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

2025

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A This return/report is for:
- [ ] a multiemployer plan
- [ ] a multiple-employer plan (Filers checking this box must provide 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)

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
GIBSON GREETINGS, INC. RETIREMENT INCOME PLAN

1b Three-digit plan number (PN) ▶ 015

1c Effective date of plan 01/01/1970

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)
AMERICAN GREETINGS CORPORATION

ONE AMERICAN BOULEVARD
CLEVELAND, OH 44145

2b Employer Identification Number (EIN)
34-0065325

2c Plan Sponsor's telephone number
216-252-7300

2d Business code (see instructions)
323100

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.	10/15/2026	ERIN LOSCHETTER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2026	CHRIS HAFFKE
	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:	**4b**	EIN
a	Sponsor's name	**4d**	PN
c	Plan Name		

5	Total number of participants at the beginning of the plan year	**5**	902
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)**	7
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	6
b	Retired or separated participants receiving benefits	**6b**	638
c	Other retired or separated participants entitled to future benefits	**6c**	125
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	769
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	95
f	Total. Add lines **6d** and **6e**.	**6f**	864
g(1)	Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	**6g(1)**	
g(2)	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g(2)**	
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	0
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 Characteristic Codes in the instructions:

1A 1I

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

9a Plan funding arrangement (check all that apply)		**9b** Plan benefit arrangement (check all that apply)	
(1) [ ]	Insurance	**(1)** [ ]	Insurance
(2) [ ]	Code section 412(e)(3) insurance contracts	**(2)** [ ]	Code section 412(e)(3) insurance contracts
(3) [X]	Trust	**(3)** [X]	Trust
(4) [ ]	General assets of the sponsor	**(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)** [X] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- **(4)** [ ] **DCG** (Individual Plan Information) – Number Attached _____
- **(5)** [ ] **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] **A** (Insurance Information) – Number Attached 0
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [ ] **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 2025 Form M-1 annual report. If the plan was not required to file the 2025 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 SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

▶ **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
GIBSON GREETINGS, INC. RETIREMENT INCOME PLAN

B Three-digit plan number (PN) ▶ 015

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
AMERICAN GREETINGS CORPORATION

D Employer Identification Number (EIN)
34-0065325

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2025

2 Assets:

a Market value	**2a**	47816506
b Actuarial value	**2b**	46422644

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	736	44560716	44560716
b For terminated vested participants	159	6990358	6990358
c For active participants	7	30125	63838
d Total	902	51581199	51614912

4 If the plan is in at-risk status, check the box and complete lines (a) and (b) [ ]

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**	5.31 %
6 Target normal cost		
a Present value of current plan year accruals	**6a**	0
b Expected plan-related expenses	**6b**	511592
c Target normal cost	**6c**	511592

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

09/23/2026
Date

GAIL R. STEWARD
Type or print name of actuary

26-06835
Most recent enrollment number

USI CONSULTING GROUP
Firm name

216-875-1900
Telephone number (including area code)

1001 LAKESIDE AVENUE, SUITE 1200
CLEVELAND, OH 44114
Address of the firm

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	646387
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	215305
9	Amount remaining (line 7 minus line 8)	0	431082
10	Interest on line 9 using prior year's actual return of 6.32 %	0	27244
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	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 4.98 %		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		
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	458326

Part III Funding Percentages

14	Funding target attainment percentage	14	89.05 %
15	Adjusted funding target attainment percentage	15	91.57 %
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	100.35 %
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
09/15/2026	633601	0			
			Totals ► 18(b)	633601	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	580130

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:

	1st segment:	2nd segment:	3rd segment:	
a Segment rates:	5.07 %	5.31 %	5.50 %	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	4
22 Weighted average retirement age	**22**	64

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**	511592
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	5650594	526864
b Waiver amortization installment	0	0

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**	1038456

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	458326	458326

36 Additional cash requirement (line 34 minus line 35)	**36**	580130
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	580130
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	**38a**	0
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	
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

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.**	**2025** **This Form is Open to Public Inspection.**

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
GIBSON GREETINGS, INC. RETIREMENT INCOME PLAN

B Three-digit plan number (PN) ▶ 015

C Plan sponsor's name as shown on line 2a of Form 5500
AMERICAN GREETINGS CORPORATION

D Employer Identification Number (EIN)
34-0065325

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

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(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)

USI CONSULTING GROUP

06-1053228

(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?
11 50	NONE	86739	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CREATIVE PLANNING

84-4519624

(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 50	NONE	30000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MORGAN, LEWIS, BOCKIUS LLP

23-0891050

(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?
29 50	NONE	24679	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
(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.	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(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.	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(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.	

