

Form 5500-SF

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation

Short Form Annual Return/Report of Small Employee Benefit Plan

This form is required to be filed 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-SF.

OMB Nos. 1210-0110 1210-0089

2024

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/26/2024

- A This return/report is for: [X] a single-employer plan [] a multiple-employer plan (not multiemployer) (Pension Plan filers checking this box must attach Schedule MEP. Other plans must attach a list of participating employer information in accordance with the form instructions.)
B This return/report is [] the first return/report [X] the final return/report [] an amended return/report [X] a short plan year return/report (less than 12 months)
C Check box if filing under: [] Form 5558 [] automatic extension [] DFVC program [] special extension (enter description)
D If the plan is a collectively-bargained plan, check here []
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here []

Part II Basic Plan Information—enter all requested information

1a Name of plan IV INTERACTIVE LLC CASH BALANCE PLAN
1b Three-digit plan number (PN) 002
1c Effective date of plan 01/01/2021
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) I.V. INTERACTIVE, L.L.C.
10 LINCOLN PLACE, NO. 1177 MADISON, NJ 07940
2b Employer Identification Number (EIN) 30-0389690
2c Sponsor's telephone number 201-656-0700
2d Business code (see instructions) 541519
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
5a Total number of participants at the beginning of the plan year 24
b Total number of participants at the end of the plan year 0
c(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)
c(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)
d(1) Total number of active participants at the beginning of the plan year 23
d(2) Total number of active participants at the end of the plan year 0
e Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested 0

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, if applicable, a Schedule SB or Schedule MB completed and signed by an enrolled actuary, 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.

Table with 4 columns: SIGN HERE, Signature of plan administrator, Date, Enter name of individual signing as plan administrator. Row 1: Filed with authorized/valid electronic signature, 04/30/2025, DOV RADZIK. Row 2: Signature of employer/plan sponsor, Date, Enter name of individual signing as employer or plan sponsor.

- 6a** Were all of the plan's assets during the plan year invested in eligible assets? (See instructions.) Yes No
- b** Are you claiming a waiver of the annual examination and report of an independent qualified public accountant (IQPA) under 29 CFR 2520.104-46? (See instructions on waiver eligibility and conditions.) Yes No
- If you answered "No" to either line 6a or line 6b, the plan cannot use Form 5500-SF and must instead use Form 5500.**
- c** 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 547018. (See instructions.)

Part III Financial Information			
7 Plan Assets and Liabilities		(a) Beginning of Year	(b) End of Year
a Total plan assets	7a	556781	0
b Total plan liabilities	7b		
c Net plan assets (subtract line 7b from line 7a)	7c	556781	0
8 Income, Expenses, and Transfers for this Plan Year		(a) Amount	(b) Total
a Contributions received or receivable from:			
(1) Employers	8a(1)	8292	
(2) Participants	8a(2)		
(3) Others (including rollovers)	8a(3)		
b Other income (loss)	8b	16545	
c Total income (add lines 8a(1), 8a(2), 8a(3), and 8b)	8c		24837
d Benefits paid (including direct rollovers and insurance premiums to provide benefits)	8d	579248	
e Certain deemed and/or corrective distributions (see instructions) .	8e		
f Administrative service providers (salaries, fees, commissions)	8f	2370	
g Other expenses	8g		
h Total expenses (add lines 8d, 8e, 8f, and 8g)	8h		581618
i Net income (loss) (subtract line 8h from line 8c)	8i		-556781
j Transfers to (from) the plan (see instructions)	8j		

Part IV Plan Characteristics	
9a	If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions: 1A 1C 3D 1I 1H
b	If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:

Part V Compliance Questions				
10 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)	10a		X	
b Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 10a.)	10b		X	
c Was the plan covered by a fidelity bond?	10c	X		50000
d Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	10d		X	
e Were any fees or commissions paid to any brokers, agents, or other persons by an insurance carrier, insurance service, or other organization that provides some or all of the benefits under the plan? (See instructions.)	10e		X	
f Has the plan failed to provide any benefit when due under the plan?	10f		X	
g Did the plan have any participant loans? (If "Yes," enter amount as of year-end.)	10g		X	
h If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	10h			
i If 10h was answered "Yes," check the box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	10i			

