate in the Plan after one year of service, provided they worked at least 1,000 hours during such Plan year. Also, the employee may not be a member of a union and must have attained the age of 18. Participants who do not have at least 1,000 hours of service during such Plan year and are not employed on the last working day of a Plan year are generally not eligible for an allocation of Company contributions for such year. A Participant who retires, dies or terminates employment due to disability shall share in the allocation on the basis of the compensation earned during the portion of the plan year preceding retirement, disability or death.

Contributions – Company contributions are at the discretion of the Company's board of directors. Each participant's Employer Stock Account is credited annually with their allocable share of the Employer Stock purchased or contributed to the trust and forfeitures of Employer Stock in the proportion each participant's compensation for the plan year bears to total compensation of all participants for the plan year. The participant's Other Investments Account is credited or debited with the participant's share of gains or losses on the investments based on the ratio of each participant's account balance as of the immediately preceding valuation date to the aggregate of all participants' accounts as of the same valuation date. A cash contribution of $1,807,571 was made for the Plan year ended December 31, 2021.

Payment of Benefits – Upon attaining age 59-1/2, retirement, death, disability or termination, the participant (or beneficiary, if participant is deceased) is eligible to receive the participant's account balance payable to the participant (or beneficiary, if participant is deceased) in cash in the form of a lump-sum equal to 100% of the value of the his or her account, or monthly, quarterly or annual installments over a period of not more than the recipient's life expectancy (participant or beneficiary's life expectancies). Terminated employees that have not attained the age of 59-1/2 are entitled to a lump-sum payment in an amount equal to the terminated participant's vested account balance. In the event that the termination of a participant's employment is caused by his or her death, his or her beneficiary shall be vested in and paid 100% of the deceased's account balance. Employer stock previously held by participants that receive a cash benefit payment are reallocated to active participants on the following valuation date.

Administrative Expenses – As provided in the Plan agreement, administrative expenses may be paid either by the Plan or by the Company. The Plan has historically paid the operating expenses for the Plan.

NOTES TO FINANCIAL STATEMENTS

A. PLAN DESCRIPTION AND BASIS OF PRESENTATION (CONTINUED):

Voting Rights – Each participant is entitled to exercise voting rights attributable to the Company shares allocated to his or her account and is notified by the Trustee prior to the time that such rights are to be exercised. The Trustee is not permitted to vote on behalf of any allocated share for which instructions have not been given by a participant. The Trustee is required, however, to vote on behalf of any unallocated shares on behalf of the collective best interest of Plan participants and beneficiaries.

Participant Accounts – The Plan is a defined contribution plan wherein a separate individual account is established for each participant. Each participant's account is credited as of the last day of each Plan year with an allocation of shares of the Company's common stock released by the Trustee from the unallocated account and forfeitures of terminated participants' non-vested accounts. Only those participants who are eligible employees of the Company as of the last day of the Plan year will receive an allocation. Allocations are based on a participant's eligible compensation, relative to total eligible compensation of all participants. Plan earnings are allocated to each participant's account based on the ratio of the investment balance of the participant's account balance to the respective investment balance in the Plan. Allocations of investments included in participant accounts are at the direction of the Trustee.

Vesting – If a participant's employment with the Company ends for any reason other than retirement, permanent disability or death, he or she will vest in the balances in his or her account based on total years of service with the Company. Participants vest 20 percent per year of service after two years and are 100 percent vested after six years of service. If a participant's employment with the Company is terminated on or after the attainment of age 59-1/2, the participant shall be vested in and entitled to receive, 100% of the entire amount then in each of their accounts.

Put Option – In accordance with federal income tax regulations, the Employer Stock that is held by the Plan and its participants and is not readily tradable on an established market, or is subject to trading limitations, includes a put option. The put option is a right to demand that the Company buy any shares of its stock distributed to participants for which there is no market. The put price is representative of the fair market value of the stock. The put option is only exercisable during the 60-day period immediately following the date of distribution and if the put option is not exercised within such 60-day period, then it can be exercised for an additional period of 60 days in the following Plan year. The Company can pay for the purchase with interest over a period not exceeding five years. There were no put options exercised on Employer Stock in 2021 or 2020.

Diversification – Diversification is offered to participants close to retirement so they may have the opportunity to move part of the value of their investment in Employer Stock into investments, which are more diversified. Participants who are at least age 55 with at least 10 years of participation in the Plan may elect to diversify a portion of their account. Such a participant may elect within 90 days after the close of each Plan year in the qualified election period to diversify 25 percent of his or her account, less any amount to which a prior election applies. In the case of the sixth year (final year allowable) to which an election applies, 50 percent shall be substituted for 25 percent.

