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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|
| <b>Form 5500</b><br><br>Department of the Treasury<br>Internal Revenue Service<br><br>Department of Labor<br>Employee Benefits Security<br>Administration<br><br>Pension Benefit Guaranty Corporation | <b>Annual Return/Report of Employee Benefit Plan</b><br>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).<br><br><p style="text-align: center;">▶ <b>Complete all entries in accordance with the instructions to the Form 5500.</b></p> | OMB Nos. 1210-0110<br>1210-0089<br><br><b>2021</b><br><br><b>This Form is Open to Public Inspection</b> |
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|                                                                                                           |                                                                                                                                                                                                                                                                                                                                            |
|-----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Part I</b>                                                                                             | <b>Annual Report Identification Information</b>                                                                                                                                                                                                                                                                                            |
| For calendar plan year 2021 or fiscal plan year beginning <u>01/01/2021</u> and ending <u>12/31/2021</u>  |                                                                                                                                                                                                                                                                                                                                            |
| <b>A</b> This return/report is for:                                                                       | <input type="checkbox"/> a multiemployer plan <input type="checkbox"/> a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)<br><input checked="" type="checkbox"/> a single-employer plan <input type="checkbox"/> a DFE (specify) _____ |
| <b>B</b> This return/report is:                                                                           | <input type="checkbox"/> the first return/report <input type="checkbox"/> the final return/report<br><input type="checkbox"/> an amended return/report <input type="checkbox"/> a short plan year return/report (less than 12 months)                                                                                                      |
| <b>C</b> If the plan is a collectively-bargained plan, check here. . . . .                                | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                   |
| <b>D</b> Check box if filing under:                                                                       | <input checked="" type="checkbox"/> Form 5558 <input type="checkbox"/> automatic extension <input type="checkbox"/> the DFVC program<br><input type="checkbox"/> special extension (enter description)                                                                                                                                     |
| <b>E</b> If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. . . . . | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                   |

|                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                          |            |                                                       |  |                                                                     |  |                                                                  |  |                                                             |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|------------|-------------------------------------------------------|--|---------------------------------------------------------------------|--|------------------------------------------------------------------|--|-------------------------------------------------------------|--|
| <b>Part II</b>                                                                                                                                                                                                                                                                                                                                                       | <b>Basic Plan Information—enter all requested information</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                          |            |                                                       |  |                                                                     |  |                                                                  |  |                                                             |  |
| <b>1a</b> Name of plan<br><u>PENN LINE ENTERPRISES, INC. EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN</u>                                                                                                                                                                                                                                                               | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"><b>1b</b> Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2"><b>1c</b> Effective date of plan<br/><u>04/01/1979</u></td> </tr> <tr> <td colspan="2"><b>2b</b> Employer Identification Number (EIN)<br/><u>85-0756206</u></td> </tr> <tr> <td colspan="2"><b>2c</b> Plan Sponsor's telephone number<br/><u>724-887-9110</u></td> </tr> <tr> <td colspan="2"><b>2d</b> Business code (see instructions)<br/><u>238900</u></td> </tr> </table> | <b>1b</b> Three-digit plan number (PN) ▶ | <u>001</u> | <b>1c</b> Effective date of plan<br><u>04/01/1979</u> |  | <b>2b</b> Employer Identification Number (EIN)<br><u>85-0756206</u> |  | <b>2c</b> Plan Sponsor's telephone number<br><u>724-887-9110</u> |  | <b>2d</b> Business code (see instructions)<br><u>238900</u> |  |
| <b>1b</b> Three-digit plan number (PN) ▶                                                                                                                                                                                                                                                                                                                             | <u>001</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                          |            |                                                       |  |                                                                     |  |                                                                  |  |                                                             |  |
| <b>1c</b> Effective date of plan<br><u>04/01/1979</u>                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                          |            |                                                       |  |                                                                     |  |                                                                  |  |                                                             |  |
| <b>2b</b> Employer Identification Number (EIN)<br><u>85-0756206</u>                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                          |            |                                                       |  |                                                                     |  |                                                                  |  |                                                             |  |
| <b>2c</b> Plan Sponsor's telephone number<br><u>724-887-9110</u>                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                          |            |                                                       |  |                                                                     |  |                                                                  |  |                                                             |  |
| <b>2d</b> Business code (see instructions)<br><u>238900</u>                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                          |            |                                                       |  |                                                                     |  |                                                                  |  |                                                             |  |
| <b>2a</b> Plan sponsor's name (employer, if for a single-employer plan)<br>Mailing address (include room, apt., suite no. and street, or P.O. Box)<br>City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)<br><u>PENN LINE ENTERPRISES, INC.</u><br><br><u>300 SCOTSDALE AVENUE</u><br><u>SCOTSDALE, PA 15683</u> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                          |            |                                                       |  |                                                                     |  |                                                                  |  |                                                             |  |

**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.

|                  |                                                   |            |                                                              |
|------------------|---------------------------------------------------|------------|--------------------------------------------------------------|
| <b>SIGN HERE</b> | Filed with authorized/valid electronic signature. | 10/17/2022 | MICHAEL B DELMAR                                             |
|                  | Signature of plan administrator                   | Date       | Enter name of individual signing as plan administrator       |
| <b>SIGN HERE</b> |                                                   |            |                                                              |
|                  | Signature of employer/plan sponsor                | Date       | Enter name of individual signing as employer or plan sponsor |
| <b>SIGN HERE</b> |                                                   |            |                                                              |
|                  | Signature of DFE                                  | Date       | Enter name of individual signing as DFE                      |

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

Form 5500 (2021)  
v. 210624

|                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>3a</b> Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor                                                                                                                                                                                                                                                                                                                                |  | <b>3b</b> Administrator's EIN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | <b>3c</b> Administrator's telephone number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| <b>4</b> 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:<br><b>a</b> Sponsor's name <b>PENN LINE SERVICE, INC.</b><br><b>c</b> Plan Name <b>PENN LINE SERVICE, INC. EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN</b>                                          |  | <b>4b</b> EIN <b>25-1000923</b><br><b>4d</b> PN <b>001</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| <b>5</b> Total number of participants at the beginning of the plan year                                                                                                                                                                                                                                                                                                                                                                 |  | <b>5</b> <b>2538</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ).                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>a(1)</b> Total number of active participants at the beginning of the plan year.....                                                                                                                                                                                                                                                                                                                                                  |  | <b>6a(1)</b> <b>1447</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| <b>a(2)</b> Total number of active participants at the end of the plan year .....                                                                                                                                                                                                                                                                                                                                                       |  | <b>6a(2)</b> <b>1703</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| <b>b</b> Retired or separated participants receiving benefits.....                                                                                                                                                                                                                                                                                                                                                                      |  | <b>6b</b> <b>62</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| <b>c</b> Other retired or separated participants entitled to future benefits .....                                                                                                                                                                                                                                                                                                                                                      |  | <b>6c</b> <b>1217</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> .....                                                                                                                                                                                                                                                                                                                                                             |  | <b>6d</b> <b>2982</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. ....                                                                                                                                                                                                                                                                                                                              |  | <b>6e</b> <b>2</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> .....                                                                                                                                                                                                                                                                                                                                                                                 |  | <b>6f</b> <b>2984</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <b>g</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) .....                                                                                                                                                                                                                                                                                         |  | <b>6g</b> <b>2380</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested .....                                                                                                                                                                                                                                                                                              |  | <b>6h</b> <b>182</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....                                                                                                                                                                                                                                                                                                     |  | <b>7</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| <b>8a</b> If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:<br><b>2E 2F 2H 2I 2J 2K 2Q 2R 2T 3H</b>                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>b</b> If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>9a</b> Plan funding arrangement (check all that apply)<br><b>(1)</b> <input type="checkbox"/> Insurance<br><b>(2)</b> <input type="checkbox"/> Code section 412(e)(3) insurance contracts<br><b>(3)</b> <input checked="" type="checkbox"/> Trust<br><b>(4)</b> <input type="checkbox"/> General assets of the sponsor                                                                                                               |  | <b>9b</b> Plan benefit arrangement (check all that apply)<br><b>(1)</b> <input type="checkbox"/> Insurance<br><b>(2)</b> <input type="checkbox"/> Code section 412(e)(3) insurance contracts<br><b>(3)</b> <input checked="" type="checkbox"/> Trust<br><b>(4)</b> <input type="checkbox"/> General assets of the sponsor                                                                                                                                                                                                                            |
| <b>10</b> Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>a Pension Schedules</b><br><b>(1)</b> <input checked="" type="checkbox"/> <b>R</b> (Retirement Plan Information)<br><b>(2)</b> <input type="checkbox"/> <b>MB</b> (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary<br><b>(3)</b> <input type="checkbox"/> <b>SB</b> (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary |  | <b>b General Schedules</b><br><b>(1)</b> <input checked="" type="checkbox"/> <b>H</b> (Financial Information)<br><b>(2)</b> <input type="checkbox"/> <b>I</b> (Financial Information – Small Plan)<br><b>(3)</b> <input type="checkbox"/> <b>0</b> <b>A</b> (Insurance Information)<br><b>(4)</b> <input type="checkbox"/> <b>C</b> (Service Provider Information)<br><b>(5)</b> <input checked="" type="checkbox"/> <b>D</b> (DFE/Participating Plan Information)<br><b>(6)</b> <input type="checkbox"/> <b>G</b> (Financial Transaction Schedules) |

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

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**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.