Part VI Pension Funding Compliance

11 Is this a defined benefit plan subject to minimum funding requirements? (If "Yes," see instructions and complete Schedule SB (Form 5500) and lines 11a and b below.) If this is a defined contribution pension plan, leave line 11 blank and complete line 12 below. Yes No

a Enter the unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 **11a** 0

b PBGC missed contribution reporting requirements. If the plan is covered by PBGC and the amount reported on line 11a is greater than \$0, 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 _____

12 Is this a defined contribution plan subject to the minimum funding requirements of section 412 of the Code or section 302 of ERISA? (If "Yes," complete line 12a or lines 12b, 12c, 12d, and 12e below, as applicable.) If this is a defined benefit pension plan, leave line 12 blank and complete line 11 above. Yes No

a 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 letter ruling granting the waiver. Month _____ Day _____ Year _____

If you completed line 12a, complete lines 3, 9, and 10 of Schedule MB (Form 5500), and skip to line 13.

b Enter the minimum required contribution for this plan year **12b** _____

c Enter the amount contributed by the employer to the plan for this plan year **12c** _____

d Subtract the amount in line 12c from the amount in line 12b. Enter the result (enter a minus sign to the left of a negative amount) **12d** _____

e Will the minimum funding amount reported on line 12d be met by the funding deadline? Yes No N/A

Part VII Plan Terminations and Transfers of Assets

13a Has a resolution to terminate the plan been adopted in any plan year? Yes No

a If "Yes," enter the amount of any plan assets that reverted to the employer this year. **13a** 0

b Were all the plan assets distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? Yes No

c 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.)

13c(1) Name of plan(s):	13c(2) EIN(s)	13c(3) PN(s)

Part VIII IRS Compliance Questions

14a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? Yes No

14b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).

- Design-based safe harbor method
- "Prior year" ADP test
- "Current year" ADP test
- N/A

15 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter 03 / 30 / 2018 (MM/DD/YYYY) and the Opinion Letter serial number J501275A.

SCHEDULE SB (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/26/2024

▶ **Round off amounts to nearest dollar.**
 ▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan <u>IV INTERACTIVE LLC CASH BALANCE PLAN</u>	B Three-digit plan number (PN) ▶	<u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>I.V. INTERACTIVE, L.L.C.</u>	D Employer Identification Number (EIN) <u>30-0389690</u>	
E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B	F Prior year plan size: <input checked="" type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input type="checkbox"/> More than 500	

Part I Basic Information

1 Enter the valuation date:	Month <u>01</u>	Day <u>01</u>	Year <u>2024</u>	
2 Assets:				
a Market value	2a	<u>551674</u>		
b Actuarial value	2b	<u>551674</u>		
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target	
a For retired participants and beneficiaries receiving payment	<u>0</u>	<u>0</u>	<u>0</u>	
b For terminated vested participants	<u>1</u>	<u>1652</u>	<u>1652</u>	
c For active participants	<u>23</u>	<u>540794</u>	<u>558036</u>	
d Total	<u>24</u>	<u>542446</u>	<u>559688</u>	
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>				
a Funding target disregarding prescribed at-risk assumptions	4a			
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b			
5 Effective interest rate	5	<u>4.75 %</u>		
6 Target normal cost				
a Present value of current plan year accruals	6a	<u>0</u>		
b Expected plan-related expenses	6b	<u>0</u>		
c Target normal cost	6c	<u>0</u>		

Statement by Enrolled Actuary
 To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE Signature of actuary <u>ADAM K. PAGENKOPF</u> Type or print name of actuary <u>PENSION CONSULTANTS, INC.</u> Firm name <u>120 SOUTH SIXTH STREET SUITE 1911</u> <u>MINNEAPOLIS, MN 55402</u> Address of the firm	<u>04/14/2025</u> Date <u>23-07413</u> Most recent enrollment number <u>612-339-1111</u> Telephone number (including area code)
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If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions

