Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2019

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
HYBRID PROMOTIONS, LLC INCENTIVE SAVINGS PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2004

2a Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)
HYBRID PROMOTIONS, LLC

10711 WALKER ST
CYPRESS, CA 90630

2b Employer Identification Number (EIN)
33-0838747

2c Plan Sponsor's telephone number
714-243-1717

2d Business code (see instructions)
424300

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2020	KRISTINE MUSCARA
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

3b Administrator's EIN

3c Administrator's telephone number

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

4b EIN

4d PN

5 Total number of participants at the beginning of the plan year	**5**	698
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1) Total number of active participants at the beginning of the plan year	**6a(1)**	571
a(2) Total number of active participants at the end of the plan year	**6a(2)**	473
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	172
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	645
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f Total. Add lines **6d** and **6e**.	**6f**	645
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	568
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	66
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

2E 2F 2G 2J 2K 2S 2T 3D

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2019 Form M-1 annual report. If the plan was not required to file the 2019 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

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

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

2019

This Form is Open to Public Inspection

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A Name of plan
HYBRID PROMOTIONS, LLC INCENTIVE SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
HYBRID PROMOTIONS, LLC

D Employer Identification Number (EIN)
33-0838747

Part I **Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
MASSMUTUAL LIFE INSURANCE CO.

(b) EIN	**(c)** NAIC code	**(d)** Contract or identification number	**(e)** Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	**(g)** To
04-1590850	65935	GA-829770	568	01/01/2019	12/31/2019

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	**(b)** Total amount of fees paid
27347	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MERRILL LYNCH LIFE AGENCY INC
1400 MERRILL LYNCH DR BANK OF AMERI
PENNINGTON, NJ 08534

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
27347			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	**4**	648382
5	Current value of plan's interest under this contract in separate accounts at year end	**5**	23490175

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	**6b**	
c	Premiums due but unpaid at the end of the year	**6c**	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.	**6d**	

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity

(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee

(3) ☐ guaranteed investment (4) ☒ other ▶ GROUP ANNUITY CONTRACT

b	Balance at the end of the previous year			**7b**	795314
c	Additions: (1) Contributions deposited during the year	**7c(1)**	924		
	(2) Dividends and credits	**7c(2)**	0		
	(3) Interest credited during the year	**7c(3)**	12342		
	(4) Transferred from separate account	**7c(4)**	149589		
	(5) Other (specify below)	**7c(5)**	10156		
	▶ ROLLOVER,LOAN PAYMENT				
	(6)Total additions			**7c(6)**	173011
d	Total of balance and additions (add lines **7b** and **7c(6)**).			**7d**	968325
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	**7e(1)**	222862		
	(2) Administration charge made by carrier	**7e(2)**	837		
	(3) Transferred to separate account	**7e(3)**	88958		
	(4) Other (specify below)	**7e(4)**	7286		
	▶ LOAN W/D,				
	(5) Total deductions			**7e(5)**	319943
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)			**7f**	648382

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

a ☐ Health (other than dental or vision) **b** ☐ Dental **c** ☐ Vision **d** ☐ Life insurance

e ☐ Temporary disability (accident and sickness) **f** ☐ Long-term disability **g** ☐ Supplemental unemployment **h** ☐ Prescription drug

i ☐ Stop loss (large deductible) **j** ☐ HMO contract **k** ☐ PPO contract **l** ☐ Indemnity contract

m ☐ Other (specify) ▶

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line **9c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount			**10b**	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2019** **This Form is Open to Public Inspection.**

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A Name of plan
HYBRID PROMOTIONS, LLC INCENTIVE SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
HYBRID PROMOTIONS, LLC

D Employer Identification Number (EIN)
33-0838747

Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . ☐ Yes ☒ No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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

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

MASSMUTUAL LIFE INSURANCE CO.

04-1590850

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 23 37 38 50 54 55 59 60 62 63 64 65 66 99	N/A	34181	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

RELIANCE TRUST COMPANY

58-1428634

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
25 99	N/A	0	Yes [X] No [ ]	Yes [ ] No [X]	325	Yes [ ] No [X]

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

ENVESTNET RETIREMENT SOLUTIONS LLC

61-1732930

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
MASSMUTUAL LIFE INSURANCE CO.	15 23 37 38 50 54 55 59 60 62 63 64 65 66 99	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
SEE ATTACHED 04-1590850	SEE ATTACHED FORM 5500 SCHEDULE C REPORT

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
ENVESTNET RETIREMENT SOLUTIONS LLC	27	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MASSACHUSETTS MUTUAL LIFE INS CO 04-1590850	SEE ATTACHED FORM 5500 SCHEDULE C REPORT

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
RELIANCE TRUST COMPANY	25 99	325

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MASSACHUSETTS MUTUAL LIFE INS CO 04-1590850	SEE ATTACHED FORM 5500 SCHEDULE C REPORT

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

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

OMB No. 1210-0110

2019

This Form is Open to Public Inspection.

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A Name of plan
HYBRID PROMOTIONS, LLC INCENTIVE SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
HYBRID PROMOTIONS, LLC

D Employer Identification Number (EIN)
33-0838747

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: SEPARATE ACCOUNT SCAI

b Name of sponsor of entity listed in (a): MASSMUTUAL LIFE INSURANCE CO.

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)
04-1590850-000	P	23490175

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 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 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 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 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 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 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 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)

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 plan sponsor	**c** EIN-PN

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 plan sponsor	**c** EIN-PN

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 plan sponsor	**c** EIN-PN

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 plan sponsor	**c** EIN-PN

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2019

This Form is Open to Public Inspection

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A Name of plan
HYBRID PROMOTIONS, LLC INCENTIVE SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
HYBRID PROMOTIONS, LLC

D Employer Identification Number (EIN)
33-0838747

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	0
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	656318	537339
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	20008823	23490175
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	795314	648382
(15) Other	1c(15)	0	0

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)	0	0
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	21460455	24675896
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	21460455	24675896

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

	Income		(a) Amount	(b) Total
a	**Contributions:**			
	(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	1160744	
	(B) Participants	2a(1)(B)	2082301	
	(C) Others (including rollovers)	2a(1)(C)	318283	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		3561328
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	0	
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)	36218	
	(F) Other	2b(1)(F)	14099	
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		50317
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)	0	
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)	0	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		4291000
(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)		0
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		7902645
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	4579365	
(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)		4579365
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		74259
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)	33580	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		33580
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		4687204
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		3215441
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		0

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) [X] Disclaimer (4) [ ] Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? [X] Yes [ ] No

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

(1) Name: RICHARDSON KONTOGOURIS EMERSON LLP (2) EIN: 01-0871934

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	

			Yes	No	Amount
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		1000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

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

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

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

5c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (See ERISA section 4021.)? ..... ☐ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year_____. (See instructions.)

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

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

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

OMB No. 1210-0110

2019

This Form is Open to Public Inspection.

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A Name of plan
HYBRID PROMOTIONS, LLC INCENTIVE SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
HYBRID PROMOTIONS, LLC

D Employer Identification Number (EIN)
33-0838747

Part I Distributions

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

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

EIN(s): 04-1590850

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

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

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

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

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

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

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

6 **a** Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

14 Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	**14a**	
b The plan year immediately preceding the current plan year	**14b**	
c The second preceding plan year	**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_____

HYBRID PROMOTIONS LLC
INCENTIVE SAVINGS PLAN

Financial Statements with Supplemental Schedule and Independent Auditors' Report

December 31, 2019 and 2018

rke RICHARDSON KONTOGOURIS EMERSON LLP
CERTIFIED PUBLIC ACCOUNTANTS

TABLE OF CONTENTS

	PAGE
INDEPENDENT AUDITORS' REPORT	1-2
FINANCIAL STATEMENTS	
Statements of net assets available for benefits	3
Statement of changes in net assets available for benefits	4
Notes to financial statements	5-14
SUPPLEMENTAL SCHEDULE	
Schedule H, Part IV, Line 4(i) - Schedule of assets (held at end of year)	15

RICHARDSON KONTOGOURIS EMERSON LLP
CERTIFIED PUBLIC ACCOUNTANTS

2942 Columbia Street
Torrance, CA 90503
Phone (310) 294-5200
Fax (310) 527- 4549

INDEPENDENT AUDITORS' REPORT

To the plan administrator of
Hybrid Promotions LLC Incentive Savings Plan
Cypress, California

Report on the financial statements

We were engaged to audit the accompanying financial statements of Hybrid Promotions LLC Incentive Savings Plan (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2019 and 2018, and the related statement of changes in net assets available for benefits for the year ended December 31, 2019, and the related notes to the financial statements.

Management's responsibility for the financial statements

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

Auditors' responsibility

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

Basis for disclaimer of opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA"), the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 6, which was certified by Massachusetts Mutual Life Insurance Company, the custodian of the Plan's assets, except for comparing the information with the related information included in the financial statements. We have been informed by the plan administrator that the custodian holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the custodian, as of December 31, 2019 and 2018 and for the year ended December 31, 2019, that the information provided to the plan administrator by the custodian is complete and accurate.

GGi
INDEPENDENT MEMBER

rke

Disclaimer of opinion

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

Other matter - supplemental schedule

The supplemental schedule of Schedule H, Part IV, Line 4(i) - Schedule of assets (held at end of year) as of December 31, 2019, is required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on this supplemental schedule referred to above.