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

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**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 \_\_\_\_\_

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

**Part II Information on Participating Plans (to be completed by DFEs)**

(Complete as many entries as needed to report all participating plans)

**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
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plan sponsor**c** EIN-PN

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| <b>SCHEDULE H</b><br><b>(Form 5500)</b><br><br><small>Department of the Treasury<br/>Internal Revenue Service</small><br><br><small>Department of Labor<br/>Employee Benefits Security Administration</small><br><br><small>Pension Benefit Guaranty Corporation</small> | <b>Financial Information</b><br><br>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).<br><br><b>► File as an attachment to Form 5500.</b> | <small>OMB No. 1210-0110</small><br><br><b>2021</b><br><br><b>This Form is Open to Public Inspection</b> |
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|                                                                                                          |                                                                    |            |
|----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|------------|
| For calendar plan year 2021 or fiscal plan year beginning <u>01/01/2021</u> and ending <u>12/31/2021</u> |                                                                    |            |
| <b>A</b> Name of plan<br><u>PENN LINE ENTERPRISES, INC. EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN</u>    | <b>B</b> Three-digit plan number (PN) ►                            | <u>001</u> |
|                                                                                                          |                                                                    |            |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500<br><u>PENN LINE ENTERPRISES, INC.</u>      | <b>D</b> Employer Identification Number (EIN)<br><u>85-0756206</u> |            |

|               |                                      |
|---------------|--------------------------------------|
| <b>Part I</b> | <b>Asset and Liability Statement</b> |
|---------------|--------------------------------------|

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

| Assets                                                                                            |                 | (a) Beginning of Year | (b) End of Year |
|---------------------------------------------------------------------------------------------------|-----------------|-----------------------|-----------------|
| <b>a</b> Total noninterest-bearing cash.....                                                      | <b>1a</b>       |                       |                 |
| <b>b</b> Receivables (less allowance for doubtful accounts):                                      |                 |                       |                 |
| <b>(1)</b> Employer contributions .....                                                           | <b>1b(1)</b>    | 6102820               | 5400080         |
| <b>(2)</b> Participant contributions.....                                                         | <b>1b(2)</b>    | 17470                 | 455             |
| <b>(3)</b> Other .....                                                                            | <b>1b(3)</b>    |                       |                 |
| <b>c</b> General investments:                                                                     |                 |                       |                 |
| <b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit) .....  | <b>1c(1)</b>    | 16080215              | 28039117        |
| <b>(2)</b> U.S. Government securities .....                                                       | <b>1c(2)</b>    |                       |                 |
| <b>(3)</b> Corporate debt instruments (other than employer securities):                           |                 |                       |                 |
| <b>(A)</b> Preferred .....                                                                        | <b>1c(3)(A)</b> |                       |                 |
| <b>(B)</b> All other .....                                                                        | <b>1c(3)(B)</b> |                       |                 |
| <b>(4)</b> Corporate stocks (other than employer securities):                                     |                 |                       |                 |
| <b>(A)</b> Preferred .....                                                                        | <b>1c(4)(A)</b> |                       |                 |
| <b>(B)</b> Common .....                                                                           | <b>1c(4)(B)</b> |                       |                 |
| <b>(5)</b> Partnership/joint venture interests .....                                              | <b>1c(5)</b>    |                       |                 |
| <b>(6)</b> Real estate (other than employer real property) .....                                  | <b>1c(6)</b>    |                       |                 |
| <b>(7)</b> Loans (other than to participants) .....                                               | <b>1c(7)</b>    |                       |                 |
| <b>(8)</b> Participant loans .....                                                                | <b>1c(8)</b>    |                       |                 |
| <b>(9)</b> Value of interest in common/collective trusts.....                                     | <b>1c(9)</b>    | 171261                | 231040          |
| <b>(10)</b> Value of interest in pooled separate accounts .....                                   | <b>1c(10)</b>   |                       |                 |
| <b>(11)</b> Value of interest in master trust investment accounts.....                            | <b>1c(11)</b>   |                       |                 |
| <b>(12)</b> Value of interest in 103-12 investment entities .....                                 | <b>1c(12)</b>   |                       |                 |
| <b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds) .....       | <b>1c(13)</b>   | 9929442               | 11614976        |
| <b>(14)</b> Value of funds held in insurance company general account (unallocated contracts)..... | <b>1c(14)</b>   |                       |                 |
| <b>(15)</b> Other.....                                                                            | <b>1c(15)</b>   | 8472345               | 8842907         |

|                    |                                                                  | (a) Beginning of Year | (b) End of Year |
|--------------------|------------------------------------------------------------------|-----------------------|-----------------|
| <b>1d</b>          | Employer-related investments:                                    |                       |                 |
| (1)                | Employer securities.....                                         | 1d(1) 122719405       | 113844760       |
| (2)                | Employer real property.....                                      | 1d(2)                 |                 |
| <b>e</b>           | Buildings and other property used in plan operation .....        | 1e                    |                 |
| <b>f</b>           | Total assets (add all amounts in lines 1a through 1e) .....      | 1f 163492958          | 167973335       |
| <b>Liabilities</b> |                                                                  |                       |                 |
| <b>g</b>           | Benefit claims payable .....                                     | 1g                    |                 |
| <b>h</b>           | Operating payables .....                                         | 1h                    |                 |
| <b>i</b>           | Acquisition indebtedness.....                                    | 1i                    |                 |
| <b>j</b>           | Other liabilities.....                                           | 1j                    |                 |
| <b>k</b>           | Total liabilities (add all amounts in lines 1g through 1j) ..... | 1k 0                  | 0               |
| <b>Net Assets</b>  |                                                                  |                       |                 |
| <b>l</b>           | Net assets (subtract line 1k from line 1f) .....                 | 1l 163492958          | 167973335       |

**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.

|          |                                                                                                     | (a) Amount        | (b) Total |
|----------|-----------------------------------------------------------------------------------------------------|-------------------|-----------|
| <b>a</b> | <b>Contributions:</b>                                                                               |                   |           |
| (1)      | Received or receivable in cash from: <b>(A)</b> Employers .....                                     | 2a(1)(A) 16814031 |           |
|          | <b>(B)</b> Participants .....                                                                       | 2a(1)(B) 976246   |           |
|          | <b>(C)</b> Others (including rollovers).....                                                        | 2a(1)(C) 42030    |           |
| (2)      | Noncash contributions.....                                                                          | 2a(2)             |           |
| (3)      | Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2) .....                             | 2a(3)             | 17832307  |
| <b>b</b> | <b>Earnings on investments:</b>                                                                     |                   |           |
| (1)      | Interest:                                                                                           |                   |           |
|          | <b>(A)</b> Interest-bearing cash (including money market accounts and certificates of deposit)..... | 2b(1)(A) 2259938  |           |
|          | <b>(B)</b> U.S. Government securities .....                                                         | 2b(1)(B)          |           |
|          | <b>(C)</b> Corporate debt instruments .....                                                         | 2b(1)(C)          |           |
|          | <b>(D)</b> Loans (other than to participants) .....                                                 | 2b(1)(D)          |           |
|          | <b>(E)</b> Participant loans.....                                                                   | 2b(1)(E)          |           |
|          | <b>(F)</b> Other .....                                                                              | 2b(1)(F)          |           |
|          | <b>(G)</b> Total interest. Add lines 2b(1)(A) through (F).....                                      | 2b(1)(G)          | 2259938   |
| (2)      | Dividends: <b>(A)</b> Preferred stock.....                                                          | 2b(2)(A)          |           |
|          | <b>(B)</b> Common stock .....                                                                       | 2b(2)(B)          |           |
|          | <b>(C)</b> Registered investment company shares (e.g. mutual funds).....                            | 2b(2)(C) 593850   |           |
|          | <b>(D)</b> Total dividends. Add lines 2b(2)(A), (B), and (C) .....                                  | 2b(2)(D)          | 593850    |
| (3)      | Rents .....                                                                                         | 2b(3)             |           |
| (4)      | Net gain (loss) on sale of assets: <b>(A)</b> Aggregate proceeds .....                              | 2b(4)(A)          |           |
|          | <b>(B)</b> Aggregate carrying amount (see instructions).....                                        | 2b(4)(B)          |           |
|          | <b>(C)</b> Subtract line 2b(4)(B) from line 2b(4)(A) and enter result .....                         | 2b(4)(C)          | 0         |
| (5)      | Unrealized appreciation (depreciation) of assets: <b>(A)</b> Real estate .....                      | 2b(5)(A)          |           |
|          | <b>(B)</b> Other .....                                                                              | 2b(5)(B) -8874645 |           |
|          | <b>(C)</b> Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B) .....                | 2b(5)(C)          | -8874645  |