Forfeitures – Forfeited Company contributions from terminated participants' non-vested accounts are allocated to all participants who were eligible to receive Company contributions in the Plan year in which the forfeiture occurred. Forfeitures are allocated in the same manner as contributions. Cash forfeitures totaled approximately $80,000 and stock forfeitures of 13.35 shares were allocated to the eligible participants during the Plan year ended December 31, 2021. There were no unallocated forfeitures at December 31, 2021 or 2020.

B. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

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

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

Investment Valuation and Income Recognition – The investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's investment committee determines the Plan's valuation policies utilizing information provided by the investment advisors and custodian. See note D for a discussion of the fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Dividend income is accrued on the ex-dividend date. Realized gains and losses from security transactions are reported on the average cost method. Net appreciation in fair value of investments includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Derivative Instruments – The Plan writes put and call options related to investment securities (exclusive of Employer Stock) owned by the plan in order to enhance investment yield and to mitigate the volatility of the equity markets to the fair value of investment securities. The Plan records the liability for its open positions on written put and call options at fair value. Net appreciation in fair value of investments includes the Plan's realized and unrealized gains and losses from option contracts during the year.

Payment of Benefits – Benefits are recorded when paid.

Subsequent Events – Plan management has evaluated subsequent events through August 15, 2022, the date the financial statements were available to be issued.

C. INFORMATION PREPARED AND CERTIFIED BY THE CUSTODIAN:

Certain information related to investments, other than investments in Peoples Services, Inc. common stock and Massillon Cable TV, Inc. common stock, disclosed in the accompanying financial statements and supplemental schedules, including investments held at December 31, 2021 and 2020, and net appreciation in fair value of investments, interest and dividends other than net appreciation in fair value of investments, and interest and dividends from Peoples Services, Inc. common stock and Massillon Cable TV, Inc. common stock, for the year ended December 31, 2021, was obtained or derived from information supplied to the plan administrator and certified as complete and accurate by Farmers Trust Company, the custodian of the Plan.

D. FAIR VALUE MEASUREMENTS:

The authoritative accounting guidance 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 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under the authoritative accounting guidance are described as follows:

D. FAIR VALUE MEASUREMENTS (CONTINUED):

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 include quoted prices that are observable for the asset or liability and 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.

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.

Following is a description of the valuation methodologies used for assets and liabilities measured at fair value. There have been no changes in the methodologies used at December 31, 2021 or 2020.

Common stocks - publicly traded: Valued at the closing price reported on the active market on which the individual securities are traded.

Common stocks - privately held: Value based on an annual independent appraisal. This appraisal was based on a combination of the market and income approaches consistent with prior years. Each approach contains various valuation methodologies. The appraiser considers market comparables, historic and projected cash flows and applicable discounts and premiums.

Certificates of deposit: Valued at amortized cost, which approximates fair value.

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 U.S. 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.

Exchange-traded funds: Valued at the closing price reported on the active market on which the individual funds are traded.

Money market fund: Money market accounts are valued at cost, which approximates fair value.

Government securities and municipal bonds: Valued using pricing models maximizing the use of observable inputs for similar securities.

Corporate bonds: Valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing value on yields currently available on comparable securities of issuers with similar credit ratings.

Written put and call options: Valued at the closing price reported on the active market on which the individual put and call options are traded.

D. FAIR VALUE MEASUREMENTS (CONTINUED):

The preceding methods described may produce fair value calculations that may not be indicative or 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 different fair value measurements at the reporting date.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets and liabilities as follows:

Fair Value Measurements at December 31, 2021:

	Level 1	Level 2	Level 3	Total
Common stocks	$ 2,704,692	$ -	$ 11,326,041	$ 14,030,733
Certificates of deposit	100,409	-	-	100,409
Mutual funds	2,553,484	-	-	2,553,484
Exchange-traded funds	221,042	-	-	221,042
Money market fund	636,006	-	-	636,006
Government securities	-	1,843,798	-	1,843,798
Municipal bonds	-	122,583	-	122,583
Corporate bonds	-	779,410	-	779,410
Total investments at fair value	$ 6,215,633	$ 2,745,791	$ 11,326,041	$ 20,287,465
Liability for derivative instruments	$ (33,363)	$ -	$ -	$ (33,363)

Fair Value Measurements at December 31, 2020:

	Level 1	Level 2	Level 3	Total
Common stocks	$ 2,667,630	$ -	$ 8,868,733	$ 11,536,363
Mutual funds	2,334,415	-	-	2,334,415
Exchange-traded funds	141,241	-	-	141,241
Money market fund	528,560	-	-	528,560
Government securities	-	2,238,788	-	2,238,788
Municipal bonds	-	51,034	-	51,034
Corporate bonds	-	853,821	-	853,821
Total investments at fair value	$ 5,671,846	$ 3,143,643	$ 8,868,733	$ 17,684,222
Liability for derivative instruments	$ (66,277)	$ -	$ -	$ (66,277)

D. FAIR VALUE MEASUREMENTS (CONTINUED):

The following table sets forth a summary of changes in the fair value of the Plan's Level 3 assets for the year ended December 31, 2021:

	Common Stocks – Privately Held 2021
Balance at January 1,	$ 8,868,733
Realized gains	-
Unrealized appreciation in estimated fair value	2,457,308
Balance at December 31,	$ 11,326,041
The amount of total gains for the year included in changes in net assets attributable to the change in unrealized gains or losses relating to assets still held at the reporting date	$ 2,457,308

Gains and losses (realized and unrealized) included in changes in net assets for the year above are reported in net appreciation in fair value of investments in the statement of changes in net assets available for benefits.

E. ADMINISTRATION OF PLAN ASSETS:

The Plan's assets, which consist of common stocks (publicly traded and privately held), certificates of deposit, mutual funds, exchange-traded funds, a money market fund, government securities and corporate bonds, are held by the custodian of the Plan.

Company contributions are held and managed by the custodian, which invests cash received, interest, and dividend income and makes distributions to participants.

Certain administrative functions are performed by officers or employees of the Company or its subsidiaries. No such officer or employee receives compensation from the Plan. Administrative expenses for the Trustee's fees are paid directly by the Plan.

F. RELATED PARTY AND PARTY-IN-INTEREST TRANSACTIONS:

The Plan invests in Company common stock. These are related party and party-in-interest transactions. As described in Note A, the Plan pays all Plan expenses. The Plan has a number of service providers. Such providers are parties-in-interest under ERISA.

G. RISKS AND UNCERTAINTIES:

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

H. PLAN TERMINATION:

Although it has not expressed any intent to do so, the Company reserves the right to terminate the Plan at any time, subject to Plan provisions. Upon termination of the Plan, participants become fully vested in their accounts and the Company's board of directors directs the Trustee to pay all liabilities and expenses of the ESOP and to sell shares of financed common stock held as collateral to the extent it determines such sale to be necessary in order to repay liabilities. Subsequently, the interest of each participant in the trust fund will be distributed to such participant or his or her beneficiary at the time prescribed by the Plan terms and the IRC.

I. INCOME TAX STATUS:

The Plan has received a determination letter from the Internal Revenue Service ("IRS") dated April 13, 1994, stating that the Plan is qualified under the IRC and, therefore, the related trust is exempt from taxation. Once qualified, the Plan is required to operate in conformity with the IRC to maintain its qualification. The Plan has been amended since receiving the determination letter. However, the Plan administrator believes that the Plan is currently designed, and being operated, in compliance with the applicable requirements of the IRC. Therefore, they believe that the Plan was qualified, and the related trust was tax-exempt as of the financial statement date. Therefore, no provision for income taxes has been included in the Plan's financial statements.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the plan and recognize a tax liability if the 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, there are currently no audits for any tax periods in progress.

During the year ended December 31, 2021, the Plan had income of $40,122 from its investment in the common stock of Massillon Cable TV, Inc. that resulted in unrelated business income tax of $9,898. This amount is included in the administrative fees of the Plan.

PEOPLES SERVICES, INC.
EMPLOYEE STOCK OWNERSHIP PLAN
(Employer Federal ID #34-1692443, Plan #001)

SCHEDULE OF ASSETS (HELD AT END OF YEAR)
Form 5500 - Schedule H - Part IV, Line 4(i)

(See Independent Auditors' Report)