Report on form and content in compliance with DOL rules and regulations

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

Richardson Kontogouris Emerson LLP

October 13, 2020

GGi
INDEPENDENT MEMBER

HYBRID PROMOTIONS LLC INCENTIVE SAVINGS PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

DECEMBER 31, 2019 AND 2018

	2019	2018
ASSETS		
INVESTMENTS AT FAIR VALUE		
Pooled separate accounts	$ 23,490,175	$ 20,008,823
INVESTMENTS AT CONTRACT VALUE		
Guaranteed investment contract	648,382	795,314
NOTES RECEIVABLE FROM PARTICIPANTS	537,339	656,318
TOTAL ASSETS	24,675,896	21,460,455
NET ASSETS AVAILABLE FOR BENEFITS	$ 24,675,896	$ 21,460,455

HYBRID PROMOTIONS LLC INCENTIVE SAVINGS PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

FOR THE YEAR ENDED DECEMBER 31, 2019

ADDITIONS TO NET ASSETS ATTRIBUTED TO:	
Investment income:	
Net appreciation in fair value of investments	$ 2,395,216
Dividends	1,895,784
Interest from guaranteed investment contract	14,099
Total investment income	4,305,099
Interest income on notes receivable from participants	36,218
Contributions:	
Participants	2,082,301
Employer	1,160,744
Participant rollovers	318,283
Total contributions	3,561,328
Total additions	7,902,645
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:	
Benefits paid to participants	4,653,624
Administrative expenses	33,580
Total deductions	4,687,204
NET CHANGE	3,215,441
NET ASSETS AVAILABLE FOR BENEFITS	
Beginning of year	21,460,455
End of year	$ 24,675,896

NOTE 1 - DESCRIPTION OF PLAN

The following description of the Hybrid Promotions LLC Incentive Savings Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General and eligibility

The Plan is a defined contribution plan, established on January 1, 2004, covering the employees of Hybrid Promotions LLC, the Plan sponsor (the "Company"). Each employee is eligible to participate after the attainment of age 21 and the completion of 90 days of service. Effective November 1, 2018, the Plan was amended whereby the Plan entry dates are the first day of the month following attainment of the age and service requirements. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA") and subsequent amendments. Massachusetts Mutual Life Insurance Company (the "Custodian" or "Mass Mutual") serves as the Plan's record-keeper and Custodian. Reliance Trust Company is the Plan's trustee.

Contributions

Each year, participants may contribute a percentage of their pretax annual compensation, as defined by the Plan, in an amount not in excess of the maximum allowed by the Internal Revenue Code ("IRC"). On November 1, 2018, the Plan was amended to add an automatic enrollment and automatic escalation feature for new employees of the Company effective January 1, 2019. Upon the participant's eligibility, the participant is automatically enrolled in the Plan with an automatic deferral set at 3% of compensation on a pre-tax basis, unless the participant makes a contrary election. Those who are automatically enrolled will have their deferral contribution rate increased by 1% each year until it reaches a maximum of 10% of compensation, unless elected otherwise. Participants may also contribute amounts representing distributions from other qualified plans. Participants direct the investment of their separate accounts into various investment options offered by the Plan. The Plan currently offers several pooled separate accounts as investment options for participants.

The Company may make discretionary matching contributions equal to 100% of the participant's pre-tax contribution up to a maximum of 4% of a participant's eligible compensation. In addition, the Company may make a discretionary contribution annually. Eligible participants who have completed at least 1,000 hours of service and who are employed on the last day of the Plan year share in the non-elective discretionary contribution. The Plan sponsor's discretionary contributions to the Plan are allocated to each participant's account in the ratio of the participant's eligible annual compensation to the total eligible annual compensation paid to all eligible participants. The Company may designate a portion of the discretionary matching contributions or the discretionary contributions as qualified discretionary contributions, for purposes of meeting the Plan's nondiscrimination requirements.

In addition, the Company may make qualified non-elective contributions ("QNEC"). A QNEC is a discretionary, fully vested contribution. The Company may direct that QNECs be allocated specifically to designated non-highly compensated employees in varying percentages of compensation as permitted by law. There were no QNECs made for the year ended December 31, 2019.

NOTE 1 - DESCRIPTION OF PLAN (Continued)

Participant accounts

Separate accounts are maintained for each participant. Each participant's account is credited with his or her salary deferral contribution, an allocation of the Company's contribution and Plan earnings. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account. Participants may change their investment options at their discretion.

Notes receivable from participants

Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. Loans to participants are collateralized by the participant's vested account balance and are subject to interest charges. Loan terms range from one to five years, except for loans used for the purchase of a primary residence, in which case may be for a period up to thirty years. Interest rates applicable to participant loans are determined by the plan administrator. Loans outstanding at December 31, 2019 bore interest at rates ranging from 4.25% to 6.50% and loans outstanding at December 31, 2018 bore interest at rates ranging from 4.25% and 6.25%. Loan outstanding at December 31, 2019 mature through October 2024. Principal and interest are paid through payroll deductions.

Vesting

Participants are vested immediately in their contributions plus actual earnings thereon and in any qualified employer contributions.

Participants are vested in employer matching contributions and employer discretionary contributions subject to the graded vesting schedule as follows:

Years of Service	Vested Percentage
Less than 1 year	0%
1 year	20%
2 years	40%
3 years	60%
4 years	80%
5 years or more	100%

Years of service includes all years the participant has worked for the Company, regardless of the participant's date of enrollment in the Plan. In the event a participant becomes totally and permanently disabled, the value of the participant's account becomes fully vested. The value of the participant's account becomes fully vested upon the earlier of the participant's 65th birthday or death, provided the participant is an employee as of such date.

NOTE 1 - DESCRIPTION OF PLAN (Continued)

Payment of benefits

Upon termination of service due to death, disability or retirement, a participant (or beneficiary) may elect to receive either a lump-sum amount equal to the value of the vested interest in the participant's account or a distribution under a systematic withdrawal plan.

Hardship withdrawals

A participant may be permitted to withdraw a portion or all of the balances of their individual account that is attributable to the participant's tax-deferred compensation and matching contributions for the reasons specified by and to the extent permitted under regulations issued by the Internal Revenue Service ("IRS").

Forfeited accounts

Non-vested Company contributions forfeited by participants upon termination may be used to pay for Plan expenses or allocated to remaining participant accounts in the ratio of the participant's eligible annual compensation to the total eligible annual compensation paid to all eligible participants. For the years ended December 31, 2019 and 2018, $184,587 and $94,308 of forfeited employer matching contributions were applied to offset matching contributions, respectively. As of December 31, 2019 and 2018, forfeited non-vested accounts available to offset future matching contributions and administrative expenses totaled $44,742 and $65,721, respectively.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of accounting

The financial statements of the Plan are prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America ("U.S. GAAP"). References to the "ASC" hereafter refer to the Accounting Standards Codification established by the Financial Accounting Standards Board as the source of authoritative U.S. GAAP.

Use of estimates

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

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Investment valuation and income recognition

The Plan's 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. See Note 4 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Interest income is recorded on the accrual basis. The net appreciation in fair value of investments consists of both the realized gains or losses and unrealized appreciation and depreciation of those investments.

Notes receivable from participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued interest. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2019 or 2018. If a participant ceases to make loan repayments and the plan administrator deems the participant loan to be in default, the participant loan balance is reduced and a benefit payment is recorded.

Payment of benefits

Benefits are recorded when paid.

Plan expenses

Non-investment costs and administrative expenses of the Plan are paid by the Company, which is a party-in-interest. These expenses are not reflected in the financial statements and constitute exempt party-in-interest transactions under ERISA.

NOTE 3 - INVESTMENTS

The Plan assets are held by Mass Mutual, the Custodian, pursuant to the custodian agreement which provides that all funds received by the Custodian shall be held, administered, invested and distributed by the Custodian, and that no part of the corpus or income shall be used for, or directed to, purposes other than for the exclusive benefit of participants or their beneficiaries.

In the statement of changes in net assets available for benefits, the Plan presents the net appreciation in the fair value of investments of $2,395,216, which consists of realized gains or losses and unrealized market value changes of investments.

NOTE 4 - FAIR VALUE MEASUREMENTS

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3).

The three levels of the fair value hierarchy under ASC 820, *Fair Value Measurements and Disclosures* are described as follows:

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

Level 2 - Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

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

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

The 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, 2019 and 2018.

Pooled separate accounts: The fair values of participation units held in pooled separate accounts are based on their net asset values ("NAV") reported by the fund managers as of the financial statements dates and recent transaction prices. Each of the sub-accounts of the Mass Mutual Company Pooled Separate Accounts invests in a single, open-ended mutual fund which is generally identified in the name of the pooled separate account sub-account. Each pooled separate sub-account provides for daily redemptions by the Plan with no advance notice requirements, and has redemption prices that are determined by the fund's NAV per unit.

NOTE 4 - FAIR VALUE MEASUREMENTS (Continued)

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

As of December 31, 2019 and 2018, all fair value investments were valued using NAV practical expedient and, accordingly, no hierarchy table was presented.

The following sets forth additional disclosures for the fair value measurement of significant investments in certain entities that calculate NAV per share (or its equivalent) as of December 31, 2019 and 2018:

American Century Inflation-Adjusted Bond Fund A seeks total return and inflation protection consistent with investment in inflation-indexed securities. Under normal market conditions, the fund invests at least 80% of its net assets in inflation-adjusted bonds. It also may invest in derivative instruments such as futures contracts and swap agreements (including, but not limited to, inflation swap agreements and credit default swap agreements), bank loans, securities backed by mortgages or other assets and collateralized debt obligations. The fund may invest in U.S. Treasury futures, inflation swap agreements and credit default swap agreements to manage duration, inflation and credit exposure.