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

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(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: PAUL J. GIBBONS
b EIN: 06-1053228
c Position: ENROLLED ACTUARY
d Address: 1001 LAKESUDE AVE
SUITE 1200
CLEVELAND, OH 44114
e Telephone: 216-875-1900

Explanation: THE ENROLLED ACTUARY ASSIGNMENT WAS CHANGED DUE TO THE RETIREMENT OF THE PRIOR ENROLLED ACTUARY.

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 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

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
GIBSON GREETINGS, INC. RETIREMENT INCOME PLAN

B Three-digit plan number (PN) ▶ 015

C Plan sponsor's name as shown on line 2a of Form 5500
AMERICAN GREETINGS CORPORATION

D Employer Identification Number (EIN)
34-0065325

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	25000	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	633601
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	3941	7739
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1732351	3359189
(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)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(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)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(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)	46055214	44602216
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
1e Buildings and other property used in plan operation	1e		
1f Total assets (add all amounts in lines 1a through 1e)	1f	47816506	48602745
Liabilities			
1g Benefit claims payable	1g		
1h Operating payables	1h	22123	13604
1i Acquisition indebtedness	1i		
1j Other liabilities	1j		
1k Total liabilities (add all amounts in lines 1g through1j)	1k	22123	13604
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	47794383	48589141

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)	633601	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		633601
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	47775	
(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)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		47775
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	1770136	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		1770136
(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)		
(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)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		4112792
c Other income	2c		-22690
d Total income. Add all **income** amounts in column (b) and enter total	2d		6541614
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	5302814	
(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)		5302814
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	30000	
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)	86739	
(8) Legal fees	2i(8)	24679	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	302624	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		444042
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		5746856
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		794758
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) [X] Unmodified **(2)** [ ] Qualified **(3)** [ ] Disclaimer **(4)** [ ] Adverse

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

(1) [X] DOL Regulation 2520.103-8 **(2)** [X] DOL Regulation 2520.103-12(d) **(3)** [ ] neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

(1) Name: BDO USA, P.C. **(2)** EIN: 13-5381590

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) [ ] This form is filed for a CCT, PSA, DCG 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. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

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	
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		5000000
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**			
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 [X] No

If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

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

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

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ..... [X] Yes [ ] No [ ] Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 556802.

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

2025

This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
GIBSON GREETINGS, INC. RETIREMENT INCOME PLAN

B Three-digit plan number (PN) ▶ 015

C Plan sponsor's name as shown on line 2a of Form 5500
AMERICAN GREETINGS CORPORATION

D Employer Identification Number (EIN)
34-0065325

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): 34-1974250

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** 2

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 (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment)	**14a**	
b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14b**	
c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

19 If the total number of participants is 1,000 or more, complete lines (a) and (b):

a Enter the percentage of plan assets held as:
Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____%
High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____%

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:
☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more

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._____

Part VII IRS Compliance Questions

21a 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

21b 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

22 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 ___/___/_____ (MM/DD/YYYY) and the Opinion Letter serial number_____.

Gibson Greetings, Inc.
Retirement Income Plan

Financial Statements and
ERISA-Required Supplemental Schedules
Years Ended December 31, 2025 and 2024

The report accompanying these financial statements was issued by BDO USA, P.C., a Virginia professional corporation, and the U.S. member of BDO International Limited, a UK company limited by guarantee.

Gibson Greetings, Inc. Retirement Income Plan

Financial Statements and ERISA-Required Supplemental Schedules
Years Ended December 31, 2025 and 2024

Gibson Greetings, Inc. Retirement Income Plan

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Cleveland, OH 44114

Independent Auditor's Report

To the Benefits Advisory Committee
Gibson Greetings, Inc. Retirement Income Plan
Cleveland, Ohio

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

We have performed audits of the financial statements of Gibson Greetings, Inc. Retirement Income Plan (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C). The financial statements comprise the statements of net assets available for benefits as of December 31, 2025 and 2024, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under ERISA (ERISA Section 103(a)(3)(C) audit). As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency (qualified institution), provided that the investment information is prepared and certified to by the qualified institution in accordance with 29 CFR 2520.103-5 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

Management has obtained certifications from a qualified institution as of December 31, 2025 and 2024, and for the years then ended, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and the procedures performed as described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report:

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

BDO USA, P.C., a Virginia professional corporation, is the U.S. member of BDO International Limited, a UK company limited by guarantee, and forms part of the international BDO network of independent member firms.