|                                                                                                |        | (a) Amount | (b) Total |
|------------------------------------------------------------------------------------------------|--------|------------|-----------|
| (6) Net investment gain (loss) from common/collective trusts.....                              | 2b(6)  |            | 1535      |
| (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) |            | 956253    |
| c Other income.....                                                                            | 2c     |            | 996495    |
| d Total income. Add all <b>income</b> amounts in column (b) and enter total.....               | 2d     |            | 13765733  |
| <b>Expenses</b>                                                                                |        |            |           |
| e Benefit payment and payments to provide benefits:                                            |        |            |           |
| (1) Directly to participants or beneficiaries, including direct rollovers.....                 | 2e(1)  | 9251207    |           |
| (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)  |            | 9251207   |
| f Corrective distributions (see instructions).....                                             | 2f     |            | 31123     |
| g Certain deemed distributions of participant loans (see instructions).....                    | 2g     |            |           |
| h Interest expense.....                                                                        | 2h     |            |           |
| i Administrative expenses: (1) Professional fees.....                                          | 2i(1)  |            |           |
| (2) Contract administrator fees.....                                                           | 2i(2)  | 3026       |           |
| (3) Investment advisory and management fees.....                                               | 2i(3)  |            |           |
| (4) Other.....                                                                                 | 2i(4)  |            |           |
| (5) Total administrative expenses. Add lines 2i(1) through (4).....                            | 2i(5)  |            | 3026      |
| j Total expenses. Add all <b>expense</b> amounts in column (b) and enter total.....            | 2j     |            | 9285356   |
| <b>Net Income and Reconciliation</b>                                                           |        |            |           |
| k Net income (loss). Subtract line 2j from line 2d.....                                        | 2k     |            | 4480377   |
| l Transfers of assets:                                                                         |        |            |           |
| (1) To this plan.....                                                                          | 2l(1)  |            |           |
| (2) From this plan.....                                                                        | 2l(2)  |            |           |

**Part III Accountant's Opinion**

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

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

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

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) ☒ DOL Regulation 2520.103-8 (2) ☐ DOL Regulation 2520.103-12(d) (3) ☐ neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

(1) Name: THE KEENAN GROUP

(2) EIN: 25-1818418

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:

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.).....

|    | Yes | No | Amount |
|----|-----|----|--------|
| 4a | X   |    | 51220  |

|                                                                                                                                                                                                                                                                                                                  | Yes | No | Amount  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|---------|
| <b>b</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.) ..... |     |    |         |
| <b>4b</b>                                                                                                                                                                                                                                                                                                        |     | X  |         |
| <b>c</b> 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.) .....                                                                                                                             |     |    |         |
| <b>4c</b>                                                                                                                                                                                                                                                                                                        |     | X  |         |
| <b>d</b> 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.) .....                                                                                                                  |     |    |         |
| <b>4d</b>                                                                                                                                                                                                                                                                                                        |     | X  |         |
| <b>e</b> Was this plan covered by a fidelity bond? .....                                                                                                                                                                                                                                                         | X   |    | 2000000 |
| <b>f</b> Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty? .....                                                                                                                                                                          |     | X  |         |
| <b>4f</b>                                                                                                                                                                                                                                                                                                        |     | X  |         |
| <b>g</b> Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser? .....                                                                                                                                       |     | X  |         |
| <b>4g</b>                                                                                                                                                                                                                                                                                                        |     | X  |         |
| <b>h</b> Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser? .....                                                                                                                             |     | X  |         |
| <b>4h</b>                                                                                                                                                                                                                                                                                                        |     | X  |         |
| <b>i</b> Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.) .....                                                                                                                                                   | X   |    |         |
| <b>4i</b>                                                                                                                                                                                                                                                                                                        | X   |    |         |
| <b>j</b> Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.) .....                                                                                     |     | X  |         |
| <b>4j</b>                                                                                                                                                                                                                                                                                                        |     | X  |         |
| <b>k</b> Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? .....                                                                                                                                              |     | X  |         |
| <b>4k</b>                                                                                                                                                                                                                                                                                                        |     | X  |         |
| <b>l</b> Has the plan failed to provide any benefit when due under the plan? .....                                                                                                                                                                                                                               |     | X  |         |
| <b>4l</b>                                                                                                                                                                                                                                                                                                        |     | X  |         |
| <b>m</b> If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.) .....                                                                                                                                                                                     |     | X  |         |
| <b>4m</b>                                                                                                                                                                                                                                                                                                        |     | X  |         |
| <b>n</b> 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. ....                                                                                                                         |     |    |         |
| <b>4n</b>                                                                                                                                                                                                                                                                                                        |     |    |         |

**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 \_\_\_\_\_.

|                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                  |                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| <div>SCHEDULE R<br/>(Form 5500)<br/><br/>Department of the Treasury<br/>Internal Revenue Service<br/><br/>Department of Labor<br/>Employee Benefits Security Administration<br/><br/>Pension Benefit Guaranty Corporation</div> | <div>Retirement Plan Information</div> <div>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).</div> <div>▶ File as an attachment to Form 5500.</div> | <div>OMB No. 1210-0110</div> <div>2021</div> <div>This Form is Open to Public Inspection.</div> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|

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

|                                                                                                |                                                             |
|------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| <b>A</b> Name of plan<br>PENN LINE ENTERPRISES, INC. EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN | <b>B</b> Three-digit plan number (PN) ▶<br>001              |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500<br>PENN LINE ENTERPRISES, INC.   | <b>D</b> Employer Identification Number (EIN)<br>85-0756206 |

|               |                      |
|---------------|----------------------|
| <b>Part I</b> | <b>Distributions</b> |
|---------------|----------------------|

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

|                                                                                                                                                                                                                                                                        |          |   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|---|
| <b>1</b> Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....                                                                                                                                  | <b>1</b> | 0 |
| <b>2</b> 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):<br><br>EIN(s): 22-1146430 75-3182674 |          |   |
| Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.                                                                                                                                                                                                       |          |   |
| <b>3</b> Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year .....                                                                                                                                       | <b>3</b> |   |

|                |                                                                                                                                                                               |
|----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Part II</b> | <b>Funding Information</b> (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.) |
|----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                                                                                                                                                                                                                                                    |                              |                             |                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|------------------------------|
| <b>4</b> Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? .....                                                                                                                                                                                                                                               | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| If the plan is a defined benefit plan, go to line 8.                                                                                                                                                                                                                                                                                                               |                              |                             |                              |
| <b>5</b> 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. <b>Date:</b> Month _____ Day _____ Year _____<br>If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule. |                              |                             |                              |
| <b>6 a</b> Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) .....                                                                                                                                                                                                                     | <b>6a</b>                    |                             |                              |
| <b>b</b> Enter the amount contributed by the employer to the plan for this plan year .....                                                                                                                                                                                                                                                                         | <b>6b</b>                    |                             |                              |
| <b>c</b> 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) .....                                                                                                                                                                                                                   | <b>6c</b>                    |                             |                              |
| If you completed line 6c, skip lines 8 and 9.                                                                                                                                                                                                                                                                                                                      |                              |                             |                              |
| <b>7</b> Will the minimum funding amount reported on line 6c be met by the funding deadline? .....                                                                                                                                                                                                                                                                 | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| <b>8</b> 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? .....                                                                                        | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |

|                 |                   |
|-----------------|-------------------|
| <b>Part III</b> | <b>Amendments</b> |
|-----------------|-------------------|

|                                                                                                                                                                                                                            |                                   |                                   |                               |                             |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-----------------------------------|-------------------------------|-----------------------------|
| <b>9</b> 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..... | <input type="checkbox"/> Increase | <input type="checkbox"/> Decrease | <input type="checkbox"/> Both | <input type="checkbox"/> No |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-----------------------------------|-------------------------------|-----------------------------|

|                |                                                                                                                                                   |
|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Part IV</b> | <b>ESOPs</b> (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. |
|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                                                                              |                                         |                                        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|----------------------------------------|
| <b>10</b> Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? .....                                                      | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| <b>11 a</b> Does the ESOP hold any preferred stock? .....                                                                                                                                    | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| <b>b</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.) ..... | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| <b>12</b> Does the ESOP hold any stock that is not readily tradable on an established securities market? .....                                                                               | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |

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

Schedule R (Form 5500) 2021  
v. 201209

**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 \_\_\_\_\_

***PENN LINE ENTERPRISES, INC.***  
***EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN***

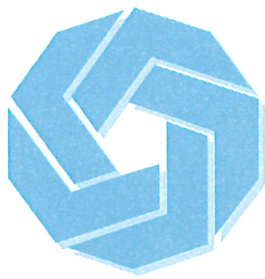
FINANCIAL STATEMENTS AND SUPPLEMENTAL INFORMATION

DECEMBER 31, 2021 AND 2020  
AND YEAR ENDED DECEMBER 31, 2021

***PENN LINE ENTERPRISES, INC. EMPLOYEE STOCK OWNERSHIP AND SAVINGS  
PLAN***

FINANCIAL STATEMENTS AND SUPPLEMENTAL INFORMATION  
DECEMBER 31, 2021 AND 2020 AND YEAR ENDED DECEMBER 31, 2021

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# THE KEENAN GROUP

CERTIFIED PUBLIC ACCOUNTANTS

## INDEPENDENT AUDITOR'S REPORT

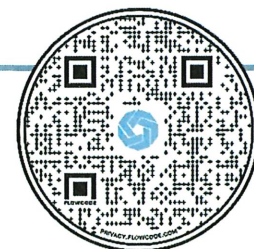
To the Administrative Committee of  
*Penn Line Enterprises, Inc. Employee Stock Ownership and Savings Plan*

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

We have performed an audit of the accompanying financial statements of Penn Line Enterprises, Inc. Employee Stock Ownership and Savings 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 Penn Line Enterprises, Inc. Employee Stock Ownership and Savings Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our 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 a certification 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**

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

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

## **Basis for Opinion**

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Penn Line Enterprises, Inc. Employee Stock Ownership and Savings 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 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 Penn Line Enterprises, Inc. Employee Stock Ownership and Savings Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

## **Auditor's Responsibilities for the Audit of the Financial Statements**

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with 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 Penn Line Enterprises, Inc. Employee Stock Ownership and Savings 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 Penn Line Enterprises, Inc. Employee Stock Ownership and Savings 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.