Blackrock Equity Dividend Fund seeks long-term total return and current income. The fund seeks to achieve its objective by investing primarily in a diversified portfolio of equity securities. Under normal circumstances, it will invest at least 80% of its assets in equity securities and at least 80% of its assets in dividend paying securities. The fund may invest in securities of companies with any market capitalization but will generally focus on large cap securities. It may also invest in convertible securities and non-convertible preferred stock. The fund may invest up to 25% of its total assets in securities of foreign issuers.

Hartford Capital Appreciation Fund seeks growth of capital. The fund seeks to achieve its investment objective by investing primarily in stocks selected on the basis of potential for capital appreciation. It normally invests at least 65% of its net assets in common stocks of medium and large companies. The fund may invest up to 35% of its net assets in securities of foreign issuers and non-dollar securities, including companies that conduct their principal business activities in emerging markets or whose securities are traded principally on exchanges in emerging markets.

Invesco Diversified Dividend Fund A seeks long-term growth of capital and, secondarily, current income. The fund seeks to achieve its objective by investing primarily in a diversified portfolio of equity securities. Under normal circumstances, it will invest at least 80% of its assets in equity securities and at least 80% of its assets in dividend paying securities. The fund may invest in securities of companies with any market capitalization, but will generally focus on large cap securities. It may also invest in convertible securities and non-convertible preferred stock. The fund may invest up to 25% of its total assets in securities of foreign issuers.

NOTE 4 - FAIR VALUE MEASUREMENTS (Continued)

Invesco Small Cap Growth Fund A seeks long-term capital growth. The fund invests at least 80% of its net assets in securities and small-capitalization issuers.

JPMorgan SmartRetirement funds seek high total return with a shift to current income and some capital appreciation over time as the funds approach and pass the target retirement date.

Mass Mutual MSCI EAFE International Index Fund Class R4 seeks to provide investment results approximating (before fees and expenses) the aggregate price and dividend performance of the securities included in the MSCI EAFE Index. The fund invests at least 80% of its net assets (plus the amount of any borrowings for investment purposes) in the equity securities of companies included in the index, in weightings that approximate the relative composition of the securities contained in the index, and in MSCI EAFE Index futures contracts. The index is a widely recognized, unmanaged index representative of equity securities in developed markets, excluding the U.S. and Canada.

Mass Mutual S&P 500 Index Fund Class R4 seeks the capitalization-weighted total rate of return of the portion of the U.S. market for publicly-traded common stocks composed of larger-capitalized companies. The fund invests at least 80% of its net assets in the equity securities included in the index.

Mass Mutual S&P 500 Mid Cap Index Fund Class R4 seeks to provide investment results approximating (before fees and expenses) the aggregate price and dividend performance of the securities included in the S&P MidCap 400 Index. The fund invests at least 80% (and, typically, substantially all) of its net assets (plus the amount of any borrowings for investment purposes) in the equity securities of companies included in the index, in weightings that approximate the relative composition of the securities contained in the index, and in S&P MidCap 400 Index futures contracts. The index is a widely recognized, unmanaged index representative of common stocks of mid-capitalized U.S. companies.

PIMCO High Yield Fund A seeks maximum total return, consistent with preservation of capital and prudent investment management. The fund invests at least 80% of its assets in a diversified portfolio of high yield securities ("junk bonds"), which may be represented by forwards or derivatives. It may invest up to 20% of its total assets in securities rated Caa or below by Moody's, or equivalently rated by S&P or Fitch, or, if unrated, determined by PIMCO to be of comparable quality. The fund may invest, without limitation, in derivative instruments, such as options, futures contracts or swap agreements, or in mortgage- or asset-backed securities.

Premier Barings High Yield R4 Fund seeks to achieve a high level of total return, with an emphasis on current income, by investing primarily in high yield debt and related securities. The fund invests primarily in lower rated U.S debt securities, including securities in default. It invests at least 80% of its net assets in lower rated fixed income securities.

NOTE 4 - FAIR VALUE MEASUREMENTS (Continued)

Premier Strategic Emerging Markets Fund R4 seeks long-term capital growth. The fund mainly invests in common stocks of issuers in developing and emerging markets throughout the world and at times it may invest up to 100% of its total assets in foreign securities. It will invest at least 80% of its net assets plus the amount of any borrowings for investment purposes in equity securities of issuers whose principal activities are in a developing or emerging market. The fund will invest in at least three developing markets. It focuses on companies with above-average earnings growth.

Victory Sycamore Small Company Opportunity Fund seeks capital appreciation. The funds invest primarily in the equity securities of smaller companies that the adviser believes to be undervalued relative to the underlying earnings potential of the company. Under normal circumstances, the funds will invest at least 80% of its net assets in equity securities of small companies. "Small companies" are companies that at the time of purchase have market capitalizations within the range of companies comprising the Russell 2000 Value Index.

NOTE 5 - GUARANTEED INVESTMENT CONTRACT

The Plan holds a benefit-responsive guaranteed investment contract with Mass Mutual. Mass Mutual maintains the contributions in a general account. The account is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The guaranteed investment contract issuers are contractually obligated to repay the principal and a specified interest rate that is guaranteed by the Plan.

Because the guaranteed investment contract is fully benefit-responsive, contract value is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the guaranteed investment contract. Contract value, as reported to the Plan by the Custodian, represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

There are no reserves against contract value for credit risk of the contract issuer or otherwise. The crediting interest is based on a formula agreed upon with the issuer, but it may not be less than 1%. Such interest rates are reviewed on an annual basis for resetting

Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events would include the Plan’s discontinuance of the guaranteed investment contract or the occurrence of other liquidation value events under the guaranteed investment contract. The plan administrator does not believe that the occurrence of any such value event, which would limit the Plan’s ability to transact at contract value with participants, is probable.

NOTE 6 - INFORMATION PREPARED AND CERTIFIED BY CUSTODIAN

The following unaudited information in the financial statements was certified to be complete and accurate by the Custodian of the Plan's assets, within the meaning of 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for reporting and disclosure under ERISA:

- All amounts included as investments and notes receivable from participants in the statements of net assets available for benefits as of December 31, 2019 and 2018;
- Net appreciation in fair value of investments, dividends, and interest for the year ended December 31, 2019 included in the statement of changes in net assets available for benefits; and
- All information in the supplemental schedule of assets (held at end of year) as of December 31, 2019.

NOTE 7 - PARTIAL PLAN TERMINATION

As a result of a reduction of the Company's workforce in 2018 through 2020, the Plan experienced a partial plan termination as defined by ERISA in 2019 and 2020. Under ERISA, a partial plan termination may occur if a significant percentage of the Plan participants are terminated because of an action taken by the Company. If a partial plan termination occurs, full vesting in the employer contributions is required for the affected participants, but the remaining participants' vesting continues to be determined per the Plan provisions. All affected employees who were participants in the Plan were fully vested in their account balances at the date of their partial plan termination.

NOTE 8 - PLAN TERMINATION

Although it is currently the intent of the Company to continue the Plan, the Company has the right under the Plan provisions 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 become 100% vested in their accounts.

NOTE 9 - TAX STATUS

The Plan document is a prototype non-standardized profit sharing plan that received a favorable opinion letter from the IRS on March 31, 2014, which stated that the Plan was in accordance with applicable sections of the IRC. Although the Plan has been amended since receiving the opinion 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.

U.S. GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2019, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2016.

NOTE 10 - RISKS AND UNCERTAINTIES

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

NOTE 11 - PARTY-IN-INTEREST TRANSACTIONS

Plan investments are managed by the Custodian. Transactions with the Custodian qualify as party-in-interest transactions. All record-keeper fees for the year ended December 31, 2019 were paid by the Plan sponsor. Notes receivable from participants also reflect party-in-interest transactions.

NOTE 12 - SUBSEQUENT EVENTS

On March 11, 2020, the World Health Organization recognized the spread of the coronavirus disease 2019 (COVID-19) as a pandemic. The impacts of the COVID-19 pandemic have been pervasive across the economy and created substantial volatility in financial markets. The situation continues to develop rapidly and considerable uncertainty remains with respect to potential outcomes.

On March 27, 2020, the Coronavirus Aid, Relief, and Economic Security ("CARES") Act became law. The CARES Act contains various provisions impacting qualified retirement plans and their participants. Plans are permitted to implement these provisions immediately provided the plan document is retroactively amended on or before December 31, 2022. During 2020, the Plan implemented the following provisions, as summarized, under the CARES Act:

- Distributions provision - This provision allows the Plan's participants to take a COVID-19 related distribution up to $100,000 from the Plan and includes relief from the 10% withdrawal penalty for participants under the age of 59.5 years.
- Required minimum distributions provision - This provision allows for the waiver and suspension of the required minimum distributions that were to be made to qualified Plan participants during the year ended December 31, 2020.
- Participant loans provision - This provision allows for higher limits on new loans issued during a certain period in 2020. The higher limit is for a maximum loan amount equal to the lesser of $100,000 or 100% of the participant's vested account balance.
- Temporary loan repayment deferral provision - This provision allows qualified Plan participants who have Plan loan repayments to defer such repayments until December 31, 2020.

Written amendments to the Plan to reflect these operational changes will be adopted at a later date in accordance with applicable law and IRS guidance.

Subsequent events have been evaluated by the Plan through October 13, 2020, which is the date the financial statements were available to be issued.