Part II Beginning of Year Carryover and Prefunding Balances		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of <u>4.65</u> %	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		118898
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.12</u> %		6088
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		124986
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages			
14	Funding target attainment percentage	14	98.56 %
15	Adjusted funding target attainment percentage	15	98.56 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	129.64 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls		18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees		
10/04/2024	4600	0					
12/17/2024	3692	0					
			Totals ▶	18(b)	8292	18(c)	0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
b Contributions made to avoid restrictions adjusted to valuation date	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	7972

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? Yes No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? Yes No

c If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:

a Segment rates:	1st segment: 4.75 %	2nd segment: 4.96 %	3rd segment: 5.59 %	<input type="checkbox"/> N/A, full yield curve used
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b Applicable month (enter code) **21b** 0

22 Weighted average retirement age **22** 65

23 Mortality table(s) (see instructions) Prescribed - combined Prescribed - separate Substitute

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment..... Yes No

25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment..... Yes No

26 Demographic and benefit information

a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment..... Yes No

b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ... Yes No

27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment..... **27**

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a).....	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29).....	30	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):

a Target normal cost (line 6c)	31a	0
b Excess assets, if applicable, but not greater than line 31a	31b	0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	8014	732
b Waiver amortization installment.....		

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount **33**

34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....	34	732
	Carryover balance	Prefunding balance
35 Balances elected for use to offset funding requirement		0
36 Additional cash requirement (line 34 minus line 35)	36	732
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	7972

38 Present value of excess contributions for current year (see instructions)

a Total (excess, if any, of line 37 over line 36)	38a	7240
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances.....	38b	0

39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0
40 Unpaid minimum required contributions for all years	40	0

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. 2019 2020 2021

Name: I.V. INTERACTIVE, LLC CASH BALANCE PLAN

EIN: 30-0389690

PN: 002

Schedule SB, Part V - Statement of Actuarial Assumptions/Methods

Weighted Average Retirement Age	65.00
Valuation Funding 24-month Segment Rates	1st segment - 4.75% 2nd segment - 4.96% 3rd segment - 5.59%
Effective Interest Rate	4.75%
Mortality	2024 Applicable Mortality Table Post-retirement only
Assumed Form of Payment	100% Lump Sum
Salary Scale	None
Administrative Expenses	Actual expenses from previous or current year
Retirement Rates	Participants are assumed to retire on their Normal Retirement Date

The actuarial cost method used in the valuation is the unit credit cost method as required in the Pension Protection Act of 2006 and Internal Revenue Code 430.

The target normal cost is the sum of all individual normal costs for each participant.

The target normal cost is the present value of the benefit earned during the year

The individual funding target is the present value of the accrued benefit as of the valuation date assuming payment at assumed retirement age.

The funding shortfall is the total funding target less the actuarial value of assets.

Depending on the AFTAP of the plan and other factors, an adjustment may also be made for a carryover or pre-funding balance. The total annual cost of the plan is the target normal cost plus an amount to amortize the funding shortfall over seven years.

I.V. INTERACTIVE, LLC
CASH BALANCE PLAN
ACTUARIAL VALUATION REPORT
Valuation Date: January 1, 2024

STATEMENT OF ACTUARIAL OPINION

The purpose of this report is to provide I.V. Interactive, LLC information regarding the Minimum Required Contribution as defined in Internal Revenue Code 430. The report also provides for a recommended contribution for the long term goals of the Plan Sponsor which considers the actuary's best interpretation of the Internal Revenue Code and Regulations pertaining to the maximum deductible limit. In providing the information regarding the Minimum Required Contribution the report summarizes plan provisions, census data, asset data and assumptions.

In preparing the report the actuary has relied on the Plan Sponsor to provide complete and accurate information regarding employee census and plan assets for the year beginning in 2023. The data provided has not been audited but has been reviewed for reasonableness and consistency. If any of the data is inaccurate or incomplete the results contained in the report are subject to revision.

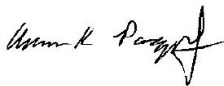
The report contains results by using assumptions and methods as provided in the Internal Revenue Code section 430 in accordance with the Pension Protection Act of 2006. Other assumptions and methods were chosen by the actuary and reflect the Plan's expected experience. Where assumptions and methods required by the Code deviate from the actuary's opinion of reasonableness the assumptions and methods will be detailed in this report.