December 31, 2021

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value (c)	Cost (d)	Current Value (e)
*	Peoples Services, Inc.	Common stock	$ 333,714	$ 11,139,240
	Massillon Cable TV, Inc.	Common stock	3,000	186,801
	Adobe Systems Incorporated	Common stock	19,799	50,468
	Air Prods & Chems Inc	Common stock	14,058	26,775
	Alphabet Inc	Common stock	41,947	130,366
	Apple Inc	Common stock	22,658	86,832
	AT&T Inc	Common stock	50,912	39,606
	Berkshire Hathaway Inc Del	Common stock	60,380	76,245
	Cboe Global Mkts Inc	Common stock	47,623	57,637
	Celanese Corp Del	Common stock	21,098	33,612
	Cerner Corp	Common stock	14,913	17,181
	Cisco Sys Inc	Common stock	47,029	78,706
	Cognizant Technology Solutions	Common stock	33,238	47,909
	Constellation Brands Inc	Common stock	20,919	31,622
	Cummins Inc	Common stock	28,803	24,214
	Cvs Health Corp	Common stock	44,168	76,029
	D R Horton Inc	Common stock	8,097	25,594
	Disney Walt Co	Common stock	47,575	61,956
	EOG Res Inc	Common stock	15,768	27,448
	Essential Utils Inc	Common stock	47,329	64,428
	Freeport-Mcmoran Inc	Common stock	39,144	48,156
	GSK Plc	Common stock	53,816	59,976
	Honeywell Intl Inc	Common stock	17,108	30,234
	HP Inc	Common stock	24,813	57,861
	Illumina Inc	Common stock	24,100	31,196
	Johnson & Johnson	Common stock	53,376	70,139
	Johnson Ctls Intl Plc	Common stock	31,842	60,983
	Kinder Morgan Inc Del	Common stock	26,895	29,341
	Lam Research Corp	Common stock	13,462	44,587
	Lockheed Martin Corp	Common stock	50,699	53,312
	Microsoft Corp	Common stock	25,654	99,214
	Mid-Amer Apt Cmntys Inc	Common stock	33,502	68,832
	Nextera Energy Inc	Common stock	34,184	60,684
	Pepsico Inc	Common stock	30,467	46,902
	Pfizer Inc	Common stock	59,188	94,244
	Roper Technologies Inc	Common stock	35,412	44,267
	Schlumberger Ltd	Common stock	68,273	59,900
	Schwab Charles Corp	Common stock	26,558	62,318
	Seagate Technology Hldngs Plc	Common stock	29,421	38,074
	Servicenow Inc	Common stock	39,715	43,490
	Starbucks Corp	Common stock	20,767	29,243
	Stryker Corporation	Common stock	52,224	56,693
	TE Connectivity Ltd	Common stock	46,949	58,889
	TJX Cos Inc New	Common stock	32,197	59,597
	Tyson Foods Inc	Common stock	57,546	61,884
	United Parcel Service Inc	Common stock	19,293	42,868

PEOPLES SERVICES, INC.
EMPLOYEE STOCK OWNERSHIP PLAN
(Employer Federal ID #34-1692443, Plan #001)

SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
Form 5500 - Schedule H - Part IV, Line 4(i)

(See Independent Auditors' Report)