SUPPLEMENTAL SCHEDULE

HYBRID PROMOTIONS LLC INCENTIVE SAVINGS PLAN
EIN: 33-0838747
PLAN NUMBER: 001

SCHEDULE H, PART IV, LINE 4(i)
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2019

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, and par or maturity value	(d) Cost	(e) Current value
	Pooled Separate Accounts:			
*	Mass Mutual	American Century Inflation-Adjusted Bond Fund A	**	$ 1,017,166
*	Mass Mutual	Blackrock Equity Dividend Fund	**	678,818
*	Mass Mutual	Hartford Capital Appreciation Fund	**	451,576
*	Mass Mutual	Hartford Inflation Plus Fund	**	227,931
*	Mass Mutual	Invesco Diversified Dividend Fund A	**	587,723
*	Mass Mutual	Invesco Real Estate Fund	**	49,149
*	Mass Mutual	Invesco Small Cap Growth Fund A	**	377,296
*	Mass Mutual	Ivy Science and Technology Fund	**	134,889
*	Mass Mutual	JPMorgan SmartRetirement 2020 Fund	**	579,644
*	Mass Mutual	JPMorgan SmartRetirement 2025 Fund	**	450,096
*	Mass Mutual	JPMorgan SmartRetirement 2030 Fund	**	2,810,213
*	Mass Mutual	JPMorgan SmartRetirement 2035 Fund	**	724,331
*	Mass Mutual	JPMorgan SmartRetirement 2040 Fund	**	3,035,539
*	Mass Mutual	JPMorgan SmartRetirement 2045 Fund	**	1,266,941
*	Mass Mutual	JPMorgan SmartRetirement 2050 Fund	**	2,914,569
*	Mass Mutual	JPMorgan SmartRetirement 2055 Fund	**	878,840
*	Mass Mutual	JPMorgan SmartRetirement 2060 Fund	**	214,501
*	Mass Mutual	JPMorgan SmartRetirement Income Fund	**	218,045
*	Mass Mutual	JPMorgan U.S. Government Money Market Fund Class Institutional	**	2
*	Mass Mutual	Mass Mutual MSCI EAFE International Index Fund Class R4	**	1,290,911
*	Mass Mutual	Mass Mutual Russell 2000 Small Cap Index Fund Class R4	**	198
*	Mass Mutual	Mass Mutual S&P 500 Index Fund Class R4	**	2,121,254
*	Mass Mutual	Mass Mutual S&P 500 Mid Cap Index Fund Class R4	**	901,467
*	Mass Mutual	PIMCO High Yield Fund A	**	929,703
*	Mass Mutual	Premier Barings High Yield R4 Fund	**	439,314
*	Mass Mutual	Premier Strategic Emerging Markets Fund R4	**	419,118
*	Mass Mutual	Select BlackRock Global Allocation Fund Class R4	**	8,405
*	Mass Mutual	Templeton Foreign Fund	**	237,834
*	Mass Mutual	Victory Sycamore Small Company Opportunity Fund	**	524,702
		Total pooled separate accounts		23,490,175
	Guaranteed Investment Contract:			
*	Mass Mutual	Guaranteed Investment Contract	**	648,382
*	Participant loans	Interest rate ranging from 4.25% to 6.50% maturing through October 2024		537,339
				$ 24,675,896

* Parties-in-interest.
** Information is not required as investments are participant directed.

Fee and Compensation Disclosure Report

Please refer to the plan's ERISA Section 408(b)(2) Disclosure materials, including the 408(b)(2) Disclosure Statement(s), Investment Option Disclosure(s), Service Agreement and Contract Amendments and 408(b)(2) Disclosure Statement Change Notices (the "408(b)(2) Disclosure Materials") previously delivered to you. You can also access copies of your 408(b)(2) Disclosure Materials through your MassMutual plan sponsor portal or you can contact your account manager for assistance.

The 408(b)(2) Disclosure Materials and this document, together, can assist a plan administrator ("you") in completing the Form 5500 Schedule C[1] by identifying different types of services and the different types of compensation paid with respect to the product utilized by your plan.

As permitted under the Schedule C rules, compensation is disclosed in the attached report as an actual dollar amount, an estimate or a formula or rate.

- Where an actual dollar amount of compensation is disclosed, no further notation regarding compensation calculations is generally provided.
- Where an estimate of the compensation amount is disclosed, we have used a reasonable method to arrive at the estimate and we have described the method used to arrive at the estimated amount.
- Where a formula or rate is provided to report compensation, we have used a reasonable method to arrive at the estimate and we have described the method used to arrive at the estimated amount. This formula or rate may be disclosed to describe the compensation to which it applies under the Schedule C rules. Alternatively, for purposes of Schedule C disclosure or in connection with your fiduciary review of the compensation paid with respect to the services, products and investment options utilized by the plan, you may calculate and disclose an actual or estimated dollar amount by multiplying the rate by the total assets to which it applies.

Please note that, unless otherwise indicated in the descriptions contained in this report, direct compensation is presented on a plan year basis 01/01/2019 - 12/31/2019 and indirect compensation is presented on a calendar year basis ending 12/31/2019.

This report includes compensation actually paid to or by MassMutual within the indicated plan year as part of your MassMutual-serviced product. *(Note: If the plan year period or plan year end indicated in this Schedule C reporting package is incorrect, please notify your MassMutual customer service representative immediately).* This report does not include amounts deducted from plan assets and paid to third parties (other than MassMutual). In addition, the report does not include compensation related to investments held by the plan that are not serviced on our recordkeeping system. You should contact your other service providers for reportable compensation information. You may also receive information on the compensation reported here from other service providers as is described below.

Please note that we have provided suggested service codes (based on the information in our records) with respect to services provided through our product. Please review all Schedule C and other Form 5500 materials with your experienced benefits counsel and other professionals to determine the most appropriate codes for your plan. In addition, please note that because plans with fewer than 100 participants (as of the beginning of the plan year) are generally not required to file Schedule C, you should refer to the instructions provided by the IRS for Schedule C and/or review the applicability of Schedule C to your plan with your experienced tax/benefits counsel, to determine whether it is necessary for the plan to report the information contemplated by this report.

Please contact your MassMutual Service Team should you require additional information regarding the compensation paid to or by MassMutual with respect to your plan.

*****

Information provided in this document and related materials we provide are not intended to be and shall not be deemed tax advice, tax form preparation services, legal advice, advice to plans regarding compliance with ERISA reporting compliance, or accounting or other professional services. As described above, the information contained in this report may not cover all of the compensation received by the plan's service providers. We strongly encourage you to review all Schedule C and other Form 5500 materials with experienced benefits counsel and other professionals.

---

[1]Please refer to the Schedule C of the Form 5500 and its instructions (available at: http://www.dol.gov/ebsa/5500main.html), and please confer with experienced benefits counsel and other professionals, to determine the applicability of Schedule C to your plan.

FORM 5500 SCHEDULE C REPORT
SCHEDULE C, LINE 2(h) AND LINE 3(e) FORMULA DESCRIPTION

HYBRID PROMOTIONS LLC INCT SAV PLAN (829770)
EIN #: 33-0838747

Please note that, unless otherwise indicated in the descriptions contained in this report, direct compensation is presented on a plan year basis 01/01/2019 - 12/31/2019 and indirect compensation is presented on a calendar year basis ending 12/31/2019.

For use with lines 2(h), 3(c), 3(d), 3(e)

Total Direct Compensation Paid **$48,392.87**

The total amount identified above reflects all fees deducted from plan assets at the plan administrator's direction for the plan year. Service providers which have received portions of these direct fees are listed below, along with the amount of fees they received. Please note that if there is a discrepancy between the total direct fees reported above and the sum of the direct fees reported below, you should contact your other service providers or your plan records to identify the recipient(s) of the fees and any other information relevant to your Schedule C filing.

Recipient: Massachusetts Mutual Life Insurance Company EIN: 04-1590850

Service Codes: 15, 23, 37, 38, 54, 55, 59, 60, 62, 63, 64, 65, 66, 99, 50 (if direct compensation amount reflected below)

Direct Compensation **$34,180.68**

The total amount identified above reflects fees deducted from plan assets at the plan administrator's direction for the 2019 plan year for the above named recipient. Please review other service providers, below, to determine whether direct fees were also paid to them. Also, please review your records to determine whether other service providers may have received any compensation not reported below (e.g., a reimbursement paid to any plan fiduciary, your employee benefits counsel, or a plan auditor).

Note: Due to system accounting protocols (including 'cash basis' accounting), amounts reported as Direct Compensation and amounts reported as paid to Massachusetts Mutual Life Insurance Company ("MMLIC") are the net result of aggregating direct compensation after the effects of adjustments processed in 2019, some of which may have pertained to prior years.

Please review the detailed breakdown at the end of the report for further information.

Indirect Compensation

Annual referral fee for Millennium Trust Automatic Rollover service

Service code: 49

Payor: Millennium Trust Company, LLC EIN: 36-4400066

For rollovers processed prior to 4/1/19:

Millennium Trust Company, LLC (MTC) paid MassMutual a one-time referral fee of (i) $40 for each participant IRA rollover with a balance of $500 or more, (ii) $10 for each participant IRA rollover with a balance between $75 and $500, and (iii) $0 for each participant IRA rollover with a balance of less than $75.

For rollovers processed on and after 4/1/19:

Millennium Trust Company, LLC (MTC) paid MassMutual a one-time referral fee of (i) $50 for each participant IRA rollover with a balance of $10,000 or more, (ii) $40 for each participant IRA rollover with a balance of $500 or more but less than $10,000, (iii) $20 for each participant IRA rollover with a balance of $100 or more but less than $500, and (iv) $0 for each participant IRA rollover with a balance of less than $100.

Float compensation **$688.44**

Bank accounts and investments associated with short-term investment pool

This is an estimate based on the annual average rate of float (0.399% for 2019) earned on the bank accounts and investments associated with the short-term investment pool for the 2019 calendar year multiplied by an estimate of the assets related to uncashed checks.* This estimate does not include float earned for any other reason (e.g., if amounts remitted cannot be immediately invested because they are not in good order). Please review or request a copy of the current float disclosure for more information about the other circumstances in which float is earned.