The report is provided to inform the Plan Sponsor of the Minimum Required Contribution. This report shall not be used by anyone other than the Plan Sponsor for reasons not associated with the minimum funding requirement. The report shall not be distributed to any third party except by consent by Pension Consultants, Inc. The report does not contain any information that should be construed as investment or tax advice.

Calculations for purposes other than compliance with minimum funding standards, such as plan solvency, termination, and financial reporting may vary significantly from the results in this report. Therefore this report should not be relied upon for these purposes.

The report as provided has taken into consideration the actuary's best interpretation of Internal Revenue Code 404 regarding the maximum deductible limit. Although the maximum amount may be deductible contributing the maximum may overfund the Plan.

I, Adam K. Pagenkopf, EA, MSEA am an Enrolled Actuary under the Joint Board of Enrolled Actuaries and am qualified to issue the report as a statement of actuarial opinion.



Adam K. Pagenkopf, EA, MSEA
Enrollment Number 23-07413

SUMMARY OF PLAN PROVISIONS

Effective Date:	January 1, 2021
Plan Year:	January 1 to December 31
Eligibility:	Waiting Period - 1 Year of Service Minimum Age - 21
Eligibility Date:	The first day of the first or seventh month coinciding with or next following satisfaction of eligibility requirements
Exclusions:	Collectively bargained, Non-resident aliens, leased employees
Normal Retirement Date:	Attainment of age 65
Hypothetical Allocations:	Allocations as specified by group in the Plan Document
Year of Service:	Plan year of at least 1,000 hours
Accrued Benefit:	The participant's hypothetical account balance projected to normal retirement and converted into a single life annuity payable at normal retirement date.
Death Benefit:	Hypothetical account balance as of the date of death
Disability Benefit:	Treated as a termination
Termination Benefit:	100% vested after 3 years of vesting service
Interest Credit Rate:	A flat rate of 3.50%
Top-Heavy Status:	If the Plan is Top-Heavy the top-heavy contribution will be met in the defined contribution plan

STATEMENT OF INCOME AND DISBURSEMENTS

Assets as of January 1, 2023		154,472
Income:		
Contributions - Prior year receivable	194,089	
Contributions - For prior year	0	
Net other income	<u>12,825</u>	
		206,914
Expenses:		
Distributions	3,692	
Administrative expenses	<u>0</u>	
		3,692
Assets as of December 31, 2023		357,694
Prior year average rate of return		4.66%

ACTUARIAL VALUE OF ASSETS

Assets as of January 1, 2024		357,694
Plus:		
Receivable contributions	199,088	
Interest discount on receivables	<u>(5,108)</u>	
		193,980
Total actuarial value of assets		551,674

ASSETS AS OF DECEMBER 31, 2023

Assets as of December 31, 2023		357,694
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HYPOTHETICAL ACCOUNT BALANCES AS OF DECEMBER 31, 2023

Hypothetical Account Balances as of December 31, 2023		565,314
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Minimum Required Contribution

A) Actuarial Value of Assets			551,674
B) Funding Target	<u>Non-Vested</u>	<u>Vested</u>	559,688
1. Actives (23)	17,242	540,794	
2. Vested Terminations (1)	0	1,652	
3. Retirees (0)	0	0	
C) Target Normal Cost			0
D) Prefunding Balance			0
E) Carryover Balance			0
F) Shortfall Amortization Installments / (Excess)			732
G) Target Normal Cost, adjusted for excess if applicable			0
H) Carryover Balanced used			0
I) Prefunding Balance used			0
J) Interest (including quarterly interest, if applicable)			59
K) Final Minimum Required contribution *			791
[(G) - (H) - (I) + (J)]			
* Final Minimum Required contribution assumes interest until latest funding date			