December 31, 2021

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value (c)	Cost (d)	Current Value (e)
	Verizon Communications Inc	Common stock	45,216	40,217
	Visa Inc	Common stock	48,560	75,849
	Walmart Inc	Common stock	56,442	86,813
	Wells Fargo Co New	Common stock	42,885	70,531
	Weyerhaeuser Co Mtn Be	Common stock	37,253	61,770
	American Express Natl Bk Brok CD 1.45% 23	Certificates of deposit	50,000	50,650
	Morgan Stanley Bk N A CD Fxd/Flt 24	Certificates of deposit	50,000	49,759
	Aim Growth Ser Invesco Growth Intl Dvrsfd R6	Mutual fund	269,830	336,829
	Blackrock Index Fds Inc Ishares Msc Inst	Mutual fund	283,372	324,526
	Blackrock Large Cap Ser Fds In Evnt Drvn Eq Fd	Mutual fund	210,925	216,290
	DFA Invt Dimensions Group Inc Commdty Strg	Mutual fund	233,690	196,753
	DFA Invt Dimensions Group Inc Gbl Real Est	Mutual fund	238,841	300,900
	DFA Invt Dimensions Group Inc Emer Mkt Coreq	Mutual fund	205,000	246,294
	Federated Hermes Instl Tr Fh Instl Hy Inst	Mutual fund	69,934	71,109
	Goldman Sachs Tr Inf Prosec Ins	Mutual fund	144,037	154,803
	Mfs Ser Tr Iv Mid Cap Grw I	Mutual fund	190,349	267,466
	Pimco Fds Pac Invt Mgmt Ser Intl Bd Instl	Mutual fund	170,207	169,032
	Principal Fds Inc Spctrum Pfd Inst	Mutual fund	166,585	170,882
	Vanguard Fixed Income Secs Fd Strminvgrdinst	Mutual fund	22,843	22,506
	Wasatch Fds Tr Frontier Instl	Mutual fund	80,000	76,094
	Invesco QQQ Tr	Exchange-traded fund	29,943	43,764
	Select Sector Spdr Tr SBI Cons Discr	Exchange-traded fund	75,034	98,540
	Select Sector Spdr Tr SBI Int-Utils	Exchange-traded fund	72,542	78,738
	Money Mkt Obligs Tr Fh Gov Obl Fd	Money market fund	636,006	636,006
	Federal Farm Cr Bks Cons Bd 2.58% 41	Government security	25,000	24,645
	Federal Farm Cr Bks Cons Bd 3.65% 39	Government security	25,000	25,170
	Federal Farm Cr Bks Cons Bd 2.09% 40	Government security	25,000	23,531
	Federal Home Ln Mtg Corp Call 1.5% 072033	Government security	25,000	23,657
	Federal Home Ln Mtg Corp Call 1.24% 093031	Government security	50,000	47,280
	Federal Home Loan Banks Cons Bd 2.4% 30	Government security	50,000	50,066
	Federal Home Loan Banks Cons Bd 1.55% 32	Government security	25,000	23,971
	Federal Home Loan Banks Cons Bd 1.8% 36	Government security	25,000	23,726
	Federal Home Loan Banks Cons Bd 1.1% 27	Government security	25,000	24,309
	Federal Home Loan Banks Cons Bd 2.22% 45	Government security	25,000	23,009
	Tennessee Valley Auth Fed Be Int Pmt 05/01/25	Government security	41,000	48,196
	US Treas Sec Stripped Int Pmt Int Pmt 11/15/26	Government security	83,759	93,773
	United States Treas Bills Dt 052021-051922	Government security	1,412,247	1,412,465
	Derry Twp Pa Mun Auth Swr Rev Taxable Bds 2021 B	Municipal bond	51,186	50,627
	Franklin Cnty Ohio Taxable Ltd Tax Var Purp 2021 A	Municipal bond	25,042	24,621
	Mason Ohio Mun Recreational Facs Im 2020C	Municipal bond	24,954	22,921
	Massachusetts St Taxable Go Ref Bds 2020 E	Municipal bond	25,236	24,414
	Apple Inc Sr Glbl Nt 3.2% 27	Corporate bond	24,175	26,965
	Barclays Bank Plc Fr 3% 101723	Corporate bond	50,000	50,237
	Berkshire Hathaway Inc Del Sr Glbl Nt 26	Corporate bond	51,685	53,393
	Chevron Corporation Sr Glbl Nt30	Corporate bond	26,478	25,319
	Chevron Usa Inc Glbl Nt 1.018% 27	Corporate bond	48,442	48,155

PEOPLES SERVICES, INC.
EMPLOYEE STOCK OWNERSHIP PLAN
(Employer Federal ID #34-1692443, Plan #001)

SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
Form 5500 - Schedule H - Part IV, Line 4(i)

(See Independent Auditors' Report)

December 31, 2021

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value (c)	Cost (d)	Current Value (e)
	Comcast Corp New Sr Nt 4.25% 33	Corporate bond	30,823	29,157
	Cummins Inc Sr Glbl Nt 1.5% 30	Corporate bond	23,575	23,625
	Duke Energy Ohio Inc 1M Glbl Bd 29	Corporate bond	25,356	27,129
	Exxon Mobil Corp Sr Glbl Nt 22	Corporate bond	24,831	25,000
	General Electric Co Fr 3.45% 051524	Corporate bond	51,764	52,061
	Home Depot Inc Sr Glbl Nt 1.5% 28	Corporate bond	24,632	24,624
	JPMorgan Chase & Co Fr 2% 122328	Corporate bond	25,000	23,986
	Oracle Corp Sr Glbl Nt 27	Corporate bond	26,949	26,359
	Pfizer Inc Sr Glbl Nt 29	Corporate bond	51,487	55,018
	Procter & Gamble Co Sr Glbl Nt 2.3% 22	Corporate bond	50,339	50,093
	Tjx Cos Inc New Sr Glbl Nt 1.6% 31	Corporate bond	24,523	24,010
	United Parcel Svcs Inc Sr Glbl Nt 3.9% 25	Corporate bond	54,508	53,937
	Us Bancorp Fr 3.95% 111725	Corporate bond	27,330	27,321
	Walmart Inc Sr Nt 2.55% 23	Corporate bond	50,554	50,913
	Walmart Inc Sr Glbl Nt 3.7% 28	Corporate bond	50,217	55,948
	Walmart Inc Sr Glbl Nt 24	Corporate bond	26,184	26,160
			$ 8,031,403	$ 20,287,465

