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

2023

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 10/31/2023

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: [X] 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
WORLD EDITIONS LLC 401K PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 06/01/2018

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)
WORLD EDITIONS LLC

159 20TH ST STE 1B
BROOKLYN, NY 11232

2b Employer Identification Number (EIN) 36-4889803

2c Sponsor's telephone number 917-518-0132

2d Business code (see instructions) 511130

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	**5a**	1
b Total number of participants at the end of the plan year	**5b**	0
c(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	**5c(1)**	0
c(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**5c(2)**	0
d(1) Total number of active participants at the beginning of the plan year	**5d(1)**	1
d(2) Total number of active participants at the end of the plan year	**5d(2)**	0
e Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**5e**	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.

SIGN HERE	Filed with authorized/valid electronic signature.	01/13/2026	CHRISTINE SWEDOWSKY
	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

6a Were all of the plan's assets during the plan year invested in eligible assets? (See instructions.) [X] 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.) [X] 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_____. (See instructions.)

Part III Financial Information

7 Plan Assets and Liabilities		(a) Beginning of Year	(b) End of Year
a Total plan assets	7a	119177	0
b Total plan liabilities	7b		
c Net plan assets (subtract line 7b from line 7a)	7c	119177	0
8 Income, Expenses, and Transfers for this Plan Year		**(a) Amount**	**(b) Total**
a Contributions received or receivable from: (1) Employers	8a(1)	2888	
(2) Participants	8a(2)	20294	
(3) Others (including rollovers)	8a(3)		
b Other income (loss)	8b	17237	
c Total income (add lines 8a(1), 8a(2), 8a(3), and 8b)	8c		40419
d Benefits paid (including direct rollovers and insurance premiums to provide benefits)	8d	159183	
e Certain deemed and/or corrective distributions (see instructions)	8e		
f Administrative service providers (salaries, fees, commissions)	8f	413	
g Other expenses	8g		
h Total expenses (add lines 8d, 8e, 8f, and 8g)	8h		159596
i Net income (loss) (subtract line 8h from line 8c)	8i		-119177
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:
2E 2F 2G 2J 2K 2T 3D

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		12000
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		X	
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** |

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 10 / 06 / 2020 (MM/DD/YYYY) and the Opinion Letter serial number Q704162A.

Christine Swedowsky (former employee of World Editions LLC)
243 8th Street, Apt. 4L
Brooklyn, NY, 11215

January 8th, 2026

Taxpayer ID 36-4889803
Employer # 53-63172
Plan 264522 - Late Final Form 5500

Dear Sir or Madam,

I am writing to address the delay in filing final form 5500 for plan 264522, plan period ending 12/31/2023, for World Editions LLC.

World Editions LLC was closed down on 10/31/2023. I am attaching the dissolution documents.

My employment, as previous plan administrator, was terminated on 6/30/2023. I am attaching the termination letter. After my employment was officially terminated, I helped wind down the company by taking on a few administrative tasks, including canceling the company's 401K plan, of which I was the only participant remaining in early 2023. The signed termination kit was submitted to ADP via Joy Tomlinson on 8/29/2023.

Neither me, or the executive administrator Judith Uyterlinde, were still employed by World Editions LLC after 6/30/2023. Mail sent to the company's previous address at 159 20th Street, Brooklyn, NY 11232 was returned to sender or discarded by the landlord of the co-working space World Editions used to occupy.

I have only now become aware that a final form 5500 was never filed. It appears a link was e-mailed to Judith Uyterlinde on 11/21/23, after World Editions LLC was already officially dissolved and all employees had long moved on. Mazars USA LLP was paid to address any remaining matters, but never alerted the previous owner of World Editions, Libella SA, a societe anonyme organized under the laws of Switzerland, of the missing form 5500.

Mazars USA LLP
Jalpa Dhebaria, Jalpa.Dhebaria@us.forvismazars.com or Tel: + 1 732 475 2111

I very much hope that any potential penalties for the late filing of form 5500 can be waived given the circumstances.

With thanks and best wishes,

Christine Swedowsky

World Editions
Voices from around the globe

Amsterdam, 6-30-2023

Dear Christine,

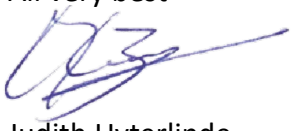
I hereby confirm that the employment contract between you and World Editions LLC will be terminated by World Editions and effected by mutual consent on June 30th, 2023.

Within 30 days upon termination of your contract, you will then receive a one-off sum equal to nine months of your gross salary.

Further details will be arranged in a separate Settlement Agreement.