BDO is the brand name for the BDO network and for each of the BDO Member Firms.



Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with U.S. GAAP, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

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

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the *Scope and Nature of the ERISA Section 103(a)(3)(C) Audit* section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if, there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

Our audits did not extend to the certified investment information, except for obtaining and reading the certifications, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of U.S. GAAP.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with U.S. GAAP.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Other Matter - Supplemental Schedules Required by ERISA

The ERISA-required supplemental schedule Schedule H, Line 4(i) – Schedule of Assets (Held at End of Year) as of December 31, 2025 and the ERISA-required supplemental Schedule H, Line 4(j) – Schedule of Reportable Transactions for the year ended December 31, 2025, are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion:

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

BDO USA, P.C.

October 15, 2026

Financial Statements

Gibson Greetings, Inc. Retirement Income Plan

Statements of Net Assets Available for Benefits

December 31,	**2025**	2024
Assets		
Investments, at fair value		
Money market fund	**$ 3,359,189**	$ 1,732,351
Equity funds	**12,538,299**	15,134,318
Mutual funds	**32,063,917**	30,920,896
Total Investments	**47,961,405**	47,787,565
Cash and cash equivalents	**-**	25,000
Employer contributions receivable	**633,601**	-
Accrued income	**7,739**	3,941
Total Assets	**48,602,745**	47,816,506
Liabilities		
Accrued expenses	**13,604**	22,123
Total Liabilities	**13,604**	22,123
Net Assets Available for Benefits	**$ 48,589,141**	$ 47,794,383

See accompanying notes to financial statements.

Gibson Greetings, Inc. Retirement Income Plan

Statements of Changes in Net Assets Available for Benefits

Year ended December 31,	**2025**	2024
Additions		
Investment income:		
Net appreciation in fair value of investments	**$ 4,087,792**	$ 1,582,772
Dividends and interest	**1,820,221**	1,781,668
Total Investment Income	**5,908,013**	3,364,440
Contributions - Employer	**633,601**	-
Total Additions	**6,541,614**	3,364,440
Deductions		
Purchase of annuity contracts	**-**	15,601,930
Benefits paid to participants	**5,302,814**	5,787,620
Administrative expenses	**444,042**	575,778
Total Deductions	**5,746,856**	21,965,328
Net Increase (Decrease)	**794,758**	(18,600,888)
Net Assets Available for Benefits, beginning of year	**47,794,383**	66,395,271
Net Assets Available for Benefits, end of year	**$ 48,589,141**	$ 47,794,383

See accompanying notes to financial statements.

1. Description of the Plan

The following description of the Gibson Greetings, Inc. Retirement Income Plan provides only general information. Participants should refer to the Plan Document for a more complete description.

General

The Plan is a non-contributory defined benefit plan, which covered substantially all employees of Gibson Greetings, Inc. (the Company) before it was frozen. The Plan provides for retirement, death, and disability benefits.

On March 9, 2000, the Company was acquired by American Greetings Corporation (Plan Sponsor or Plan Administrator) and all participants in the Plan as of that date became fully vested. Effective December 31, 2000, the Plan Sponsor elected to freeze the future accrual of benefits under the Plan. Effective February 28, 2007, the Company was merged into the Plan Sponsor.

The Plan Sponsor has voluntarily agreed to contribute such amounts as are necessary to provide assets sufficient to meet the benefits to be paid to the Plan participants. The Plan Sponsor's present intention is to make contributions sufficient to fund the Plan pursuant to (ERISA), as amended. The Plan has met the ERISA minimum funding requirements.

In February 2024, the Plan was amended to authorize the use of Plan assets to purchase annuity contracts for the benefit of certain Plan participants. Subsequent to the purchase of an annuity contract, the annuitized individual or beneficiary is no longer deemed a participant and relinquishes all rights previously provided under the Plan. As a result of this amendment, the Plan assets and corresponding benefit obligation related to the Plan decreased by $15.6 million.

2. Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared in accordance with accounting principles generally accepted in the United States of America (GAAP).

Cash and Cash Equivalents

The Plan considers highly liquid investments with maturities of three months or less as cash equivalents.