* A complete listing of distribution checks that remain outstanding for your plan is available on the Retirement Plan Access web site under the Standard Reports section (Report R03998-Outstanding Distribution Checks). Uncashed check assets will continue to remain in a float-earning bank account until such time direction is received from the Plan Sponsor, subject to applicable regulation. The Plan Sponsor should consult with the Plan's/Plan Sponsor's tax advisor or benefits counsel to determine if assets attributable to uncashed checks should be included on the Form 5500 filing.

Non Monetary Compensation

Please note that items of nonmonetary compensation need to be reported for Schedule A or C (Form 5500) purposes if they exceed certain *de minimus* amounts. Transactions generating nonmonetary compensation may include gifts, gratuities, or certain types of in-kind benefits. In addition, if applicable to the plan, MassMutual agents may qualify for certain forms of non-monetary compensation as a result of the sale of MassMutual contracts. These forms of non-monetary compensation include health, vision, life and disability coverage; matching contributions to 401(k) plans; cash balance and nonqualified pension plan contributions; participation at MassMutual-sponsored conferences based on recognition; and other non-monetary compensation (meals, entertainment, prizes, awards, gifts). If applicable, each plan in the agent's book of business is allocated compensation based on a pro rata basis using the number of plans representing the agent's book of business as of 12/31/2019.Information concerning reportable transactions undertaken between or among non-MassMutual parties may not be available to MassMutual. Please consult with your legal or tax advisors if you have any questions.

Compensation paid with respect to Funds*

*Note: If your plan's investment options are available through a group variable insurance contract, your plan does not invest directly in the underlying funds listed below. For information regarding the plan's investment option menu, including but not limited to any fees and charges associated with the plan's investment contract, please refer to the 408(b)(2) Disclosure Materials.

Underlying Investment Option Name	*EIN*	*Revenue Sharing Rate (%) Paid to MassMutual (rates as of 12/31/2019)*	*Underlying Fund Gross Expense Ratio as of the Fund's Year End**
AMERICAN CENTURY INFL ADJ BD A	43-0821857	.5	0.72%
BLACKROCK EQUITY DIVIDEND A	13-3806694	.55	0.97%
FIXED ACCOUNT	06-0974148		0.00%
INVESCO DIVERSIFIED DIVIDEND A	13-2576643	.55	0.82%
INVESCO REAL ESTATE A	76-0343427	.55	1.27%
INVESCO SMALL CAP GROWTH A	94-2362417	.55	1.18%
IVY SCIENCE AND TECHNOLOGY Y	48-1112076	.45	1.21%
JPMORGAN SMARTRETIREMENT 2020 R3	33-1043149	.55	0.96%
JPMORGAN SMARTRETIREMENT 2025 R3	33-1043149	.55	0.97%
JPMORGAN SMARTRETIREMENT 2030 R3	33-1043149	.55	0.98%
JPMORGAN SMARTRETIREMENT 2035 R3	33-1043149	.55	0.98%
JPMORGAN SMARTRETIREMENT 2040 R3	33-1043149	.55	0.99%
JPMORGAN SMARTRETIREMENT 2045 R3	33-1043149	.55	1.00%
JPMORGAN SMARTRETIREMENT 2050 R3	33-1043149	.55	1.00%
JPMORGAN SMARTRETIREMENT 2055 R3	33-1043149	.55	1.02%
JPMORGAN SMARTRETIREMENT 2060 R3	33-1043149	.55	1.17%

Underlying Investment Option Name	*EIN*	*Revenue Sharing Rate (%) Paid to MassMutual (rates as of 12/31/2019)*	*Underlying Fund Gross Expense Ratio as of the Fund's Year End*[*]
JPMORGAN SMARTRETIREMENT INC R3	33-1043149	.55	0.95%
MM MSCI EAFE INTERNATL INDEX R4	04-2483041	.5	0.82%
MM RUSSELL 2000 SMALL CAP IND R4	04-2483041	.5	0.70%
MM S&P 500 INDEX R4	04-2483041	.5	0.62%
MM S&P MID CAP INDEX R4	04-2483041	.5	0.66%
PIMCO HIGH-YIELD A	95-2632339	.45	0.94%
PREMIER BARINGS INFL-PR & INC R4	04-2483041	.5	2.19%
PREMIER INV ADV INC STR EM MK R4	04-2483041	.5	1.72%
SELECT BLACKROCK GLBL ALLOC R4	04-2483041	.45	1.41%
TEMPLETON FOREIGN A	22-2169185	.5	1.15%
THE HARTFORD CAP APPRECIATION R4	22-2937447	.5	1.11%
THE HARTFORD INTERNAT'L OPPS R4	22-2937447	.5	1.13%
VICTORY SYCAMORE SMALL CO OPP A	31-6364605	.55	1.31%

Under the variable investment options available through your plan's group annuity contract or funding agreement, contract values are invested in insurance company separate accounts that, in turn, invest in underlying registered investment companies (i.e., mutual funds) and collective investment funds.

The above list includes any investment option held by the plan on at least one month end during the 2019 calendar year. To arrive at an estimate of the dollar amount that MassMutual received from each investment option, multiply the rate of fees received from each investment option by your plan's year-end balance (or if the investment option was liquidated prior to year end, the balance on the liquidation date) and, if applicable, the per participant fee by the number of participants in the investment option at year end (or the liquidation date if earlier). This will be an estimate because your plan's balance and number of participants will vary over the course of the year, so the year-end balance and number of participants may be higher or lower than the daily balance. In addition, these fees are calculated on a daily basis.

[*]This amount is the sum of the fund's distribution, management and other fees, which are also identified in the fund's prospectus.and/or Statement of Information Please note that some of the funds available through your service contract or arrangement from a family of mutual funds that are affiliated with MassMutual (MassMutual Select Funds and MassMutual Premier Funds). These affiliated mutual funds have contracts for services with companies that are affiliated with MassMutual. The MassMutual-affiliated companies that provide these services, and are compensated in connection with those services, are listed below. For more information about these affiliated mutual funds, see the applicable fund prospectus and/or Statement of Information.

MassMutual Affiliate	**Services**	**Compensation**
MML Distributors, LLC	Principal Underwriter to the MassMutual Select Funds and MassMutual Premier Funds	As Principal Underwriter paid by the fund in the form of dealer concessions
MML Investment Advisors, LLC	Administrator to the MassMutual Select Funds and MassMutual Premier Funds	Paid by the fund in the form of fees for services
Massachusetts Mutual Life Insurance Company	Provides certain administrative services to the MassMutual Select Funds and MassMutual Premier Funds	Paid by the Administrator in the form of fees for services
Massachusetts Mutual Life Insurance Company	Shareholder Serving Agent to the MassMutual Select Funds and MassMutual Premier Funds	Paid by the fund in the form of fees for services
MML Investment Advisors, LLC	Investment Adviser to the MassMutual Select Funds and MassMutual Premier Funds	Paid by the fund in the form of investment advisory fees based on assets under management
Barings LLC	Sub-Adviser to certain of the MassMutual Premier Funds	Paid by the Investment Adviser in the form of investment advisory fees based on assets under management
OppenheimerFunds, Inc.	Sub-Adviser to certain of the MassMutual Premier Funds	Paid by the Investment Adviser in the form of investment advisory fees based on assets under management

OFI Global Institutional, Inc.	Sub-Adviser to certain of the MassMutual Select Funds and MassMutual Premier Funds	Paid by the Investment Adviser in the form of investment advisory fees based on assets under management

Recipient: MERRILL LYNCH LIFE AGENCY EIN: 13-2808480

Service Codes:

Please contact your Service Provider for the list of applicable services performed and Service Codes.

Direct Compensation **$0.00**

Our records indicate that this recipient did not receive any Direct Compensation. Please review your records to determine whether this service provider may have received any compensation not reported.

Indirect Compensation

* **Sales commission** Payor: Massachussetts Mutual Life Insurance Co. EIN: 04-1590850 **$27,347.33**

* *Sales Commissions are reported on a Plan Year basis.*

Non Monetary Compensation

Please note that items of nonmonetary compensation need to be reported for Schedule A or C (Form 5500) purposes if they exceed certain *de minimus* amounts. Transactions generating nonmonetary compensation may include gifts, gratuities, or certain types of in-kind benefits. In addition, if applicable to the plan, MassMutual agents may qualify for certain forms of non-monetary compensation as a result of the sale of MassMutual contracts. These forms of non-monetary compensation include health, vision, life and disability coverage; matching contributions to 401(k) plans; cash balance and nonqualified pension plan contributions; participation at MassMutual-sponsored conferences based on recognition; and other non-monetary compensation (meals, entertainment, prizes, awards, gifts). If applicable, each plan in the agent's book of business is allocated compensation based on a pro rata basis using the number of plans representing the agent's book of business as of 12/31/2019 . Information concerning reportable transactions undertaken between or among non-MassMutual parties may not be available to MassMutual. Please consult with your legal or tax advisors if you have any questions

Recipient: WELLS FARGO ADVISORS LLC PCG EIN: 34-1542819

Service Codes:

Please contact your Service Provider for the list of applicable services performed and Service Codes.

Direct Compensation **$14,212.19**

The total amount identified above reflects fees deducted from plan assets at the plan administrator's direction for the 2019 plan year for the above named recipient.

Note: Due to system accounting protocols (including 'cash basis' accounting), amounts reported as Direct Compensation are the net result of aggregating direct compensation after the effects of adjustments processed in 2019, some of which may have pertained to prior years.

Please review the detailed breakdown at the end of the report for further information.