Development of the Maximum Deductible Contribution

A) Initial maximum deductible contribution	
1. Funding target	561,382
2. Target normal cost	0
3. Cushion	
i. 50% of funding target without HCE amendments	222,785
ii. Increased due to salary scale	<u>0</u>
iii. Total cushion amount [(i.) + (ii.)]	222,785
4. Actuarial value of assets	<u>(551,674)</u>
Initial maximum deductible contribution	232,493
$\max\{[(1.) + (2.) + (3iii.) + (4.)], 0\}$	
B) Assumed at-risk maximum deductible contribution	
1. At-risk funding target	365,803
2. At-risk target normal cost	208,115
3. Actuarial value of assets	<u>(551,674)</u>
Assumed at-risk maximum deductible contribution	22,244
$\max\{[(1.) + (2.) + (3.)], 0\}$	
C) Minimum required contribution with estimated interest	791
D) Final maximum deductible contribution *	232,493
$\max[(A), (B), (C)]$	

* Although the amount shown above may be deductible, contributing this amount may cause the Plan to be "overfunded" at plan termination. Excess assets at termination may have substantial taxes, fees and penalties.

* The maximum deductible shown above does NOT account for sole proprietorships and partnerships, as the total deduction amount is capped at their self-employment earned income.

* The maximum deductible contribution is based on a good-faith interpretation of IRC 404.

Development of Prefunding (PFB) and Carryover Balances (COB)

	<u>COB</u>	<u>PFB</u>
A) Prior balance from prior year Schedule SB	0	0
B) Balance used to reduce prior year contribution	0	0
C) Remaining balance	0	0
D) Interest at prior year rate of return	0	0
E) Balance at beginning of the plan year	0	0
F) Development of balances for calculation purposes		
1. Mandatory / voluntary reduction	0	0
2. Prior year excess contribution	N/A	118,898
3. Added excess contribution to balance	N/A	0
4. Interest at current year effective interest rate	0	0
Balances for calculation purposes	0	0
G) Used balances for current year required contribution	0	0
Prior year rate of return	4.66%	
Current year effective interest rate	4.75%	

Development of Excess Assets or Shortfall Amortization

A) Exemption of new base	
1. Funding target	559,688
2. Actuarial value of assets less PFB (if used)	551,674
3. Exemption percentage (exempt if >= 100%)	98.56%
 B) Shortfall / (Excess)	
1. Funding target	559,688
2. Actuarial value of assets less PFB and COB	551,674
3. Shortfall / (Excess)	8,014
4. Present value of prior installments	8,014
 C) Amortization installment factor	10.9414
 D) Installment amount for current year	732
if (A3.) < 100% then [(B3.) - (B4.)] / (C) else \$0	

If there is any excess, all prior bases are considered fully amortized.

Shortfall amortization schedule

<u>Valuation Date</u>	<u>Years remaining</u>	<u>Present value of remaining installments</u>	<u>Installments</u>
01/01/2024	15	8,014	732
01/01/2023	14	0	0
01/01/2022	13	0	0
01/01/2021	12	0	0
01/01/2020	11	0	0
01/01/2019	10	0	0
01/01/2018	9	0	0
01/01/2017	8	0	0
01/01/2016	7	0	0
01/01/2015	6	0	0
01/01/2014	5	0	0
01/01/2013	4	0	0
01/01/2012	3	0	0
01/01/2011	2	0	0
01/01/2010	1	0	0
	Totals	8,014	732

SUMMARY OF ACTUARIAL ASSUMPTIONS AND METHODS

Weighted Average Retirement Age	65.00
Valuation Funding 24-month Segment Rates	1st segment - 4.75% 2nd segment - 4.96% 3rd segment - 5.59%
Effective Interest Rate	4.75%
Mortality	2024 Applicable Mortality Table Post-retirement only
Assumed Form of Payment	100% Lump Sum
Salary Scale	None
Administrative Expenses	Actual expenses from previous or current year
Retirement Rates	Participants are assumed to retire on their Normal Retirement Date or one year later if past retirement age
Asset Valuation	Market Value at valuation date
Valuation Date	January 1, 2024

Funding Method - PPA Unit Credit

The actuarial cost method used in the valuation is the unit credit cost method as required in the Pension Protection Act of 2006 and Internal Revenue Code 430.

The target normal cost is the sum of all individual normal costs for each participant. The target normal cost is the present value of the benefit earned during the year being valued.

The individual funding target is the present value of the accrued benefit as of the valuation date assuming payment at assumed retirement age.

