Form **8937**(December 2017) Department of the Treasury Internal Revenue Service

Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-0123

Part I Reporting I	ssuer					
1 Issuer's name		2 Issuer's employer identification number (EIN)				
Peoples LTD		23-2451528				
3 Name of contact for additional information 4 Telephone No. of contact				5 Email address of contact		
Marguerite Donato			570-746-1011	mdonato@psbanking.com		
6 Number and street (or P.O. box if mail is not delivered to street address) of contact				7 City, town, or post office, state, and ZIP code of contact		
76 Church Street				Wyalusing, PA 18853		
8 Date of action 9 Classification and description						
November 29, 2024		Stock- C	Stock- Common			
10 CUSIP number	11 Serial number(s	s)	12 Ticker symbol	13 Account number(s)		
711215103			PPLL			
				ck of form for additional questions.		
				nst which shareholders' ownership is measured for able on December 13, 2024 for stockholders of		
record on November 29, 2				able of December 13, 2024 for Stockholders of		
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			COLUMN DE MANAGEMENT DE MANAGE			
15 Describe the quantitat share or as a percenta		nizational acti	on on the basis of the security in t	ne hands of a U.S. taxpayer as an adjustment per		
				ords for every 20 shares owned by a shareholder,		
				end, cash was paid to the shareholder or		
reinvested in the DRIP plan if the shareholder was participating.						
F - MWH	<u> </u>			**************************************		
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Describe the calculation valuation dates ►	on of the change in b	asis and the o	lata that supports the calculation,	such as the market values of securities and the		
The share price of \$62.20	was based on recen	t stock purch	nases of Peoples LTD stock prior	to the stock dividend. After the stock dividend,		
a shareholder would have 5% more shares, but their cost per share would be reduced by 5%.						
PARTICULAR CONTROL CON			Allenta variante de la constante de la constan			
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Part	Ш.	Organizational Action (continued)	
17 L	ist the	applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶	

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18 C	an any	y resulting loss be recognized? ▶	

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		MARKET TO A STATE OF THE STATE	
19 P	rovide	any other information necessary to implement the adjustment, such as the reportable tax year ▶	
			HILAND CO.
			. ///////

F-0-			Management Co.

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			5-W-5-WWW
	Unde	r penalties of perjum, I declare that I have examined this return, including accompanying schedules and statements,	and to the best of my knowledge and
	belief	i, it is true, correct/and complete. Declaration/of preparer (other than officer) is based on all information of which prepar	er has any knowledge.
Sign		M/c \sim M/c \sim M/c	21/2
Here	Signa	ature > / Land Land Date > / C	3/12/25
	o.g.ia	Date	
	Print	yourname > MG/9 wer, te word to Title > SVP/	CFO
Deid		Print/Type preparer's name Preparer's signature Date	Charle D & PTIN
Paid			Check if Fill self-employed
Prepa			
Use (חל		Firm's EIN ▶
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sena Fo	эпп 8 <u>9</u>	337 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogde	en, UT 84201-0054