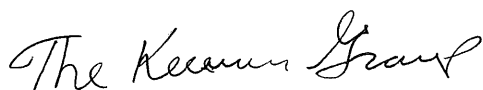
### **Supplemental Schedules Required by ERISA**

The supplemental schedules of assets (held at end of year) and delinquent participant contributions 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.

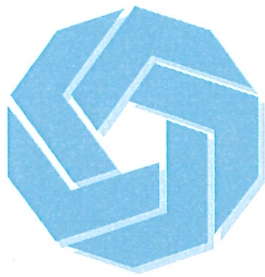
In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including their form and content, are presented in conformity with the Department of Labor's Rules and Regulations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

In our opinion—

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



Greensburg, Pennsylvania  
October 17, 2022



# THE KEENAN GROUP

CERTIFIED PUBLIC ACCOUNTANTS

## INDEPENDENT AUDITOR'S REPORT

To the Administrative Committee of  
*Penn Line Enterprises, Inc. Employee Stock Ownership and Savings Plan*

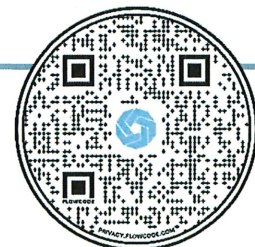
We were engaged to audit the accompanying statement of net assets available for benefits of Penn Line Enterprises, Inc. Employee Stock Ownership and Savings Plan (Plan) as December 31, 2020, and the related notes to the financial statement.

### **Management's Responsibility for the Financial Statement**

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

### **Auditor's Responsibility**

Our responsibility is to express an opinion on the 2020 financial statement based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.



**Basis for Disclaimer of Opinion**

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note C, which was certified by PNC Bank, National Association, the trustee of the Plan, except for comparing such information with the related information included in the financial statement. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of December 31, 2020, that the information provided to the plan administrator by the trustee is complete and accurate.

**Disclaimer of Opinion**

Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion on the 2020 financial statement. Accordingly, we do not express an opinion on the 2020 financial statement.

**Report on Form and Content in Compliance with DOL Rules and Regulations for 2020 Financial Statement**

The form and content of the information included in the 2020 financial statement, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

A handwritten signature in cursive script that reads "The Keenan Group".

Greensburg, Pennsylvania  
October 17, 2022

***PENN LINE ENTERPRISES, INC. EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN***  
**STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS**  
**DECEMBER 31, 2021 AND 2020**

|                                   | <u>2021</u>           | <u>2020</u>           |
|-----------------------------------|-----------------------|-----------------------|
| ASSETS                            |                       |                       |
| INVESTMENTS AT FAIR VALUE         | \$ 162,572,800        | \$ 157,372,668        |
| RECEIVABLES:                      |                       |                       |
| EMPLOYER CONTRIBUTIONS            | 5,400,080             | 6,102,820             |
| PARTICIPANT CONTRIBUTIONS         | <u>455</u>            | <u>17,470</u>         |
| TOTAL ASSETS                      | <u>167,973,335</u>    | <u>163,492,958</u>    |
| LIABILITIES                       |                       |                       |
| TOTAL LIABILITIES                 | <u>-</u>              | <u>-</u>              |
| NET ASSETS AVAILABLE FOR BENEFITS | <u>\$ 167,973,335</u> | <u>\$ 163,492,958</u> |

SEE ACCOMPANYING NOTES.

***PENN LINE ENTERPRISES, INC. EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN***  
**STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS**  
**YEAR ENDED DECEMBER 31, 2021**

ADDITIONS

ADDITIONS TO NET ASSETS ATTRIBUTED TO:

INVESTMENT INCOME:

|                                               |                    |
|-----------------------------------------------|--------------------|
| NET DEPRECIATION IN FAIR VALUE OF INVESTMENTS | \$ (4,660,424)     |
| DIVIDENDS                                     | 593,850            |
|                                               | <u>(4,066,574)</u> |

CONTRIBUTIONS:

|              |                   |
|--------------|-------------------|
| EMPLOYER     | 16,814,031        |
| PARTICIPANTS | 976,246           |
| ROLLOVERS    | 42,030            |
|              | <u>17,832,307</u> |

|                 |            |
|-----------------|------------|
| TOTAL ADDITIONS | 13,765,733 |
|-----------------|------------|

DEDUCTIONS

DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:

|                               |           |
|-------------------------------|-----------|
| BENEFITS PAID TO PARTICIPANTS | 9,282,330 |
|-------------------------------|-----------|

|                         |              |
|-------------------------|--------------|
| ADMINISTRATIVE EXPENSES | <u>3,026</u> |
|-------------------------|--------------|

|                  |                  |
|------------------|------------------|
| TOTAL DEDUCTIONS | <u>9,285,356</u> |
|------------------|------------------|

|              |           |
|--------------|-----------|
| NET INCREASE | 4,480,377 |
|--------------|-----------|

NET ASSETS AVAILABLE FOR BENEFITS:

|                   |                    |
|-------------------|--------------------|
| BEGINNING OF YEAR | <u>163,492,958</u> |
|-------------------|--------------------|

|             |                              |
|-------------|------------------------------|
| END OF YEAR | <u><u>\$ 167,973,335</u></u> |
|-------------|------------------------------|

SEE ACCOMPANYING NOTES.

***PENN LINE ENTERPRISES, INC. EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN***

**NOTES TO THE FINANCIAL STATEMENTS**

**DECEMBER 31, 2021 AND 2020 AND YEAR ENDED DECEMBER 31, 2021**

**NOTE A—DESCRIPTION OF PLAN**

The following description of the Penn Line Enterprises, Inc. (Company) Employee Stock Ownership and Savings Plan (Plan) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

**General**

The Plan commenced on April 1, 1979 as a stock bonus plan. Effective April 1, 2004, the Plan was converted to an employee stock ownership plan (ESOP). The Plan is intended to qualify as an employee stock bonus plan of the stock bonus variety under Section 401(a) and Section 4975(e)(7) of the Internal Revenue Code (IRC). It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Effective December 31, 2011, the Penn Line Service Profit Sharing Plan was merged into the Plan. Effective December 31, 2013, the Penn Line Service, Inc. Savings and Investment Plan was merged into the Plan. The Plan was amended and restated effective as of July 1, 2016 as part of the engagement of PNC Bank, National Association as record keeper, trustee, and custodian, further amended and restated effective January 1, 2018 to add employer matching contributions to the 401(k) portion of the Plan, and further amended and restated effective January 1, 2019 to update distribution election dates. As part of a corporate reorganization, the Plan name was changed from the Penn Line Service, Inc. Employee Stock Ownership and Savings Plan to the Penn Line Enterprises, Inc. Employee Stock Ownership and Savings Plan effective January 1, 2021.

In August 2020, Newport Group replaced PNC Bank, National Association as record keeper for the Plan.

The Plan Administrator is the Penn Line Enterprises ESOP Administrative Committee (Committee). The Committee determines the appropriateness of the Plan's investment offerings and monitors investment performance.

**Eligibility**

ESOP portion: Employees must be a covered employee (as defined below), credited with a year of service, and at least 21 years of age. To be credited with a year of service under the Plan, employees must be credited with at least 1,000 hours of service during the first nine months of employment, during the first twelve months of employment, or during any plan year beginning after the first day of work. Once these requirements are met, participants are eligible to receive ESOP contributions as of the January 1 date coinciding with or immediately preceding the date the requirements are met.

***PENN LINE ENTERPRISES, INC. EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN***

**NOTES TO THE FINANCIAL STATEMENTS**

**DECEMBER 31, 2021 AND 2020 AND YEAR ENDED DECEMBER 31, 2021**

**NOTE A—DESCRIPTION OF PLAN (CONTINUED)**

**Eligibility (Continued)**

401(k) and matching portion: Employees must be a covered employee (as defined below) and at least 21 years of age. Once these requirements are met, participants are eligible to make 401(k) contributions and receive matching contributions immediately thereafter.