* Indicates a party-in-interest to the Plan. (see Note F)

PEOPLES SERVICES, INC.
EMPLOYEE STOCK OWNERSHIP PLAN
(Employer Federal ID #34-1692443, Plan #001)

SCHEDULE OF REPORTABLE TRANSACTIONS

(Form 5500 - Schedule H - Part IV, Line 4(j))

(See Independent Auditors' Report)

Year Ended December 31, 2021

Identity of Party Involved (a)	Description of Assets (b)	Number of Transactions	Purchase Price (c)	Selling Price (d)	Cost of Asset (g)	Current value on Transaction Date (h)	Net Gain or (Loss) (i)
Money Mkt Obligs Tr Fh Gov Obl Fd	Money market fund	197	$ 3,936,706	$ -	$ 3,936,706	$ 3,936,706	$ -
Money Mkt Obligs Tr Fh Gov Obl Fd	Money market fund	87	-	3,829,260	3,829,260	3,829,260	-
US Treasury Bill 5/20/2021	Government security	7	643,942	-	643,942	643,942	-
US Treasury Bill 5/20/2021	Government security	1	-	2,409,926	2,409,926	2,409,926	-
US Treasury Bill 5/19/2022	Government security	4	2,410,659	-	2,410,659	2,410,659	-
US Treasury Bill 5/19/2022	Government security	1	-	1,118,192	1,118,378	1,118,192	(186)

* Indicates a party-in-interest to the Plan. (see Note F)
Columns E, "Lease Rental", and F, "Expense Incurred With Transaction" have been omitted because there is nothing to report

PEOPLES SERVICES, INC.
EMPLOYEE STOCK OWNERSHIP PLAN
(Employer Federal ID #34-1692443, Plan #001)

SCHEDULE OF REPORTABLE TRANSACTIONS

(Form 5500 - Schedule H - Part IV, Line 4(j))

(See Independent Auditors' Report)

Year Ended December 31, 2021

Identity of Party Involved (a)	Description of Assets (b)	Number of Transactions	Purchase Price (c)	Selling Price (d)	Cost of Asset (g)	Current value on Transaction Date (h)	Net Gain or (Loss) (i)
Money Mkt Obligs Tr Fh Gov Obl Fd	Money market fund	197	$ 3,936,706	$ -	$ 3,936,706	$ 3,936,706	$ -
Money Mkt Obligs Tr Fh Gov Obl Fd	Money market fund	87	-	3,829,260	3,829,260	3,829,260	-
US Treasury Bill 5/20/2021	Government security	7	643,942	-	643,942	643,942	-
US Treasury Bill 5/20/2021	Government security	1	-	2,409,926	2,409,926	2,409,926	-
US Treasury Bill 5/19/2022	Government security	4	2,410,659	-	2,410,659	2,410,659	-
US Treasury Bill 5/19/2022	Government security	1	-	1,118,192	1,118,378	1,118,192	(186)

* Indicates a party-in-interest to the Plan. (see Note F)
Columns E, "Lease Rental", and F, "Expense Incurred With Transaction" have been omitted because there is nothing to report

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

2021

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

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

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

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

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

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
PEOPLES SERVICES, INC. EMPLOYEE STOCK OWNERSHIP PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1986

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)
PEOPLES SERVICES, INC.

P.O. BOX 20109

CANTON, OH 44701-0109

2b Employer Identification Number (EIN)
34-1692443

2c Plan Sponsor's telephone number
(330) 453-3709

2d Business code (see instructions)
484120

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	Adam Herman	8/17/2022	ADAM HERMAN
	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

PEOPLES SERVICES, INC.
EMPLOYEE STOCK OWNERSHIP PLAN
(Employer Federal ID #34-1692443, Plan #001)

SCHEDULE OF ASSETS (HELD AT END OF YEAR)
Form 5500 - Schedule H - Part IV, Line 4(i)

(See Independent Auditors' Report)