Benefit Payments

Benefit payments are recorded when paid to participants.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Investment Committee determines the Plan's valuation policies

utilizing information provided by its investment advisers. See Note 4 for discussion of fair value measurements.

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

Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits (see Note 6) are those estimated future periodic payments, including lump-sum distributions, that are attributable under the Plan's provisions to services rendered by eligible employees through December 31, 2000 (date benefits were frozen). Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, and (b) present employees or their beneficiaries. Benefits for retired or terminated employees or their beneficiaries are based on an employee's average compensation (as defined) during their highest 60 months during the most recent calendar year in which they had an hour of service and the nine preceding calendar years prior to the earlier of retirement, termination, or December 31, 2000. The accumulated plan benefits for active employees are based on their average compensation during the five years preceding December 31, 2000. Benefits are payable under all circumstances including retirement, death, disability, and termination of employment, to the extent they are deemed attributable to employee service rendered to the valuation date.

Use of Estimates

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

Plan Expenses

Administrative expenses of the Plan are paid by the Plan, except for the fees required for the Plan's annual audit, which are paid by the Plan Sponsor.

Subsequent Events

The Plan's management has evaluated subsequent events through October 15, 2026, which is the date the financial statements were available to be issued.

3. Certified Investment Information

The Plan Administrator has elected the method of annual reporting compliance permitted by ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, KeyBank National Association, a qualified institution, has certified that the following investment information included in the accompanying financial statements and ERISA-required supplemental schedules are complete and accurate:

- Investments shown in the statements of net assets available for benefits as of December 31, 2025 and 2024.

- Net appreciation, dividend, and interest income as shown on the statements of changes in net assets available for benefits for the years ended December 31, 2025 and 2024.
- Investment information included in the Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) as of December 31, 2025, as shown on the ERISA-required supplemental schedules.

At the request of the Plan Administrator, the Plan's independent auditors did not perform auditing procedures with respect to this certified investment information, except for comparing such certified investment information to the related investment information included in the financial statements and ERISA-required supplemental schedules.

4. Fair Value Measurements

Accounting Standards Codification (ASC) 820, *Fair Value Measurement*, provides for 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 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 fair value measurement.

A financial instrument's 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 maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

There have been no changes in the methodologies used at December 31, 2025 and 2024. The following is a description of the valuation methodologies used for assets measured at fair value:

The Plan's valuation methodology used to measure the fair value of the equity funds and mutual funds were derived from quoted market prices on the active market on which the funds are traded and are classified as Level 1. Mutual funds are valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are private placement and are registered with the Securities

and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price.

The money market funds are classified as Level 2 as substantially all of the fund's investments were determined using amortized cost.

The following tables summarize the assets measured at fair value on a recurring basis as of the measurement date, and the basis for that measurement, by level within the fair value hierarchy:

December 31, 2025

	Level 1	Level 2	Level 3	Total
Equity funds	$ 12,538,299	$ -	$ -	$ 12,538,299
Money market funds	-	3,359,189	-	3,359,189
Mutual funds	32,063,917	-	-	32,063,917
Balance	$ 44,602,216	$ 3,359,189	$ -	$ 47,961,405

December 31, 2024

	Level 1	Level 2	Level 3	Total
Equity funds	$ 15,134,318	$ -	$ -	$ 15,134,318
Money market funds	-	1,732,351	-	1,732,351
Mutual funds	30,920,896	-	-	30,920,896
Balance	$ 46,055,214	$ 1,732,351	$ -	$ 47,787,565

5. Plan Termination

Although it has not expressed any intention to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to provisions set forth in ERISA.

Under provisions of ERISA, if the Plan is terminated, the Company may be obligated to make termination payments to the Plan and participants may be eligible for continuation of benefits under insurance provided by the Pension Benefit Guaranty Corporation (PBGC).

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal-age retirement benefits, early retirement benefits, and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the Plan and the amount of benefit protection is subject to certain limitations.

In the event of a complete termination of the Plan, the assets then remaining in the Plan, after providing for expenses of administration, shall be allocated, to the extent that they shall be sufficient, for the purpose of funding the accrued benefits to the date of termination of the Plan for all pensioners, participants, vested former participants, and beneficiaries in the manner and order of precedence required under the terms of Section 4044 of ERISA. Any funds remaining in the Plan after funding in full all of the accrued benefits to the termination date of the Plan, shall revert to the Company. In the event of a partial termination of the Plan, the portion of the assets of the Plan relating to the terminated portion of the Plan shall be allocated as aforesaid for the purpose

of funding the accrued benefits of pensioners, participants, vested former participants, and beneficiaries whose benefit rights are affected by such partial termination.