Covered employees include all individuals employed by: Penn Line Enterprises, Inc., Penn Line Service, Inc., Penn Line Tree Service, Inc., Penn Line Energy T&D, Inc., Penn Line Equipment Holdings, LLC or Tri-County Electric, Inc., except for the following categories of employees who are not eligible for the Plan:

- Employees of Penn Line Tree Service, Inc. with the title of Groundman or Groundperson (these employees are not eligible to receive ESOP or 401(k) matching contributions but are eligible to make 401(k) contributions);
- Employees covered by a collective bargaining agreement (these employees are not eligible to receive ESOP or 401(k) matching contributions but are eligible to make 401(k) contributions, except for employees of Tri-County Electric, Inc. covered by a collective bargaining agreement who are not eligible for any part of the Plan);
- Non-resident aliens with no U.S. source of income;
- Leased employees; and
- Independent contractors even if a government agency later determines that they are employees.

**Contributions**

ESOP portion: Penn Line Enterprises, Inc. contributed \$5,400,000 of elective contributions to the Plan for the year ended December 31, 2021. Additionally, the Company contributed Penn Line Enterprises, Inc. common stock in the amount of \$11,240,471 to the Plan during the year ended December 31, 2021. Allocations to Plan participants are based on the participants' eligible compensation, relevant to total eligible compensation. There are no employee contributions into this portion of the Plan.

401(k) and matching portion: Each year, participants may contribute up to the maximum percentage of compensation and dollar amount permissible under the Internal Revenue Code (IRC). Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified plans (rollover). Participants direct the investment of their contributions into various investment options offered by the Plan. The Plan currently offers numerous mutual funds and a stable value fund as investment options for participants. The Company contributed \$173,567 of matching contributions to the Plan for the year ended December 31, 2021 based on a Company match of 25% of an employee's deferral up to 6% of their deferral.

***PENN LINE ENTERPRISES, INC. EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN***

**NOTES TO THE FINANCIAL STATEMENTS**

**DECEMBER 31, 2021 AND 2020 AND YEAR ENDED DECEMBER 31, 2021**

**NOTE A—DESCRIPTION OF PLAN (CONTINUED)**

**Participant Accounts**

ESOP and profit sharing portions: The Plan custodian maintains separate participant accounts for each participant. Each participant's account is credited with the (a) Company contribution and (b) an allocation of earnings/(losses). Allocation of earnings/(losses) is based on the ratio of the participant's beginning of the year account balance to all participants' beginning of the year account balances. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

401(k) and matching portion: Each participant's account is credited with the participant's contribution and allocations of (a) the Company matching contribution and (b) earnings/(losses). Allocation of earnings/(losses) is based on participant account balances and participant investment selections. The benefit to which a participant is entitled is the benefit that can be provided from the participant's account.

**Vesting**

ESOP portion: A participant will vest in the balance in his or her account based on total years of service credited. Participants vest 20% after two years of service, and then 20% per year thereafter. Participants shall become fully vested if employed on or after normal retirement age or upon death or disability.

401(k), matching, and profit sharing portions: Participants are immediately vested in their 401(k) account, including matching contributions, and their profit sharing account.

**Payment of Benefits**

ESOP portion: No distributions from the Plan will be made until a participant retires, dies, or otherwise terminates employment. Distributions of ESOP account balances up to \$230,000 are paid in cash and in one lump-sum payment. ESOP account balances exceeding \$230,000 (indexed for inflation) are paid over a period not to exceed five years, with each annual installment equal to \$230,000. The distribution period may be longer than five years but no longer than ten years if the ESOP account exceeds \$1,165,000.

Profit sharing portion: Distributions of this portion of the Plan are paid in cash and in one lump-sum payment, regardless of balance.

401(k) and matching portion: Upon termination of service, death, disability, or retirement, a participant/beneficiary will generally receive a lump-sum amount equal to the value of the participant's account. The Plan permits in-service distributions to participants over age 59½. Hardship withdrawals are permitted by the Plan.

***PENN LINE ENTERPRISES, INC. EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN***

**NOTES TO THE FINANCIAL STATEMENTS**

DECEMBER 31, 2021 AND 2020 AND YEAR ENDED DECEMBER 31, 2021

**NOTE A—DESCRIPTION OF PLAN (CONTINUED)**

**Put Option**

Under 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 current appraised value of the stock. The Company can pay for the purchase with interest over a period of five years. The purpose of the put option is to ensure that the participant has the ability to ultimately obtain cash.

**Diversification**

Diversification is offered to participants close to retirement so that they may have the opportunity to move part of the value of their investment in Company stock into investments which are more diversified. Participants who are at least age 55 or have completed their tenth year of service after the date they first became a participant in the Plan may elect to diversify a portion of their account. Diversification is offered to each eligible participant over a six-year period. In each of the first five years, a participant may diversify up to 25% of his/her account balance that is attributable to Company stock. In the sixth year, the percentage increases to 50%. Participants eligible to diversify make their election after year-end based on the number of shares of the employer's stock held in their account at year-end.

**Forfeited Accounts**

At December 31, 2021, forfeited nonvested amounts totaled \$287,920. Forfeitures of participant accounts are allocated to each account of the remaining participants based upon the relation of the participant's compensation to total compensation for the Plan year. Forfeitures of terminated nonvested account balances in the amount of \$9,464 were allocated to remaining participants during the year ended December 31, 2021.

**NOTE B—SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

**Basis of Accounting**

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

**Use of Estimates**

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires the Plan Administrator to make estimates and assumptions that affect reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Accordingly, actual results may differ from those estimates.

**PENN LINE ENTERPRISES, INC. EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN**

**NOTES TO THE FINANCIAL STATEMENTS**

**DECEMBER 31, 2021 AND 2020 AND YEAR ENDED DECEMBER 31, 2021**

**NOTE B—SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)**

**Investment Valuation and Income Recognition**

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The estimated fair value of the Plan's investment in Penn Line Enterprises, Inc. common stock has been determined by an independent appraiser. As a practical expedient, the fair value of the stable value common collective trust fund and the Penn Line Profit Sharing Fund are estimated using the net asset value per share of the funds. See Note F for discussion of fair value measurements.

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

**Payment of Benefits**

Benefits are recorded when paid.

**Expenses**

All expenses of maintaining the Plan are paid by the Company and are therefore excluded from these financial statements. Investment-related expenses are included in the net appreciation/(depreciation) in fair value of investments. Fees for the distributions to participants are included in administrative expenses and charged directly to the participant's account.

**Date of Management's Review of Subsequent Events**

Subsequent events were evaluated through October 17, 2022, which is the date the financial statements were available to be issued.

**NOTE C—CERTIFIED INVESTMENTS**

Certain information related to investments disclosed in the accompanying financial statements and ERISA-required supplemental schedule, including \$48,728,040 and \$34,653,263 of investments at fair value as of December 31, 2021 and 2020, respectively, \$4,186,653 of net appreciation in fair value of investments and \$593,850 of dividends for the year ended December 31, 2021, was obtained by management and agreed to or derived from information certified as complete and accurate by PNC Bank, National Association (the trustee of the Plan).

**NOTE D—INVESTMENTS IN COMPANY STOCK**

Investments in the Company's stock at fair value, as determined by independent appraiser's stock valuation reports, are as follows:

|                         | <u>2021</u>          | <u>2020</u>          |
|-------------------------|----------------------|----------------------|
| Shares held by the Plan | 382,363              | 382,363              |
| Fair value per share    | <u>\$297.74</u>      | <u>\$320.95</u>      |
|                         | <u>\$113,844,760</u> | <u>\$122,719,405</u> |

***PENN LINE ENTERPRISES, INC. EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN***

**NOTES TO THE FINANCIAL STATEMENTS**

DECEMBER 31, 2021 AND 2020 AND YEAR ENDED DECEMBER 31, 2021

**NOTE E—NONPARTICIPANT-DIRECTED INVESTMENTS**

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

|                                                 | <u>December 31, 2021</u> | <u>December 31, 2020</u> |
|-------------------------------------------------|--------------------------|--------------------------|
| Net Assets:                                     |                          |                          |
| Company common stock                            | \$ 113,844,760           | \$ 122,719,405           |
| Unitized account                                | 8,842,907                | 8,472,345                |
| Cash account                                    | <u>28,039,117</u>        | <u>16,080,214</u>        |
|                                                 | <u>\$ 150,726,784</u>    | <u>\$ 147,271,964</u>    |
|                                                 |                          | <u>Year Ended</u>        |
|                                                 |                          | <u>December 31, 2021</u> |
| Changes in Net Assets:                          |                          |                          |
| Contributions                                   |                          | \$ 8,762,591             |
| Net depreciation                                |                          | (5,645,783)              |
| Transfers from participant-directed investments |                          | 8,985,241                |
| Benefits paid to participants                   |                          | <u>(8,647,229)</u>       |
|                                                 |                          | <u>\$ 3,454,820</u>      |

**NOTE F—FAIR VALUE MEASUREMENTS**

The Plan's investments are reported at fair value in the accompanying statements of net assets available for benefits. The methods used to measure fair value may produce an amount that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to measure the fair value of certain financial instruments could result in a different fair value at the reporting date.