Please confirm your consent in writing,

All very best



Judith Uyterlinde

Director World Editions LLC

Service Request# **20233918331**

State of Delaware

SECRETARY OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 898
DOVER, DELAWARE 19903

9703560
ACCUMERA LLC
10 COLVIN AVE.
SUITE 101
ALBANY, NY 12206

11-07-2023

ATTN: MEGAN BURKE

DESCRIPTION	AMOUNT
6735312 - WORLD EDITIONS LLC	
17203 Cancellation; Trust,GP,LP,LLC,RSE	
Cancellation Fee	*$180.00*
Court Municipality Fee, Wilm.	*$40.00*
Expedite Fee, 24 Hour	*$100.00*
TOTAL CHARGES	*$320.00*
CHARGED TO ACCOUNT	*$320.00*
BALANCE	*$0.00*

STATE OF DELAWARE
CERTIFICATE OF CANCELLATION
OF

World Editions LLC

State of Delaware
Secretary of State
Division of Corporations
Delivered 02:58 PM 11/07/2023
FILED 02:58 PM 11/07/2023
SR 20233918331 - File Number 6735312

1. The name of the limited liability company is: **World Editions LLC**

2. The Certificate of Formation of the limited liability company was filed on: **January 31, 2018**

3. The reason for filing the Certificate of Cancellation is the dissolution and completion of winding up the limited liability company.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Cancellation.

Dated: **November 7, 2023**

/s/ Judith Uijterlinde
Judith Uijterlinde
Manager

Form **966**
(Rev. October 2016)
Department of the Treasury
Internal Revenue Service

Corporate Dissolution or Liquidation

(Required under section 6043(a) of the Internal Revenue Code)
▶ **Information about Form 966 and its instructions is at *www.irs.gov/form966.***

OMB No. 1545-0123

Please type or print

Name of corporation
WORLD EDITIONS LLC

Employer identification number
36-4889803

159 20TH STREET APT 1B

Check type of return
☑ 1120 ☐ 1120-L
☐ 1120-IC-DISC ☐ 1120S
☐ Other ▶

City or town, state, and ZIP code
BROOKLYN, NY 11232

1 Date incorporated	2 Place incorporated	3 Type of liquidation	4 Date resolution or plan of complete or partial liquidation was adopted
02/12/2018	**DELAWARE**	☑ Complete ☐ Partial	**10/31/2023**

5 Service Center where corporation filed its immediately preceding tax return	6 Last month, day, and year of immediately preceding tax year	7a Last month, day, and year of final tax year	7b Was corporation's final tax return filed as part of a consolidated income tax return? If "Yes," complete 7c, 7d, and 7e.
EFILE	**12/31/2022**	**10/31/2023**	☐ Yes ☑ No

7c Name of common parent	7d Employer identification number of common parent	7e Service Center where consolidated return was filed

		Common	Preferred
8	Total number of shares outstanding at time of adoption of plan of liquidation		
9	Date(s) of any amendments to plan of dissolution	**N/A**	
10	Section of the Code under which the corporation is to be dissolved or liquidated	**SEC 331**	
11	If this form concerns an amendment or supplement to a resolution or plan, enter the date the previous Form 966 was filed		

Attach a certified copy of the resolution or plan and all amendments or supplements not previously filed.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature of officer	Title	Date
	Managing Director	11-17-2023

Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Who Must File

A corporation (or a farmer's cooperative) must file Form 966 if it adopts a resolution or plan to dissolve the corporation or liquidate any of its stock.

Exempt organizations and qualified subchapter S subsidiaries should not file Form 966. Exempt organizations should see the instructions for Form 990, Return of Organization Exempt From Income Tax, or Form 990-PF, Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation. Subchapter S subsidiaries should see Form 8869, Qualified Subchapter S Subsidiary Election.

CAUTION

Do not file Form 966 for a deemed liquidation (such as a section 338 election or an election to be treated as a disregarded entity under Regulations section 301.7701-3).

When To File

File Form 966 within 30 days after the resolution or plan is adopted to dissolve the corporation or liquidate any of its stock. If the resolution or plan is amended or supplemented after Form 966 is filed, file another Form 966 within 30 days after the amendment or supplement is adopted. The additional form will be sufficient if the date the earlier form was filed is entered on line 11 and a certified copy of the amendment or supplement is attached. Include all information required by Form 966 that was not given in the earlier form.

Where To File

File Form 966 with the Internal Revenue Service Center at the address where the corporation (or cooperative) files its income tax return.

Distribution of Property

A corporation must recognize gain or loss on the distribution of its assets in the complete liquidation of its stock. For purposes of determining gain or loss, the

distributed assets are valued at fair market value. Exceptions to this rule apply to a liquidation of a subsidiary and to a distribution that is made according to a plan of reorganization.

Foreign Corporations

A corporation that files a U.S. tax return must file Form 966 if required under section 6043(a). Foreign corporations that are not required to file Form 1120-F, U.S. Income Tax Return of a Foreign Corporation, or any other U.S. tax return are generally not required to file Form 966.

U.S. shareholders of foreign corporations may be required to report information regarding a corporate dissolution or liquidation. See Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations, and its instructions for more information.

Address

Include the suite, room, or other unit number after the street address. If the post office does not deliver mail to the street address and the corporation has a P.O. box, enter the box number instead.