December 31, 2021

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value (c)	Cost (d)	Current Value (e)
*	Peoples Services, Inc.	Common stock	$ 333,714	$ 11,139,240
	Massillon Cable TV, Inc.	Common stock	3,000	186,801
	Adobe Systems Incorporated	Common stock	19,799	50,468
	Air Prods & Chems Inc	Common stock	14,058	26,775
	Alphabet Inc	Common stock	41,947	130,366
	Apple Inc	Common stock	22,658	86,832
	AT&T Inc	Common stock	50,912	39,606
	Berkshire Hathaway Inc Del	Common stock	60,380	76,245
	Cboe Global Mkts Inc	Common stock	47,623	57,637
	Celanese Corp Del	Common stock	21,098	33,612
	Cerner Corp	Common stock	14,913	17,181
	Cisco Sys Inc	Common stock	47,029	78,706
	Cognizant Technology Solutions	Common stock	33,238	47,909
	Constellation Brands Inc	Common stock	20,919	31,622
	Cummins Inc	Common stock	28,803	24,214
	Cvs Health Corp	Common stock	44,168	76,029
	D R Horton Inc	Common stock	8,097	25,594
	Disney Walt Co	Common stock	47,575	61,956
	EOG Res Inc	Common stock	15,768	27,448
	Essential Utils Inc	Common stock	47,329	64,428
	Freeport-Mcmoran Inc	Common stock	39,144	48,156
	GSK Plc	Common stock	53,816	59,976
	Honeywell Intl Inc	Common stock	17,108	30,234
	HP Inc	Common stock	24,813	57,861
	Illumina Inc	Common stock	24,100	31,196
	Johnson & Johnson	Common stock	53,376	70,139
	Johnson Ctls Intl Plc	Common stock	31,842	60,983
	Kinder Morgan Inc Del	Common stock	26,895	29,341
	Lam Research Corp	Common stock	13,462	44,587
	Lockheed Martin Corp	Common stock	50,699	53,312
	Microsoft Corp	Common stock	25,654	99,214
	Mid-Amer Apt Cmntys Inc	Common stock	33,502	68,832
	Nextera Energy Inc	Common stock	34,184	60,684
	Pepsico Inc	Common stock	30,467	46,902
	Pfizer Inc	Common stock	59,188	94,244
	Roper Technologies Inc	Common stock	35,412	44,267
	Schlumberger Ltd	Common stock	68,273	59,900
	Schwab Charles Corp	Common stock	26,558	62,318
	Seagate Technology Hldngs Plc	Common stock	29,421	38,074
	Servicenow Inc	Common stock	39,715	43,490
	Starbucks Corp	Common stock	20,767	29,243
	Stryker Corporation	Common stock	52,224	56,693
	TE Connectivity Ltd	Common stock	46,949	58,889
	TJX Cos Inc New	Common stock	32,197	59,597
	Tyson Foods Inc	Common stock	57,546	61,884
	United Parcel Service Inc	Common stock	19,293	42,868

PEOPLES SERVICES, INC.
EMPLOYEE STOCK OWNERSHIP PLAN
(Employer Federal ID #34-1692443, Plan #001)

SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
Form 5500 - Schedule H - Part IV, Line 4(i)

(See Independent Auditors' Report)