The fair value measurement accounting literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority. Level 2 inputs consist of observable inputs other than quoted prices for identical assets (Level 1). Level 3 inputs are unobservable and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 2 inputs would be used for investments for which Level 1 inputs were not available. Level 3 inputs would only be used if Level 1 or Level 2 inputs were not available. There are no plan assets requiring the use of Level 2 inputs for the periods presented.

***PENN LINE ENTERPRISES, INC. EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN***

**NOTES TO THE FINANCIAL STATEMENTS**

**DECEMBER 31, 2021 AND 2020 AND YEAR ENDED DECEMBER 31, 2021**

**NOTE F—FAIR VALUE MEASUREMENTS (CONTINUED)**

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

Mutual funds – The fair value of mutual funds is based on quoted net asset values of the shares as reported by the fund. The mutual funds held by the Plan are open-end mutual funds registered with the U.S. Securities and Exchange Commission. The funds must publish their daily net asset value and transact at that price. The mutual funds held by the Plan are considered to be actively traded.

Company common stock – The fair value of the Company’s common stock held by the Plan is based upon an annual independent appraisal. The appraisal was based on the income valuation approach consistent with prior years. The appraiser took into account historical and projected cash flow and net earnings, weighted average cost of capital, and applicable discounts.

Common collective trust – The stable value common trust fund, a common collective trust which holds indirect investments in fully benefit-responsive investment contracts, is valued at the net asset value per unit, as determined by the Fund trustee at year-end. The net asset value is used as a practical expedient to estimate fair value. This practical expedient would not be used if it is determined to be probable that the fund will sell the investment for an amount different from the reported net asset value. The Plan’s investment in the stable value fund is not required to be classified within the fair value hierarchy since it is measured at net asset value.

**PENN LINE ENTERPRISES, INC. EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN**

NOTES TO THE FINANCIAL STATEMENTS

DECEMBER 31, 2021 AND 2020 AND YEAR ENDED DECEMBER 31, 2021

**NOTE F—FAIR VALUE MEASUREMENTS (CONTINUED)**

The following tables set forth, by level within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2021 and 2020:

|                                                                           |                       | Fair Value Measurements at the End<br>of the Reporting Period Using:          |                                            |                                                    |
|---------------------------------------------------------------------------|-----------------------|-------------------------------------------------------------------------------|--------------------------------------------|----------------------------------------------------|
|                                                                           | Fair Value            | Quoted Prices<br>in Active<br>Markets for<br>Identical<br>Assets<br>(Level 1) | Other<br>Observable<br>Inputs<br>(Level 2) | Significant<br>Unobservable<br>Inputs<br>(Level 3) |
| <u>December 31, 2021</u>                                                  |                       |                                                                               |                                            |                                                    |
| Cash                                                                      | \$ 28,039,117         | \$ 28,039,117                                                                 | \$ -                                       | \$ -                                               |
| Mutual funds                                                              | 11,614,976            | 11,614,976                                                                    | -                                          | -                                                  |
| Company common stock                                                      | 113,844,760           | -                                                                             | -                                          | 113,844,760                                        |
| Total investments in the<br>fair value hierarchy                          | 153,498,853           | 39,654,093                                                                    | -                                          | 113,844,760                                        |
| Common collective trusts<br>measured at net asset<br>value <sup>(a)</sup> | 9,073,947             |                                                                               |                                            |                                                    |
| Total investments at fair<br>value                                        | <u>\$ 162,572,800</u> |                                                                               |                                            |                                                    |

|                                                                           |                       | Fair Value Measurements at the End<br>of the Reporting Period Using:          |                                            |                                                    |
|---------------------------------------------------------------------------|-----------------------|-------------------------------------------------------------------------------|--------------------------------------------|----------------------------------------------------|
|                                                                           | Fair Value            | Quoted Prices<br>in Active<br>Markets for<br>Identical<br>Assets<br>(Level 1) | Other<br>Observable<br>Inputs<br>(Level 2) | Significant<br>Unobservable<br>Inputs<br>(Level 3) |
| <u>December 31, 2020</u>                                                  |                       |                                                                               |                                            |                                                    |
| Cash                                                                      | \$ 16,080,214         | \$ 16,080,214                                                                 | \$ -                                       | \$ -                                               |
| Mutual funds                                                              | 9,929,443             | 9,929,443                                                                     | -                                          | -                                                  |
| Company common stock                                                      | 122,719,405           | -                                                                             | -                                          | 122,719,405                                        |
| Total investments in the<br>fair value hierarchy                          | 148,729,062           | 26,009,657                                                                    | -                                          | 122,719,405                                        |
| Common collective trusts<br>measured at net asset<br>value <sup>(a)</sup> | 8,643,606             |                                                                               |                                            |                                                    |
| Total investments at fair<br>value                                        | <u>\$ 157,372,668</u> |                                                                               |                                            |                                                    |

***PENN LINE ENTERPRISES, INC. EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN***

**NOTES TO THE FINANCIAL STATEMENTS**

**DECEMBER 31, 2021 AND 2020 AND YEAR ENDED DECEMBER 31, 2021**

**NOTE F—FAIR VALUE MEASUREMENTS (CONTINUED)**

(a) Certain investments that are measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in these tables are intended to permit reconciliation of the fair value hierarchies to the amounts presented in the statements of net assets available for benefits.

The following tables provide further details of the Plan's Level 3 fair value measurement for the year ended December 31, 2021:

|                                                                                                                                                                                                                               | Company Common<br>Stock |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| Beginning balance                                                                                                                                                                                                             | \$ 122,719,405          |
| Total gains or losses included in changes in net<br>assets available for benefits                                                                                                                                             | <u>(8,874,645)</u>      |
| Ending balance                                                                                                                                                                                                                | <u>\$ 113,844,760</u>   |
|                                                                                                                                                                                                                               |                         |
| Total gains or losses for the year included in changes<br>in net assets available for benefits attributable to the<br>change in unrealized gains or losses relating to<br>investments held at the end of the reporting period | <u>\$ (8,874,645)</u>   |

The Plan's policy is to recognize transfers into and out of Level 3 as of the date of the event or change in circumstances that caused the transfer. For the year ended December 31, 2021, there were no significant transfers into or out of Level 3.

**PENN LINE ENTERPRISES, INC. EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN**

NOTES TO THE FINANCIAL STATEMENTS

DECEMBER 31, 2021 AND 2020 AND YEAR ENDED DECEMBER 31, 2021

**NOTE F—FAIR VALUE MEASUREMENTS (CONTINUED)**

Investments Measured Using the Net Asset Value per Share Practical Expedient

The following tables summarize the Plan's investments for which fair value is measured using the net asset value per share as a practical expedient as of December 31, 2021 and 2020, respectively. The redemption notice period is applicable only to the Plan.

| December 31,<br>2021                    | Fair Value  | Unfunded<br>Commitments | Redemption<br>Frequency (If<br>Currently<br>Eligible) | Redemption<br>Notice Period                                                             |
|-----------------------------------------|-------------|-------------------------|-------------------------------------------------------|-----------------------------------------------------------------------------------------|
| T. Rowe Price<br>Stable Value<br>Fund A | \$231,040   | N/A                     | Daily                                                 | 12 or 30 months<br>– may be<br>shortened or<br>waived under<br>certain<br>circumstances |
| Penn Line Profit<br>Sharing Fund        | \$8,842,907 | N/A                     | Daily                                                 | None                                                                                    |
| December 31,<br>2020                    | Fair Value  | Unfunded<br>Commitments | Redemption<br>Frequency (If<br>Currently<br>Eligible) | Redemption<br>Notice Period                                                             |
| T. Rowe Price<br>Stable Value<br>Fund A | \$171,261   | N/A                     | Daily                                                 | 12 months under<br>certain<br>circumstances<br>only                                     |
| Penn Line Profit<br>Sharing Fund        | \$8,472,345 | N/A                     | Daily                                                 | None                                                                                    |

The Plan invests in a common collective trust, the T. Rowe Price Stable Value Common Trust Fund (trust) operated by T. Rowe Price Trust Company. The trust invests primarily in synthetic investment contracts issued by insurance companies, banks, and other financial institutions and other short-term investments. The investment objectives of the trust are to maximize current income consistent with the maintenance of principal and to provide for benefit-responsive participant withdrawals at contract value. Participants may redeem trust units on a daily basis for withdrawal or transfer of all or a portion of their investment at contract value without restriction. Events outside the normal operation of the trust (i.e. partial or complete legal termination of the trust or a unit holder, tax disqualification of the trust or a unit holder, and certain trust amendments if the issuers' consent is not obtained) can limit the trust's ability to transact at contract value with the issuers of its investment contracts. Withdrawals from an investment contract due to these events may result in a negative market value adjustment with respect to such withdrawal. Per the Annual Report of the T. Rowe Price Stable Value Common Trust Fund as of December 31, 2021, the occurrence of these events is not probable.