The funding shortfall is the total funding target less the actuarial value of assets. Depending on the AFTAP of the plan and other factors, an adjustment may also be made for a carryover or pre-funding balance. The total annual cost of the plan is the target normal cost plus an amount to amortize the funding shortfall over fifteen years.

Rationale of Non-prescribed Assumptions

Valuation as of 01/01/2024 for the Plan Year Ending 12/31/2024

Plan Name IV Interactive LLC Cash Balance Plan EIN: 30-0389690
Plan Sponsor's Name I.V. Interactive, L.L.C.

Rationale of non-prescribed assumptions:

Salary Increases

No assumed wages since plan is frozen

Form of Payment

The assumed form of payment is 100% lump sum and 0% annuities based on anticipated experience and options available.

Withdraw

None since small plan population and combined with Retirement

Early Retirement

None since small plan population and combined with Retirement

Subsidized Early Retirement

None since small plan population and combined with Retirement

Normal Retirement/Late Retirement

Participants are assumed to retire at expected payout date due to plan termination

Disability

None, since no disability benefits

Interest Credit Rate

The future interest credit rate was based on the most current interest credit rate in the Plan.

General Potential Risk Summary
Valuation as of 01/01/2024 for the Plan Year Ending 12/31/2024

Plan Name IV Interactive LLC Cash Balance Plan EIN: 30-0389690
Plan Sponsor's Name I.V. Interactive, L.L.C.

The results provided in this report are based on various assumptions regarding future events. These assumptions, although in accordance with appropriate actuarial guidelines, are inherently based on uncertain future events. Thus, fluctuations in future results are to be expected and create an element of risk regarding required funding, funding levels (which will impact the availability of lump sums) and how well the plan is funded upon plan termination.

Future actuarial calculations may differ significantly from the current calculations due to many factors including but not limited to: plan experience differing from anticipated economic and demographic assumptions, changes in mandated assumptions, changes in plan provisions, and changes in applicable law. Below is more information on key risk areas.

Investment Risk:

While the rate of return on assets does not directly get used in the funding valuation, for any recommended contribution an interest rate of 5% - 5.5% is used, however for Cash Balance Plans the rate of return is assumed to be equal to the interest credit rate as defined in the plan document. This rate is used in an effort to match investment return with anticipated liability increases due to a combination of interest rates, plan provisions and current law. Should the investment return be more or less than this amount it may affect the recommended contribution and may cause an unanticipated increase or decrease in the minimum required contribution and maximum deductible limit. Deviations may also impact the potential for changes in assumptions used in future valuations.

Asset/Liability Mismatch Risk:

If the assets are invested in a way that does not mirror the liability increase the plan's funding requirement could increase. Since the effective interest rate is the single rate for calculating liabilities it is a reasonable assumption that if the actual rate of return for the year is greater than the effective interest rate that there would be an actuarial gain due to the return on investments versus the liability increase, due to the passage of time. If the change in asset value is different than the change in liability due to a change in interest rates, the funded status will either increase or decrease.

Interest Rate Risk:

Interest rates mandated by the IRS could also have an impact due to the tiered rates changing. As the participant nears assumed retirement the rates will increase the liabilities especially when the participant is within five years of assumed retirement due to structure of the tiered rates.

Demographic Risk:

If the plan has a beginning of year valuation date and compensation is used in determining benefits it is typically assumed that compensation for the coming year is equal to the prior year unless specific information is provided prior to the valuation date that would make a material difference. If actual compensation is different from the assumed it could increase or decrease the contribution due in future years.

Other demographic changes such as retirement due to disability, death or early retirement should have minimal impact and risk because in most cases the benefits associated with these decrements are similar and/or are actuarial equivalent to normal retirement benefits.

The timing of payments will impact the cost of the plan. For example, paying benefits sooner than assumed may cause smaller benefits to be paid or if benefits are fully subsidized it could increase liabilities. However, some of these events may not have been valued due to the size of the Plan and the likelihood of such events. Some of these events could have a significant impact on funding the plan, such as death of an owner. For example, not assuming pre-retirement mortality may be appropriate due to plan size, however if such event should occur it could have a material impact on the plan.