Indirect Compensation **$0.00**

Our records indicate that this recipient did not receive any Indirect Compensation. Please review your records to determine whether this service provider may have received any compensation not reported.

Recipient: Reliance Trust Company EIN: 58-1428634

Indirect Compensation

Trust Service Fee (if Reliance Trust Company is acting as directed trustee) **$325.00**
Service Codes: 25, 99

Payors: Massachusetts Mutual Life Insurance Company EIN: 04-1590850
MassMutual Retirement Services, LLC EIN: 26-1589907

Reflects the annual per plan trust service fee in effect as of December 31, 2019. For additional information, please refer to your "RELIANCE TRUST COMPANY ERISA 408(b)(2) Fee Disclosure" materials.

Recipient: Envestnet Retirement Solutions, LLC(ERS) EIN: 61-1732930

Indirect Compensation

Annual basis point fee for Envestnet's plan investment advisory service
Service code: 27

Payor: Massachusetts Mutual Life Insurance Company EIN: 04-1590850

MassMutual paid Envestnet Retirement Solutions, LLC(ERS) an annual fee based on a tiered percentage of assets equal to 0.94 bps of the aggregate assets of all participating plans in the Fiduciary Assure Program with respect to ERS's investment advisory services.

Direct Revenue Detail

Recipient: *Massachusetts Mutual Life Insurance Company*

Fee Description	Dollar Amount
Paper Enrollment Fee	$50.00
Program and Administration Fee	$21,125.68
Loan Set-up Fee	$2,175.00
Rapid Delivery Fee	$1,280.00
Holding Account: Internal Fee	$600.00
One-Time Distribution Fee	$7,000.00
Loan Administration Fee	$1,950.00
Total Direct Revenue:	**$34,180.68**

Recipient: *WELLS FARGO ADVISORS LLC PCG*

Fee Description	Dollar Amount
Expense Budget Account: Service Provider Fee	$14,212.19
Total Direct Revenue:	**$14,212.19**

Grand Total Direct Fees: **$48,392.87**

MassMutual

Schedule C Soft Dollar Compensation
Eligible Indirect Compensation Statement

Mutual fund investments of the plan (whether direct or indirect through a separate investment account) may have soft dollar arrangements pursuant to which the investment advisor or sub-advisor to the mutual fund (and/or its affiliates) may direct trades to certain brokers in exchange for research and other services, other than just trade execution. For plans investing directly or indirectly in the MassMutual Premier or Select Funds, the funds listed below had soft dollar arrangements during the previous fiscal year-end. For details, please refer to the Portfolio Transactions and Brokerage section of the Statement of Additional Information ("SAI"). For all other mutual funds, MassMutual provided the required written disclosure in the Statement of Additional Information ("SAI").

For additional information on soft dollar compensation, refer to the section of the mutual fund's SAI that discusses brokerage allocation and other practices.

MassMutual Premier Funds

MassMutual Premier Global Fund
MassMutual Premier International Eq Fund
MassMutual Premier Main Street Fund
MassMutual Premier Small Cap Opps Fund
MassMutual Premier Strat Emerg Mkts Fund

MassMutual Select Funds

MassMutual Select BlackRock Glbl Allc Fund
MassMutual Select Blue Chip Growth Fund
MassMutual Select Diversified Value Fund
MassMutual Select Equity Opports Fund
MassMutual Select Fundamental Value Fund
MassMutual Select Growth Opps Fund
MassMutual Select Mid Cap Growth Fund
MassMutual Select Mid Cap Value Fund
MassMutual Select Overseas Fund
MassMutual Select Small Cap Growth Eq Fund
MassMutual Select Small Cap Val Eq Fund
MassMutual Select Small Company Val Fund
MassMutual Select TRP Intl Equity
MassMutual Select TRP Retirement 2005
MassMutual Select TRP Retirement 2010
MassMutual Select TRP Retirement 2015
MassMutual Select TRP Retirement 2020
MassMutual Select TRP Retirement 2025
MassMutual Select TRP Retirement 2030
MassMutual Select TRP Retirement 2035
MassMutual Select TRP Retirement 2040
MassMutual Select TRP Retirement 2045
MassMutual Select TRP Retirement 2050
MassMutual Select TRP Retirement 2055
MassMutual Select TRP Retirement 2060
MassMutual Select TRP Retirement Bal

Copyright © 2018. All rights reserved. Massachusetts Mutual Life Insurance Company (MassMutual), Springfield, MA 01111-0001.

HYBRID PROMOTIONS LLC
INCENTIVE SAVINGS PLAN

Financial Statements with Supplemental Schedule and Independent Auditors' Report

December 31, 2019 and 2018

rke RICHARDSON KONTOGOURIS EMERSON LLP
CERTIFIED PUBLIC ACCOUNTANTS

TABLE OF CONTENTS

	PAGE
INDEPENDENT AUDITORS' REPORT	1-2
FINANCIAL STATEMENTS	
Statements of net assets available for benefits	3
Statement of changes in net assets available for benefits	4
Notes to financial statements	5-14
SUPPLEMENTAL SCHEDULE	
Schedule H, Part IV, Line 4(i) - Schedule of assets (held at end of year)	15

RICHARDSON KONTOGOURIS EMERSON LLP
CERTIFIED PUBLIC ACCOUNTANTS

2942 Columbia Street
Torrance, CA 90503
Phone (310) 294-5200
Fax (310) 527- 4549

INDEPENDENT AUDITORS' REPORT

To the plan administrator of
Hybrid Promotions LLC Incentive Savings Plan
Cypress, California

Report on the financial statements

We were engaged to audit the accompanying financial statements of Hybrid Promotions LLC Incentive Savings Plan (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2019 and 2018, and the related statement of changes in net assets available for benefits for the year ended December 31, 2019, and the related notes to the financial statements.

Management's responsibility for the financial statements

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

Auditors' responsibility

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

Basis for disclaimer of opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA"), the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 6, which was certified by Massachusetts Mutual Life Insurance Company, the custodian of the Plan's assets, except for comparing the information with the related information included in the financial statements. We have been informed by the plan administrator that the custodian holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the custodian, as of December 31, 2019 and 2018 and for the year ended December 31, 2019, that the information provided to the plan administrator by the custodian is complete and accurate.

GGi
INDEPENDENT MEMBER

rke

Disclaimer of opinion

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

Other matter - supplemental schedule

The supplemental schedule of Schedule H, Part IV, Line 4(i) - Schedule of assets (held at end of year) as of December 31, 2019, is required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on this supplemental schedule referred to above.

Report on form and content in compliance with DOL rules and regulations

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

Richardson Kontogouris Emerson LLP

October 13, 2020

GGi
INDEPENDENT MEMBER

HYBRID PROMOTIONS LLC INCENTIVE SAVINGS PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

DECEMBER 31, 2019 AND 2018

	2019	2018
ASSETS		
INVESTMENTS AT FAIR VALUE		
Pooled separate accounts	$ 23,490,175	$ 20,008,823
INVESTMENTS AT CONTRACT VALUE		
Guaranteed investment contract	648,382	795,314
NOTES RECEIVABLE FROM PARTICIPANTS	537,339	656,318
TOTAL ASSETS	24,675,896	21,460,455
NET ASSETS AVAILABLE FOR BENEFITS	$ 24,675,896	$ 21,460,455

HYBRID PROMOTIONS LLC INCENTIVE SAVINGS PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

FOR THE YEAR ENDED DECEMBER 31, 2019

ADDITIONS TO NET ASSETS ATTRIBUTED TO:	
Investment income:	
Net appreciation in fair value of investments	$ 2,395,216
Dividends	1,895,784
Interest from guaranteed investment contract	14,099
Total investment income	4,305,099
Interest income on notes receivable from participants	36,218
Contributions:	
Participants	2,082,301
Employer	1,160,744
Participant rollovers	318,283
Total contributions	3,561,328
Total additions	7,902,645
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:	
Benefits paid to participants	4,653,624
Administrative expenses	33,580
Total deductions	4,687,204
NET CHANGE	3,215,441
NET ASSETS AVAILABLE FOR BENEFITS	
Beginning of year	21,460,455
End of year	$ 24,675,896

NOTE 1 - DESCRIPTION OF PLAN

The following description of the Hybrid Promotions LLC Incentive Savings Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General and eligibility

The Plan is a defined contribution plan, established on January 1, 2004, covering the employees of Hybrid Promotions LLC, the Plan sponsor (the "Company"). Each employee is eligible to participate after the attainment of age 21 and the completion of 90 days of service. Effective November 1, 2018, the Plan was amended whereby the Plan entry dates are the first day of the month following attainment of the age and service requirements. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA") and subsequent amendments. Massachusetts Mutual Life Insurance Company (the "Custodian" or "Mass Mutual") serves as the Plan's record-keeper and Custodian. Reliance Trust Company is the Plan's trustee.

Contributions

Each year, participants may contribute a percentage of their pretax annual compensation, as defined by the Plan, in an amount not in excess of the maximum allowed by the Internal Revenue Code ("IRC"). On November 1, 2018, the Plan was amended to add an automatic enrollment and automatic escalation feature for new employees of the Company effective January 1, 2019. Upon the participant's eligibility, the participant is automatically enrolled in the Plan with an automatic deferral set at 3% of compensation on a pre-tax basis, unless the participant makes a contrary election. Those who are automatically enrolled will have their deferral contribution rate increased by 1% each year until it reaches a maximum of 10% of compensation, unless elected otherwise. Participants may also contribute amounts representing distributions from other qualified plans. Participants direct the investment of their separate accounts into various investment options offered by the Plan. The Plan currently offers several pooled separate accounts as investment options for participants.