***PENN LINE ENTERPRISES, INC. EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN***

**NOTES TO THE FINANCIAL STATEMENTS**

**DECEMBER 31, 2021 AND 2020 AND YEAR ENDED DECEMBER 31, 2021**

**NOTE F—FAIR VALUE MEASUREMENTS (CONTINUED)**

The Penn Line Profit Sharing Fund's investment strategy is to maintain a portfolio with approximately 55% equity holdings and 45% fixed income holdings. Primarily these investments are held in common stocks, corporate and government bonds, and mutual funds.

The T. Rowe Price Stable Value Fund is a direct filing entity. As a result, no disclosure of their investment strategies is required.

**NOTE G—TAX STATUS**

The Internal Revenue Service (IRS) has determined and informed the Plan sponsor by a letter dated May 20, 2015, that the Plan is and related trust are designed in accordance with applicable sections of the IRC. Although the Plan has been amended since receiving the determination letter, the Plan Administrator and the Plan's tax counsel believe that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believe that the Plan is qualified, and the related trust is tax-exempt.

Accounting principles generally accepted in the United States of America require the plan administrator to evaluate tax positions taken by the Plan and recognize a tax liability for any uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by tax authorities; however, there are currently no audits for any tax periods in progress.

**NOTE H—PLAN TERMINATION**

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

**NOTE I—ADMINISTRATION OF PLAN ASSETS**

With the exception of Company common stock, Plan assets are held and managed by PNC Bank, National Association, Trustee, which invests cash received, interest, and dividend income and makes distributions to participants. Company common stock, which is the primary component of Plan assets, is held and managed by three co-trustees (individuals).

Certain administrative functions related to the operation and financial reporting of the Plan are performed by officers or employees of the Company or its subsidiaries. No such officer or employee receives compensation from the Plan.

***PENN LINE ENTERPRISES, INC. EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN***

**NOTES TO THE FINANCIAL STATEMENTS**

**DECEMBER 31, 2021 AND 2020 AND YEAR ENDED DECEMBER 31, 2021**

**NOTE J—RELATED PARTY AND PARTY-IN-INTEREST TRANSACTIONS**

A significant portion of the Plan's assets are investments in Company common stock (see Note D). As the Company is the Plan sponsor, transactions involving Company common stock qualify as related party and party-in-interest transactions. As described in Note B, the Company pays the expenses of the Plan. The Plan also engages several service providers. Such parties are parties-in-interest under ERISA.

Delinquent participant contributions represent non-exempt party-in-interest transactions. Plan management identified delinquent participant contributions related to the Plan year ended December 31, 2021 amounting to \$2,377. These contributions were deposited into the Plan during 2021 and 2022. Lost earnings related to these late contributions have not been deposited to the Plan as of the date of this report. Plan management identified delinquent participant contributions related to the Plan year ended December 31, 2020 amounting to \$26,386. Deposits representing the actual late remittances were made in 2021 and 2022. Lost earnings related to these late contributions have not been deposited to the Plan as of the date of this report. Late remittances relating to the Plan year ended December 31, 2016 were fully corrected on October 10, 2021 with the deposit of lost earnings to the Plan. Deposits representing the actual late remittances were made in 2016 and 2018.

**NOTE K—RISKS AND UNCERTAINTIES**

The Plan invests in various investment securities including the Company's common stock. These investment securities are exposed to various risks including interest rate, market, and credit risks, as well as valuation assumptions based on earnings and cash flows. Due to the level of risk associated with these investment securities, and to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in the values of these investment securities will occur in the near term and that such changes could materially affect participants' account balances and amounts reported in the statements of net assets available for benefits.

Market disruptions associated with the COVID-19 pandemic have had a global impact, and uncertainty exists as to the long-term implications. Such disruptions can adversely affect Plan investments and investment performance.

## **SUPPLEMENTAL INFORMATION**

**PENN LINE ENTERPRISES, INC. EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN**

EIN: 25-1000923

PLAN NUMBER: 001

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

| (a) | (b)                                                         | (c)                                                                                                              | (d)        | (e)                   |
|-----|-------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|------------|-----------------------|
|     | Identity of issue, borrower,<br>lessor, or similar<br>party | Description of investment<br>including maturity date,<br>rate of interest, collateral,<br>par, or maturity value | Cost       | Current value         |
|     | Mutual Funds:                                               |                                                                                                                  |            |                       |
|     | American Funds 2025 Trgt Date                               | 76,742.966 Shares                                                                                                |            | 1,240,934             |
|     | American Funds 2030 Trgt Date                               | 85,946.006 Shares                                                                                                |            | 1,535,855             |
|     | JPMorgan Equity Income R6                                   | 35,454.368 Shares                                                                                                |            | 845,587               |
|     | Vanguard 500 Index Admiral                                  | 1,678.388 Shares                                                                                                 |            | 738,206               |
|     | American Funds 2020 Trgt Date                               | 48,924.231 Shares                                                                                                |            | 700,595               |
|     | American Funds 2050 Trgt Date                               | 31,309.154 Shares                                                                                                |            | 660,310               |
|     | American Funds 2040 Trgt Date                               | 30,073.895 Shares                                                                                                |            | 623,131               |
|     | American Funds 2015 Trgt Date                               | 46,740.326 Shares                                                                                                |            | 612,298               |
|     | Vanguard GNMA Fund Admin                                    | 54,136.208 Shares                                                                                                |            | 570,596               |
|     | American Funds 2045 Trgt Date                               | 24,305.224 Shares                                                                                                |            | 518,674               |
|     | American Funds 2035 Trgt Date                               | 20,947.093 Shares                                                                                                |            | 410,982               |
|     | American Funds 2055 Trgt Date                               | 13,819.296 Shares                                                                                                |            | 367,455               |
|     | Janus Henderson Enterprise N                                | 1,947.742 Shares                                                                                                 |            | 310,762               |
|     | MFS Mid Cap Value R6                                        | 8,409.838 Shares                                                                                                 |            | 272,731               |
|     | Hartford Core Equity R6                                     | 5,302.049 Shares                                                                                                 |            | 266,322               |
|     | JPMorgan Growth Advantage R6                                | 6,536.378 Shares                                                                                                 |            | 228,643               |
|     | American Funds 2060 Trgt Date                               | 11,111.252 Shares                                                                                                |            | 198,669               |
|     | Vanguard Mid Cap Index Adm                                  | 584.340 Shares                                                                                                   |            | 184,336               |
|     | JHancock Bond R6                                            | 10,370.814 Shares                                                                                                |            | 167,696               |
|     | Vanguard Small Cap Index Adm                                | 1,521.305 Shares                                                                                                 |            | 164,864               |
|     | Vanguard Inf Technology Idx Ad                              | 452.383 Shares                                                                                                   |            | 106,079               |
|     | Vanguard Energy Index Adm                                   | 2,732.485 Shares                                                                                                 |            | 105,911               |
|     | Lord Abbett High Yield R6                                   | 13,992.187 Shares                                                                                                |            | 105,361               |
|     | Hartford Intl Opportunities R6                              | 4,673.309 Shares                                                                                                 |            | 94,167                |
|     | Federated Mdt Small Cp Grth R6                              | 2,365.957 Shares                                                                                                 |            | 69,204                |
|     | Invesco International Diversified Fund                      | 2,521.281 Shares                                                                                                 |            | 55,317                |
|     | Vanguard Short Term Bd Idx Adm                              | 5,124.303 Shares                                                                                                 |            | 54,369                |
|     | Putnam International Value R6                               | 4,153.613 Shares                                                                                                 |            | 50,840                |
|     | Nuveen Real Estate Sec. R6                                  | 2,184.764 Shares                                                                                                 |            | 50,577                |
|     | T. Rowe Price Blue Chip Growth                              | 249.629 Shares                                                                                                   |            | 44,491                |
|     | American Funds New World R6                                 | 440.524 Shares                                                                                                   |            | 37,872                |
|     | Vanguard Health Care Index Adm                              | 279.525 Shares                                                                                                   |            | 37,230                |
|     | Pioneer Strategic Income                                    | 3,124.199 Shares                                                                                                 |            | 33,679                |
|     | AB Global Bond Z                                            | 3,631.539 Shares                                                                                                 |            | 30,069                |
|     | American Funds 2065 Trgt Date                               | 1,529.029 Shares                                                                                                 |            | 25,795                |
|     | Vanguard Financials Index Adm                               | 460.838 Shares                                                                                                   |            | 22,295                |
|     | MFS Total Return Fund R6                                    | 1,023.624 Shares                                                                                                 |            | 21,987                |
|     | Am Beacon Sm Cap Value Inst                                 | 735.547 Shares                                                                                                   |            | 21,096                |
|     | American Funds Inc Fund of Ame                              | 598.238 Shares                                                                                                   |            | 15,470                |
|     | Vanguard Strat Small Cap Eqty                               | 322.164 Shares                                                                                                   |            | 12,581                |
|     | Vanguard FTSE All-Wld Ex-US Id                              | 32.237 Shares                                                                                                    |            | 1,229                 |
|     | Vanguard Int Bond Mkt Index                                 | 56.281 Shares                                                                                                    |            | 669                   |
|     | DFA International Value I                                   | 2.165 Shares                                                                                                     |            | 42                    |
|     | Vanguard L/T Bond Idx Adm                                   | 0.002 Shares                                                                                                     |            | -                     |
|     |                                                             |                                                                                                                  |            | <u>11,614,976</u>     |
|     | Common/Collective Funds:                                    |                                                                                                                  |            |                       |
|     | T. Rowe Price Stable Value A                                | 231,040.301 Shares                                                                                               |            | 231,040               |
|     | Unitized Account:                                           |                                                                                                                  |            |                       |
| *   | Penn Line Profit Sharing Fund                               | 530,981.151 Shares                                                                                               | 7,216,988  | 8,842,907             |
|     | Cash:                                                       |                                                                                                                  |            |                       |
| *   | Penn Line Cash Account                                      | 1,759,271.023 Shares                                                                                             | 24,750,588 | 28,039,117            |
|     | Company Common Stock:                                       |                                                                                                                  |            |                       |
| *   | Penn Line Enterprises, Inc.                                 | 382,363 Shares                                                                                                   | -          | <u>113,844,760</u>    |
|     |                                                             |                                                                                                                  |            | <u>\$ 162,572,800</u> |