Contribution Risk:

There can be a risk of contributing too much to the plan before benefits are accrued. Should this happen the plan could have excess assets when the plan terminates. Typically excess assets are shared by plan participants, however there are also certain maximum benefits that would limit some distributions. If the total plan assets exceed the maximum benefits upon plan termination the excess could become subject to extensive excise tax penalties.

Contributing too little can increase future contribution requirements. Not making the minimum required contribution in any year can lead to excise taxes, additional reporting, late penalties and could lead to increase PBGC premiums if the plan is covered by the PBGC. Also contributing the minimum amount does not guarantee that the plan will be sufficiently funded in order to pay out full benefits.

Additional Assessment of Risk:

Based on the scope of this report, a numerical analysis of the impact of the potential variations in any factors discussed above on the future measurements for this plan was not performed. If interest in a more detailed projection analysis, please contact us. Any projection analysis would be based on more assumptions and be subject to greater volatility, so it would be less of a predictive analysis and more of an understanding of the impact that certain hypothetical variations could have on the plan.

Name: I.V. INTERACTIVE, LLC CASH BALANCE PLAN

EIN: 30-0389690

PN: 002

Schedule SB, line 19 - Discounted Employer Contributions

Date	Amount	Year Applied	Effective Rate	Interest Adjusted Contribution
10/4/2024	4,600	2024	4.75%	4,441
12/17/2024	3,692	2024	4.75%	3,531
	8,292			7,972

Name: I.V. INTERACTIVE, LLC CASH BALANCE PLAN

EIN: 30-0389690

PN: 002

Schedule SB, line 22 - Description of Weighted Average Retirement Age

Weighted Average Retirement Age	65.00
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The weighted average retirement age is based on the Plan's normal retirement age unless a participant is past normal retirement age, in which case the assumed retirement age is assumed to be one year later.

Name: I.V. INTERACTIVE, LLC CASH BALANCE PLAN

EIN: 30-0389690

PN: 002

Schedule SB, Part V - Summary of Plan Provisions

Effective Date: January 1, 2021

Plan Year: January 1 to December 31

Eligibility: Waiting Period - 1 Year of Service
Minimum Age - 21

Eligibility Date: The first day of the first or seventh month coinciding with or next following satisfaction of eligibility requirements

Exclusions: Collectively bargained, Non-resident aliens, leased employees

Normal Retirement Date: Attainment of age 65

Hypothetical Allocations: Allocations as specified by group in the Plan Document

Year of Service: Plan year of at least 1,000 hours

Accrued Benefit: The participant's hypothetical account balance projected to normal retirement and converted into a single life annuity payable at normal retirement date.

Death Benefit: Hypothetical account balance as of the date of death

Disability Benefit: Treated as a termination

Termination Benefit: 100% vested after 3 years of vesting service

Interest Credit Rate: A flat rate of 3.50%

Top-Heavy Status: If the Plan is Top-Heavy the top-heavy contribution will be met in the defined contribution plan

Name: I.V. INTERACTIVE, LLC CASH BALANCE PLAN

EIN: 30-0389690

PN: 002

Schedule SB, line 32 - Schedule Amortization Bases

Type of Base	PV of Remaining Installments	Valuation Date	Years Remaining	Amortization Installment
Shortfall	8,014	01/01/2024	15	732
Shortfall	0	01/01/2023	14	0
Shortfall	0	01/01/2022	13	0
Shortfall	0	01/01/2021	12	0
Shortfall	0	01/01/2020	11	0
Shortfall	0	01/01/2019	10	0
Shortfall	0	01/01/2018	9	0
Shortfall	0	01/01/2017	8	0

Name: I.V. INTERACTIVE, LLC CASH BALANCE PLAN

EIN: 30-0389690

PN: 002

Schedule SB, line 25 - Change in Method

The valuation date was changed to the beginning of the year due to termination and payout of benefits during the year.

Name: I.V. INTERACTIVE, LLC CASH BALANCE PLAN

EIN: 30-0389690

PN: 002

Schedule SB, line 24 - Change in Assumptions

The assumed retirement age was changed to the expected payout date due to plan termination.