The Company may make discretionary matching contributions equal to 100% of the participant's pre-tax contribution up to a maximum of 4% of a participant's eligible compensation. In addition, the Company may make a discretionary contribution annually. Eligible participants who have completed at least 1,000 hours of service and who are employed on the last day of the Plan year share in the non-elective discretionary contribution. The Plan sponsor's discretionary contributions to the Plan are allocated to each participant's account in the ratio of the participant's eligible annual compensation to the total eligible annual compensation paid to all eligible participants. The Company may designate a portion of the discretionary matching contributions or the discretionary contributions as qualified discretionary contributions, for purposes of meeting the Plan's nondiscrimination requirements.

In addition, the Company may make qualified non-elective contributions ("QNEC"). A QNEC is a discretionary, fully vested contribution. The Company may direct that QNECs be allocated specifically to designated non-highly compensated employees in varying percentages of compensation as permitted by law. There were no QNECs made for the year ended December 31, 2019.

NOTE 1 - DESCRIPTION OF PLAN (Continued)

Participant accounts

Separate accounts are maintained for each participant. Each participant's account is credited with his or her salary deferral contribution, an allocation of the Company's contribution and Plan earnings. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account. Participants may change their investment options at their discretion.

Notes receivable from participants

Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. Loans to participants are collateralized by the participant's vested account balance and are subject to interest charges. Loan terms range from one to five years, except for loans used for the purchase of a primary residence, in which case may be for a period up to thirty years. Interest rates applicable to participant loans are determined by the plan administrator. Loans outstanding at December 31, 2019 bore interest at rates ranging from 4.25% to 6.50% and loans outstanding at December 31, 2018 bore interest at rates ranging from 4.25% and 6.25%. Loan outstanding at December 31, 2019 mature through October 2024. Principal and interest are paid through payroll deductions.

Vesting

Participants are vested immediately in their contributions plus actual earnings thereon and in any qualified employer contributions.

Participants are vested in employer matching contributions and employer discretionary contributions subject to the graded vesting schedule as follows:

Years of Service	Vested Percentage
Less than 1 year	0%
1 year	20%
2 years	40%
3 years	60%
4 years	80%
5 years or more	100%

Years of service includes all years the participant has worked for the Company, regardless of the participant's date of enrollment in the Plan. In the event a participant becomes totally and permanently disabled, the value of the participant's account becomes fully vested. The value of the participant's account becomes fully vested upon the earlier of the participant's 65th birthday or death, provided the participant is an employee as of such date.

NOTE 1 - DESCRIPTION OF PLAN (Continued)

Payment of benefits

Upon termination of service due to death, disability or retirement, a participant (or beneficiary) may elect to receive either a lump-sum amount equal to the value of the vested interest in the participant's account or a distribution under a systematic withdrawal plan.

Hardship withdrawals

A participant may be permitted to withdraw a portion or all of the balances of their individual account that is attributable to the participant's tax-deferred compensation and matching contributions for the reasons specified by and to the extent permitted under regulations issued by the Internal Revenue Service ("IRS").

Forfeited accounts

Non-vested Company contributions forfeited by participants upon termination may be used to pay for Plan expenses or allocated to remaining participant accounts in the ratio of the participant's eligible annual compensation to the total eligible annual compensation paid to all eligible participants. For the years ended December 31, 2019 and 2018, $184,587 and $94,308 of forfeited employer matching contributions were applied to offset matching contributions, respectively. As of December 31, 2019 and 2018, forfeited non-vested accounts available to offset future matching contributions and administrative expenses totaled $44,742 and $65,721, respectively.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of accounting

The financial statements of the Plan are prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America ("U.S. GAAP"). References to the "ASC" hereafter refer to the Accounting Standards Codification established by the Financial Accounting Standards Board as the source of authoritative U.S. GAAP.

Use of estimates

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

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Investment valuation and income recognition

The Plan's 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. See Note 4 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Interest income is recorded on the accrual basis. The net appreciation in fair value of investments consists of both the realized gains or losses and unrealized appreciation and depreciation of those investments.

Notes receivable from participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued interest. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2019 or 2018. If a participant ceases to make loan repayments and the plan administrator deems the participant loan to be in default, the participant loan balance is reduced and a benefit payment is recorded.

Payment of benefits

Benefits are recorded when paid.

Plan expenses

Non-investment costs and administrative expenses of the Plan are paid by the Company, which is a party-in-interest. These expenses are not reflected in the financial statements and constitute exempt party-in-interest transactions under ERISA.

NOTE 3 - INVESTMENTS

The Plan assets are held by Mass Mutual, the Custodian, pursuant to the custodian agreement which provides that all funds received by the Custodian shall be held, administered, invested and distributed by the Custodian, and that no part of the corpus or income shall be used for, or directed to, purposes other than for the exclusive benefit of participants or their beneficiaries.

In the statement of changes in net assets available for benefits, the Plan presents the net appreciation in the fair value of investments of $2,395,216, which consists of realized gains or losses and unrealized market value changes of investments.

NOTE 4 - FAIR VALUE MEASUREMENTS

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3).

The three levels of the fair value hierarchy under ASC 820, *Fair Value Measurements and Disclosures* are described as follows:

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

Level 2 - Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

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

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

The 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, 2019 and 2018.

Pooled separate accounts: The fair values of participation units held in pooled separate accounts are based on their net asset values ("NAV") reported by the fund managers as of the financial statements dates and recent transaction prices. Each of the sub-accounts of the Mass Mutual Company Pooled Separate Accounts invests in a single, open-ended mutual fund which is generally identified in the name of the pooled separate account sub-account. Each pooled separate sub-account provides for daily redemptions by the Plan with no advance notice requirements, and has redemption prices that are determined by the fund's NAV per unit.

NOTE 4 - FAIR VALUE MEASUREMENTS (Continued)

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

As of December 31, 2019 and 2018, all fair value investments were valued using NAV practical expedient and, accordingly, no hierarchy table was presented.

The following sets forth additional disclosures for the fair value measurement of significant investments in certain entities that calculate NAV per share (or its equivalent) as of December 31, 2019 and 2018:

American Century Inflation-Adjusted Bond Fund A seeks total return and inflation protection consistent with investment in inflation-indexed securities. Under normal market conditions, the fund invests at least 80% of its net assets in inflation-adjusted bonds. It also may invest in derivative instruments such as futures contracts and swap agreements (including, but not limited to, inflation swap agreements and credit default swap agreements), bank loans, securities backed by mortgages or other assets and collateralized debt obligations. The fund may invest in U.S. Treasury futures, inflation swap agreements and credit default swap agreements to manage duration, inflation and credit exposure.

Blackrock Equity Dividend Fund seeks long-term total return and current income. The fund seeks to achieve its objective by investing primarily in a diversified portfolio of equity securities. Under normal circumstances, it will invest at least 80% of its assets in equity securities and at least 80% of its assets in dividend paying securities. The fund may invest in securities of companies with any market capitalization but will generally focus on large cap securities. It may also invest in convertible securities and non-convertible preferred stock. The fund may invest up to 25% of its total assets in securities of foreign issuers.

Hartford Capital Appreciation Fund seeks growth of capital. The fund seeks to achieve its investment objective by investing primarily in stocks selected on the basis of potential for capital appreciation. It normally invests at least 65% of its net assets in common stocks of medium and large companies. The fund may invest up to 35% of its net assets in securities of foreign issuers and non-dollar securities, including companies that conduct their principal business activities in emerging markets or whose securities are traded principally on exchanges in emerging markets.

Invesco Diversified Dividend Fund A seeks long-term growth of capital and, secondarily, current income. The fund seeks to achieve its objective by investing primarily in a diversified portfolio of equity securities. Under normal circumstances, it will invest at least 80% of its assets in equity securities and at least 80% of its assets in dividend paying securities. The fund may invest in securities of companies with any market capitalization, but will generally focus on large cap securities. It may also invest in convertible securities and non-convertible preferred stock. The fund may invest up to 25% of its total assets in securities of foreign issuers.

NOTE 4 - FAIR VALUE MEASUREMENTS (Continued)

Invesco Small Cap Growth Fund A seeks long-term capital growth. The fund invests at least 80% of its net assets in securities and small-capitalization issuers.

JPMorgan SmartRetirement funds seek high total return with a shift to current income and some capital appreciation over time as the funds approach and pass the target retirement date.

Mass Mutual MSCI EAFE International Index Fund Class R4 seeks to provide investment results approximating (before fees and expenses) the aggregate price and dividend performance of the securities included in the MSCI EAFE Index. The fund invests at least 80% of its net assets (plus the amount of any borrowings for investment purposes) in the equity securities of companies included in the index, in weightings that approximate the relative composition of the securities contained in the index, and in MSCI EAFE Index futures contracts. The index is a widely recognized, unmanaged index representative of equity securities in developed markets, excluding the U.S. and Canada.

Mass Mutual S&P 500 Index Fund Class R4 seeks the capitalization-weighted total rate of return of the portion of the U.S. market for publicly-traded common stocks composed of larger-capitalized companies. The fund invests at least 80% of its net assets in the equity securities included in the index.

Mass Mutual S&P 500 Mid Cap Index Fund Class R4 seeks to provide investment results approximating (before fees and expenses) the aggregate price and dividend performance of the securities included in the S&P MidCap 400 Index. The fund invests at least 80% (and, typically, substantially all) of its net assets (plus the amount of any borrowings for investment purposes) in the equity securities of companies included in the index, in weightings that approximate the relative composition of the securities contained in the index, and in S&P MidCap 400 Index futures contracts. The index is a widely recognized, unmanaged index representative of common stocks of mid-capitalized U.S. companies.