December 31, 2021

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value (c)	Cost (d)	Current Value (e)
	Verizon Communications Inc	Common stock	45,216	40,217
	Visa Inc	Common stock	48,560	75,849
	Walmart Inc	Common stock	56,442	86,813
	Wells Fargo Co New	Common stock	42,885	70,531
	Weyerhaeuser Co Mtn Be	Common stock	37,253	61,770
	American Express Natl Bk Brok CD 1.45% 23	Certificates of deposit	50,000	50,650
	Morgan Stanley Bk N A CD Fxd/Flt 24	Certificates of deposit	50,000	49,759
	Aim Growth Ser Invesco Growth Intl Dvrsfd R6	Mutual fund	269,830	336,829
	Blackrock Index Fds Inc Ishares Msc Inst	Mutual fund	283,372	324,526
	Blackrock Large Cap Ser Fds In Evnt Drvn Eq Fd	Mutual fund	210,925	216,290
	DFA Invt Dimensions Group Inc Commdty Strg	Mutual fund	233,690	196,753
	DFA Invt Dimensions Group Inc Gbl Real Est	Mutual fund	238,841	300,900
	DFA Invt Dimensions Group Inc Emer Mkt Coreq	Mutual fund	205,000	246,294
	Federated Hermes Instl Tr Fh Instl Hy Inst	Mutual fund	69,934	71,109
	Goldman Sachs Tr Inf Prosec Ins	Mutual fund	144,037	154,803
	Mfs Ser Tr Iv Mid Cap Grw I	Mutual fund	190,349	267,466
	Pimco Fds Pac Invt Mgmt Ser Intl Bd Instl	Mutual fund	170,207	169,032
	Principal Fds Inc Spctrum Pfd Inst	Mutual fund	166,585	170,882
	Vanguard Fixed Income Secs Fd Strminvgrdinst	Mutual fund	22,843	22,506
	Wasatch Fds Tr Frontier Instl	Mutual fund	80,000	76,094
	Invesco QQQ Tr	Exchange-traded fund	29,943	43,764
	Select Sector Spdr Tr SBI Cons Discr	Exchange-traded fund	75,034	98,540
	Select Sector Spdr Tr SBI Int-Utils	Exchange-traded fund	72,542	78,738
	Money Mkt Obligs Tr Fh Gov Obl Fd	Money market fund	636,006	636,006
	Federal Farm Cr Bks Cons Bd 2.58% 41	Government security	25,000	24,645
	Federal Farm Cr Bks Cons Bd 3.65% 39	Government security	25,000	25,170
	Federal Farm Cr Bks Cons Bd 2.09% 40	Government security	25,000	23,531
	Federal Home Ln Mtg Corp Call 1.5% 072033	Government security	25,000	23,657
	Federal Home Ln Mtg Corp Call 1.24% 093031	Government security	50,000	47,280
	Federal Home Loan Banks Cons Bd 2.4% 30	Government security	50,000	50,066
	Federal Home Loan Banks Cons Bd 1.55% 32	Government security	25,000	23,971
	Federal Home Loan Banks Cons Bd 1.8% 36	Government security	25,000	23,726
	Federal Home Loan Banks Cons Bd 1.1% 27	Government security	25,000	24,309
	Federal Home Loan Banks Cons Bd 2.22% 45	Government security	25,000	23,009
	Tennessee Valley Auth Fed Be Int Pmt 05/01/25	Government security	41,000	48,196
	US Treas Sec Stripped Int Pmt Int Pmt 11/15/26	Government security	83,759	93,773
	United States Treas Bills Dt 052021-051922	Government security	1,412,247	1,412,465
	Derry Twp Pa Mun Auth Swr Rev Taxable Bds 2021 B	Municipal bond	51,186	50,627
	Franklin Cnty Ohio Taxable Ltd Tax Var Purp 2021 A	Municipal bond	25,042	24,621
	Mason Ohio Mun Recreational Facs Im 2020C	Municipal bond	24,954	22,921
	Massachusetts St Taxable Go Ref Bds 2020 E	Municipal bond	25,236	24,414
	Apple Inc Sr Glbl Nt 3.2% 27	Corporate bond	24,175	26,965
	Barclays Bank Plc Fr 3% 101723	Corporate bond	50,000	50,237
	Berkshire Hathaway Inc Del Sr Glbl Nt 26	Corporate bond	51,685	53,393
	Chevron Corporation Sr Glbl Nt30	Corporate bond	26,478	25,319
	Chevron Usa Inc Glbl Nt 1.018% 27	Corporate bond	48,442	48,155

PEOPLES SERVICES, INC.
EMPLOYEE STOCK OWNERSHIP PLAN
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SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
Form 5500 - Schedule H - Part IV, Line 4(i)

(See Independent Auditors' Report)

December 31, 2021

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value (c)	Cost (d)	Current Value (e)
	Comcast Corp New Sr Nt 4.25% 33	Corporate bond	30,823	29,157
	Cummins Inc Sr Glbl Nt 1.5% 30	Corporate bond	23,575	23,625
	Duke Energy Ohio Inc 1M Glbl Bd 29	Corporate bond	25,356	27,129
	Exxon Mobil Corp Sr Glbl Nt 22	Corporate bond	24,831	25,000
	General Electric Co Fr 3.45% 051524	Corporate bond	51,764	52,061
	Home Depot Inc Sr Glbl Nt 1.5% 28	Corporate bond	24,632	24,624
	JPMorgan Chase & Co Fr 2% 122328	Corporate bond	25,000	23,986
	Oracle Corp Sr Glbl Nt 27	Corporate bond	26,949	26,359
	Pfizer Inc Sr Glbl Nt 29	Corporate bond	51,487	55,018
	Procter & Gamble Co Sr Glbl Nt 2.3% 22	Corporate bond	50,339	50,093
	Tjx Cos Inc New Sr Glbl Nt 1.6% 31	Corporate bond	24,523	24,010
	United Parcel Svcs Inc Sr Glbl Nt 3.9% 25	Corporate bond	54,508	53,937
	Us Bancorp Fr 3.95% 111725	Corporate bond	27,330	27,321
	Walmart Inc Sr Nt 2.55% 23	Corporate bond	50,554	50,913
	Walmart Inc Sr Glbl Nt 3.7% 28	Corporate bond	50,217	55,948
	Walmart Inc Sr Glbl Nt 24	Corporate bond	26,184	26,160
			$ 8,031,403	$ 20,287,465

* Indicates a party-in-interest to the Plan. (see Note F)