\* - Denotes party-in-interest

Note: Cost information is not required for participant-directed investments.

**PENN LINE ENTERPRISES, INC. EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN**

EIN: 25-1000923

PLAN NUMBER: 001

**SCHEDULE H, LINE 4a - SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS**

| Participant Contributions<br>Transferred Late to Plan          | Total that Constitutes Nonexempt Prohibited<br>Transactions |                                            |                                                   | Total Fully Corrected<br>Under Voluntary<br>Fiduciary Correction<br>Program (VFCP) and<br>Prohibited Transaction<br>Exemption 2002-51 |
|----------------------------------------------------------------|-------------------------------------------------------------|--------------------------------------------|---------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| Check here if Late Participant<br>Loan Repayments are Included | Contributions<br>Not<br>Corrected                           | Contributions<br>Corrected<br>Outside VFCP | Contributions<br>Pending<br>Correction in<br>VFCP |                                                                                                                                       |

|      |    |        |        |  |
|------|----|--------|--------|--|
| 2016 |    | \$     | 22,457 |  |
| 2020 | \$ | 26,386 |        |  |
| 2021 | \$ | 2,377  |        |  |

**PENN LINE ENTERPRISES, INC. EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN**

EIN: 25-1000923

PLAN NUMBER: 001

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

| (a) | (b)                                                         | (c)                                                                                                              | (d)        | (e)                   |
|-----|-------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|------------|-----------------------|
|     | Identity of issue, borrower,<br>lessor, or similar<br>party | Description of investment<br>including maturity date,<br>rate of interest, collateral,<br>par, or maturity value | Cost       | Current value         |
|     | Mutual Funds:                                               |                                                                                                                  |            |                       |
|     | American Funds 2025 Trgt Date                               | 76,742.966 Shares                                                                                                |            | 1,240,934             |
|     | American Funds 2030 Trgt Date                               | 85,946.006 Shares                                                                                                |            | 1,535,855             |
|     | JPMorgan Equity Income R6                                   | 35,454.368 Shares                                                                                                |            | 845,587               |
|     | Vanguard 500 Index Admiral                                  | 1,678.388 Shares                                                                                                 |            | 738,206               |
|     | American Funds 2020 Trgt Date                               | 48,924.231 Shares                                                                                                |            | 700,595               |
|     | American Funds 2050 Trgt Date                               | 31,309.154 Shares                                                                                                |            | 660,310               |
|     | American Funds 2040 Trgt Date                               | 30,073.895 Shares                                                                                                |            | 623,131               |
|     | American Funds 2015 Trgt Date                               | 46,740.326 Shares                                                                                                |            | 612,298               |
|     | Vanguard GNMA Fund Admin                                    | 54,136.208 Shares                                                                                                |            | 570,596               |
|     | American Funds 2045 Trgt Date                               | 24,305.224 Shares                                                                                                |            | 518,674               |
|     | American Funds 2035 Trgt Date                               | 20,947.093 Shares                                                                                                |            | 410,982               |
|     | American Funds 2055 Trgt Date                               | 13,819.296 Shares                                                                                                |            | 367,455               |
|     | Janus Henderson Enterprise N                                | 1,947.742 Shares                                                                                                 |            | 310,762               |
|     | MFS Mid Cap Value R6                                        | 8,409.838 Shares                                                                                                 |            | 272,731               |
|     | Hartford Core Equity R6                                     | 5,302.049 Shares                                                                                                 |            | 266,322               |
|     | JPMorgan Growth Advantage R6                                | 6,536.378 Shares                                                                                                 |            | 228,643               |
|     | American Funds 2060 Trgt Date                               | 11,111.252 Shares                                                                                                |            | 198,669               |
|     | Vanguard Mid Cap Index Adm                                  | 584.340 Shares                                                                                                   |            | 184,336               |
|     | JHancock Bond R6                                            | 10,370.814 Shares                                                                                                |            | 167,696               |
|     | Vanguard Small Cap Index Adm                                | 1,521.305 Shares                                                                                                 |            | 164,864               |
|     | Vanguard Inf Technology Idx Ad                              | 452.383 Shares                                                                                                   |            | 106,079               |
|     | Vanguard Energy Index Adm                                   | 2,732.485 Shares                                                                                                 |            | 105,911               |
|     | Lord Abbett High Yield R6                                   | 13,992.187 Shares                                                                                                |            | 105,361               |
|     | Hartford Intl Opportunities R6                              | 4,673.309 Shares                                                                                                 |            | 94,167                |
|     | Federated Mdt Small Cp Grth R6                              | 2,365.957 Shares                                                                                                 |            | 69,204                |
|     | Invesco International Diversified Fund                      | 2,521.281 Shares                                                                                                 |            | 55,317                |
|     | Vanguard Short Term Bd Idx Adm                              | 5,124.303 Shares                                                                                                 |            | 54,369                |
|     | Putnam International Value R6                               | 4,153.613 Shares                                                                                                 |            | 50,840                |
|     | Nuveen Real Estate Sec. R6                                  | 2,184.764 Shares                                                                                                 |            | 50,577                |
|     | T. Rowe Price Blue Chip Growth                              | 249.629 Shares                                                                                                   |            | 44,491                |
|     | American Funds New World R6                                 | 440.524 Shares                                                                                                   |            | 37,872                |
|     | Vanguard Health Care Index Adm                              | 279.525 Shares                                                                                                   |            | 37,230                |
|     | Pioneer Strategic Income                                    | 3,124.199 Shares                                                                                                 |            | 33,679                |
|     | AB Global Bond Z                                            | 3,631.539 Shares                                                                                                 |            | 30,069                |
|     | American Funds 2065 Trgt Date                               | 1,529.029 Shares                                                                                                 |            | 25,795                |
|     | Vanguard Financials Index Adm                               | 460.838 Shares                                                                                                   |            | 22,295                |
|     | MFS Total Return Fund R6                                    | 1,023.624 Shares                                                                                                 |            | 21,987                |
|     | Am Beacon Sm Cap Value Inst                                 | 735.547 Shares                                                                                                   |            | 21,096                |
|     | American Funds Inc Fund of Ame                              | 598.238 Shares                                                                                                   |            | 15,470                |
|     | Vanguard Strat Small Cap Eqty                               | 322.164 Shares                                                                                                   |            | 12,581                |
|     | Vanguard FTSE All-Wld Ex-US Id                              | 32.237 Shares                                                                                                    |            | 1,229                 |
|     | Vanguard Int Bond Mkt Index                                 | 56.281 Shares                                                                                                    |            | 669                   |
|     | DFA International Value I                                   | 2.165 Shares                                                                                                     |            | 42                    |
|     | Vanguard L/T Bond Idx Adm                                   | 0.002 Shares                                                                                                     |            | -                     |
|     |                                                             |                                                                                                                  |            | <u>11,614,976</u>     |
|     | Common/Collective Funds:                                    |                                                                                                                  |            |                       |
|     | T. Rowe Price Stable Value A                                | 231,040.301 Shares                                                                                               |            | 231,040               |
|     | Unitized Account:                                           |                                                                                                                  |            |                       |
| *   | Penn Line Profit Sharing Fund                               | 530,981.151 Shares                                                                                               | 7,216,988  | 8,842,907             |
|     | Cash:                                                       |                                                                                                                  |            |                       |
| *   | Penn Line Cash Account                                      | 1,759,271.023 Shares                                                                                             | 24,750,588 | 28,039,117            |
|     | Company Common Stock:                                       |                                                                                                                  |            |                       |
| *   | Penn Line Enterprises, Inc.                                 | 382,363 Shares                                                                                                   | -          | <u>113,844,760</u>    |
|     |                                                             |                                                                                                                  |            | <u>\$ 162,572,800</u> |

\* - Denotes party-in-interest

Note: Cost information is not required for participant-directed investments.