PIMCO High Yield Fund A seeks maximum total return, consistent with preservation of capital and prudent investment management. The fund invests at least 80% of its assets in a diversified portfolio of high yield securities ("junk bonds"), which may be represented by forwards or derivatives. It may invest up to 20% of its total assets in securities rated Caa or below by Moody's, or equivalently rated by S&P or Fitch, or, if unrated, determined by PIMCO to be of comparable quality. The fund may invest, without limitation, in derivative instruments, such as options, futures contracts or swap agreements, or in mortgage- or asset-backed securities.

Premier Barings High Yield R4 Fund seeks to achieve a high level of total return, with an emphasis on current income, by investing primarily in high yield debt and related securities. The fund invests primarily in lower rated U.S debt securities, including securities in default. It invests at least 80% of its net assets in lower rated fixed income securities.

NOTE 4 - FAIR VALUE MEASUREMENTS (Continued)

Premier Strategic Emerging Markets Fund R4 seeks long-term capital growth. The fund mainly invests in common stocks of issuers in developing and emerging markets throughout the world and at times it may invest up to 100% of its total assets in foreign securities. It will invest at least 80% of its net assets plus the amount of any borrowings for investment purposes in equity securities of issuers whose principal activities are in a developing or emerging market. The fund will invest in at least three developing markets. It focuses on companies with above-average earnings growth.

Victory Sycamore Small Company Opportunity Fund seeks capital appreciation. The funds invest primarily in the equity securities of smaller companies that the adviser believes to be undervalued relative to the underlying earnings potential of the company. Under normal circumstances, the funds will invest at least 80% of its net assets in equity securities of small companies. "Small companies" are companies that at the time of purchase have market capitalizations within the range of companies comprising the Russell 2000 Value Index.

NOTE 5 - GUARANTEED INVESTMENT CONTRACT

The Plan holds a benefit-responsive guaranteed investment contract with Mass Mutual. Mass Mutual maintains the contributions in a general account. The account is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The guaranteed investment contract issuers are contractually obligated to repay the principal and a specified interest rate that is guaranteed by the Plan.

Because the guaranteed investment contract is fully benefit-responsive, contract value is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the guaranteed investment contract. Contract value, as reported to the Plan by the Custodian, represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

There are no reserves against contract value for credit risk of the contract issuer or otherwise. The crediting interest is based on a formula agreed upon with the issuer, but it may not be less than 1%. Such interest rates are reviewed on an annual basis for resetting

Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events would include the Plan’s discontinuance of the guaranteed investment contract or the occurrence of other liquidation value events under the guaranteed investment contract. The plan administrator does not believe that the occurrence of any such value event, which would limit the Plan’s ability to transact at contract value with participants, is probable.

NOTE 6 - INFORMATION PREPARED AND CERTIFIED BY CUSTODIAN

The following unaudited information in the financial statements was certified to be complete and accurate by the Custodian of the Plan's assets, within the meaning of 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for reporting and disclosure under ERISA:

- All amounts included as investments and notes receivable from participants in the statements of net assets available for benefits as of December 31, 2019 and 2018;
- Net appreciation in fair value of investments, dividends, and interest for the year ended December 31, 2019 included in the statement of changes in net assets available for benefits; and
- All information in the supplemental schedule of assets (held at end of year) as of December 31, 2019.

NOTE 7 - PARTIAL PLAN TERMINATION

As a result of a reduction of the Company's workforce in 2018 through 2020, the Plan experienced a partial plan termination as defined by ERISA in 2019 and 2020. Under ERISA, a partial plan termination may occur if a significant percentage of the Plan participants are terminated because of an action taken by the Company. If a partial plan termination occurs, full vesting in the employer contributions is required for the affected participants, but the remaining participants' vesting continues to be determined per the Plan provisions. All affected employees who were participants in the Plan were fully vested in their account balances at the date of their partial plan termination.

NOTE 8 - PLAN TERMINATION

Although it is currently the intent of the Company to continue the Plan, the Company has the right under the Plan provisions 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 become 100% vested in their accounts.

NOTE 9 - TAX STATUS

The Plan document is a prototype non-standardized profit sharing plan that received a favorable opinion letter from the IRS on March 31, 2014, which stated that the Plan was in accordance with applicable sections of the IRC. Although the Plan has been amended since receiving the opinion 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.

U.S. GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2019, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2016.

NOTE 10 - RISKS AND UNCERTAINTIES

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

NOTE 11 - PARTY-IN-INTEREST TRANSACTIONS

Plan investments are managed by the Custodian. Transactions with the Custodian qualify as party-in-interest transactions. All record-keeper fees for the year ended December 31, 2019 were paid by the Plan sponsor. Notes receivable from participants also reflect party-in-interest transactions.

NOTE 12 - SUBSEQUENT EVENTS

On March 11, 2020, the World Health Organization recognized the spread of the coronavirus disease 2019 (COVID-19) as a pandemic. The impacts of the COVID-19 pandemic have been pervasive across the economy and created substantial volatility in financial markets. The situation continues to develop rapidly and considerable uncertainty remains with respect to potential outcomes.

On March 27, 2020, the Coronavirus Aid, Relief, and Economic Security ("CARES") Act became law. The CARES Act contains various provisions impacting qualified retirement plans and their participants. Plans are permitted to implement these provisions immediately provided the plan document is retroactively amended on or before December 31, 2022. During 2020, the Plan implemented the following provisions, as summarized, under the CARES Act:

- Distributions provision - This provision allows the Plan's participants to take a COVID-19 related distribution up to $100,000 from the Plan and includes relief from the 10% withdrawal penalty for participants under the age of 59.5 years.
- Required minimum distributions provision - This provision allows for the waiver and suspension of the required minimum distributions that were to be made to qualified Plan participants during the year ended December 31, 2020.
- Participant loans provision - This provision allows for higher limits on new loans issued during a certain period in 2020. The higher limit is for a maximum loan amount equal to the lesser of $100,000 or 100% of the participant's vested account balance.
- Temporary loan repayment deferral provision - This provision allows qualified Plan participants who have Plan loan repayments to defer such repayments until December 31, 2020.

Written amendments to the Plan to reflect these operational changes will be adopted at a later date in accordance with applicable law and IRS guidance.

Subsequent events have been evaluated by the Plan through October 13, 2020, which is the date the financial statements were available to be issued.

SUPPLEMENTAL SCHEDULE

HYBRID PROMOTIONS LLC INCENTIVE SAVINGS PLAN
EIN: 33-0838747
PLAN NUMBER: 001

SCHEDULE H, PART IV, LINE 4(i)
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2019

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, and par or maturity value	(d) Cost	(e) Current value
	Pooled Separate Accounts:			
*	Mass Mutual	American Century Inflation-Adjusted Bond Fund A	**	$ 1,017,166
*	Mass Mutual	Blackrock Equity Dividend Fund	**	678,818
*	Mass Mutual	Hartford Capital Appreciation Fund	**	451,576
*	Mass Mutual	Hartford Inflation Plus Fund	**	227,931
*	Mass Mutual	Invesco Diversified Dividend Fund A	**	587,723
*	Mass Mutual	Invesco Real Estate Fund	**	49,149
*	Mass Mutual	Invesco Small Cap Growth Fund A	**	377,296
*	Mass Mutual	Ivy Science and Technology Fund	**	134,889
*	Mass Mutual	JPMorgan SmartRetirement 2020 Fund	**	579,644
*	Mass Mutual	JPMorgan SmartRetirement 2025 Fund	**	450,096
*	Mass Mutual	JPMorgan SmartRetirement 2030 Fund	**	2,810,213
*	Mass Mutual	JPMorgan SmartRetirement 2035 Fund	**	724,331
*	Mass Mutual	JPMorgan SmartRetirement 2040 Fund	**	3,035,539
*	Mass Mutual	JPMorgan SmartRetirement 2045 Fund	**	1,266,941
*	Mass Mutual	JPMorgan SmartRetirement 2050 Fund	**	2,914,569
*	Mass Mutual	JPMorgan SmartRetirement 2055 Fund	**	878,840
*	Mass Mutual	JPMorgan SmartRetirement 2060 Fund	**	214,501
*	Mass Mutual	JPMorgan SmartRetirement Income Fund	**	218,045
*	Mass Mutual	JPMorgan U.S. Government Money Market Fund Class Institutional	**	2
*	Mass Mutual	Mass Mutual MSCI EAFE International Index Fund Class R4	**	1,290,911
*	Mass Mutual	Mass Mutual Russell 2000 Small Cap Index Fund Class R4	**	198
*	Mass Mutual	Mass Mutual S&P 500 Index Fund Class R4	**	2,121,254
*	Mass Mutual	Mass Mutual S&P 500 Mid Cap Index Fund Class R4	**	901,467
*	Mass Mutual	PIMCO High Yield Fund A	**	929,703
*	Mass Mutual	Premier Barings High Yield R4 Fund	**	439,314
*	Mass Mutual	Premier Strategic Emerging Markets Fund R4	**	419,118
*	Mass Mutual	Select BlackRock Global Allocation Fund Class R4	**	8,405
*	Mass Mutual	Templeton Foreign Fund	**	237,834
*	Mass Mutual	Victory Sycamore Small Company Opportunity Fund	**	524,702
		Total pooled separate accounts		23,490,175
	Guaranteed Investment Contract:			
*	Mass Mutual	Guaranteed Investment Contract	**	648,382
*	Participant loans	Interest rate ranging from 4.25% to 6.50% maturing through October 2024		537,339
				$ 24,675,896

* Parties-in-interest.
** Information is not required as investments are participant directed.