Line 5

If the immediately preceding tax return was filed electronically, enter *"e-file"* on line 5.

Line 7e

If the consolidated return was filed electronically, enter *"e-file"* on line 7e.

Line 10

Identify the code section under which the corporation is to be dissolved or liquidated. For example, enter "section 331" for a complete or partial liquidation of a corporation or enter "section 332" for a complete liquidation of a subsidiary corporation that meets the requirements of section 332(b).

Signature

The return must be signed and dated by the president, vice president, treasurer, assistant treasurer, chief accounting officer, or any other corporate officer (such as tax officer) authorized to sign. If a return is filed on behalf of a corporation by a receiver, trustee, or assignee, the fiduciary must sign the return, instead of the corporate officer.

Paperwork Reduction Act Notice

We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws and to allow us to figure and collect the right amount of tax.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated burden for business taxpayers filing this form is approved under OMB control number 1545-0123 and is included in the estimates shown in the instructions for their business income tax return.

If you have comments concerning the accuracy of these time estimates or suggestions for making this form simpler, we would be happy to hear from you. You can send us comments from *www.irs.gov/formspubs/*. Click on "More Information" and then on "Give us feedback." Or you can write to the Internal Revenue Service, Tax Forms and Publications, 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. Do not send the tax form to this address. Instead, see *Where To File,* earlier.

NEW YORK STATE DEPARTMENT OF STATE
DIVISION OF CORPORATIONS, STATE RECORDS AND UNIFORM COMMERCIAL CODE

FILING RECEIPT

ENTITY NAME :	WORLD EDITIONS LLC
DOCUMENT TYPE :	SURRENDER OF AUTHORITY
ENTITY TYPE :	FOREIGN LIMITED LIABILITY COMPANY
DOS ID :	5279649
FILE DATE :	11/13/2023
FILE NUMBER :	231114003022
TRANSACTION NUMBER :	202311130003581-2625381
EXISTENCE DATE :	02/02/2018
DURATION/DISSOLUTION :	PERPETUAL
COUNTY :	KINGS
SERVICE OF PROCESS ADDRESS :	THE LLC 159 20TH ST., APT. 1B BROOKLYN, NY, 11232, USA
ELECTRONIC SERVICE OF PROCESS EMAIL ADDRESS :	N/A
REGISTERED AGENT :	REGISTERED AGENT REVOKED
FILER :	ACCUMERA LLC 911 CENTRAL AVE., #101, ALBANY, NY, 12206, USA
SERVICE COMPANY :	ACCUMERA LLC
SERVICE COMPANY ACCOUNT :	HW
CUSTOMER REFERENCE :	50154

You may verify this document online at : http://ecorp.dos.ny.gov
AUTHENTICATION NUMBER : 100004664262

TOTAL FEES:	$90.00	TOTAL PAYMENTS RECEIVED:	$90.00
FILING FEE:	$60.00	CASH:	$0.00
CERTIFICATE OF STATUS:	$0.00	CHECK/MONEY ORDER:	$0.00
CERTIFIED COPY:	$0.00	CREDIT CARD:	$0.00
COPY REQUEST:	$5.00	DRAWDOWN ACCOUNT:	$90.00
EXPEDITED HANDLING:	$25.00	REFUND DUE:	$0.00

Certificate of Surrender of Authority
of

World Editions LLC

(Pursuant to Section 806 of the Limited Liability Company Law)

1. The name of the limited liability company as it appears on the index of records in the Department of State is:
   World Editions LLC

2. The jurisdiction of organization of the foreign limited liability company is **Delaware**.

3. The date on which its certificate of authority to do business in this state was filed with the Department of State is **February 2, 2018**

4. The limited liability company surrenders its authority to do business in New York State.

5. The limited liability company hereby revokes the authority of its registered agent, if any, previously designated and it hereby consents that process against it in any action or special proceeding based upon any liability or obligation incurred by it within this state before the filing of the certificate of surrender may be served on the Secretary of State in the manner set forth in Article 3 of the Limited Liability Company Law.

6. The address within or without this state to which the Secretary of State shall mail a copy of any process against the limited liability company served upon him or her is:

   159 20th St., Apt. 1B, Brooklyn, NY 11232

In Witness Whereof, this certificate has been subscribed by the undersigned who affirms that the statements made herein are true under the penalties of perjury.

Dated: **November 13, 2023**

/s/ Judith Uijterlinde
Judith Uijterlinde
Manager

Filed with the NYS Department of State on 11/13/2023
Filing Number: 231114003022 DOS ID: 5279649

Certificate of Surrender of Authority
of

World Editions LLC

(Pursuant to Section 806 of the Limited Liability Company Law)

Filer:

Accumera LLC
911 Central Avenue, #101
Albany, NY 12206

Customer Reference #50154

Filed with the NYS Department of State on 11/13/2023
Filing Number: 231114003022 DOS ID: 5279649