6. Accumulated Plan Benefits

The actuarial present value of accumulated plan benefits is determined by an independent actuary and is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits earned by the participants to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal or retirement) between the valuation date and the expected dates of payment. The computations of the actuarial present value of accumulated plan benefits were made as of January 1, 2025. Had the valuation been performed as of December 31, there would be no material differences.

Significant assumptions underlying the actuarial computations are as follows:

January 1, 2025	
Discount Rate	6.00%
Funding Assumption	Unit Credit funding method as required by the Pension Protection Act of 2006
Retirement Age	Rates of retirement varying by age (age 55 to 65)
Mortality Table	For funding purposes mortality as provided in Notice 2024-42 male and female, with different rates for annuitants and non-annuitants was applied (as prescribed by IRC 430). For ASC 960, Pri-2012 Total Dataset Amount-Weighted Mortality projected with Scale MP-2021 with separate rates for employees, retirees, disableds, and contingent survivors was applied.

The accumulated plan benefit information, as of the beginning of each Plan year, is as follows:

January 1, 2025	
Actuarial present value of accumulated plan benefits:	
Vested benefits:	
Participants and beneficiaries currently receiving payments	$ 43,121,472
Other participants	6,683,113
	49,804,585
Non-vested benefits	31,674
	$ 49,836,259

The change in actuarial present value of accumulated plan benefits for the year beginning January 1, 2025 is as follows:

Actuarial Present Value of Accumulated Plan Benefits, January 1, 2024	$	66,009,926
Changes during the year due to:		
Annuity purchase		(15,601,930)
Cash		159,858
Actuarial gain		1,266,529
Increase due to decrease in the discount period		3,789,496
Actual benefits paid		(5,787,620)
Net Decrease		(16,173,667)
Actuarial Present Value of Accumulated Plan Benefits, January 1, 2025	$	49,836,259

These actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

7. Income Tax Status

The Plan has received a determination letter from the Internal Revenue Service (IRS) dated April 6, 2017, stating that the Plan is qualified under Section 401(a) of the Internal Revenue Code of 1986 as amended (the Code) and, therefore, the related trust is exempt from taxation. Once qualified, the Plan is required to operate in conformity with the Code to maintain its qualification. Therefore, no provision for income taxes has been included in the Plan's financial statements.

GAAP requires the Plan Administrator to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits in progress or planned audits for any tax periods.

8. Related Party and Parties-in-Interest Transactions

Fees paid by the Plan to the trustee totaled $86,739 and $32,981 for the years ended December 31, 2025 and 2024, respectively.

9. 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 such changes could materially affect the amounts reported in the statements of net assets available for benefits.

Plan contributions are determined, and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates and employee demographics, all of which are subject to change. Due to the uncertainties inherent in the

estimation and assumption processes, it is at least reasonably possible that changes in these estimates and assumptions in the near term could materially affect the amounts reported and disclosed in the financial statements.

ERISA-Required Supplemental Schedules

Detailed Schedule of Holdings - Principal Assets

Base Currency: USD

Security Description Portfolio Number	Asset Number Yield on Market Units/Par	Unit Price Price Date Market Value	FV Level* % of MV	Avg Unit Cost Accrued Income	Book Value Revalued Cost	Unrealized Gain/Loss On Book Value On Revalued Cost
Equity						
Mutual Funds						
VANGUARD TOTAL STK MKT INDX FD OPEN-END FUND INSTL SHS	922908801 1.12%	163.230	Level2			
1000679.2	37,968.0410	6,197,523.33	12.92%	79.07 0.00	3,002,252.26 5,359,884.93	3,195,271.07 837,638.40
Total Mutual Funds		**6,197,523.33**	**12.92%**	**N/A** **0.00**	**3,002,252.26** **5,359,884.93**	**3,195,271.07** **837,638.40**
Non-US Mutual Funds						
VANGUARD TOTAL INTL STK INDEX FD OPEN-END FUND INSTL CL	921909784 3.17%	162.090	Level2			
1000679.2	39,118.8560	6,340,775.37	13.22%	109.58 0.00	4,286,657.36 4,991,903.31	2,054,118.01 1,348,872.06
Total Non-US Mutual Funds		**6,340,775.37**	**13.22%**	**N/A** **0.00**	**4,286,657.36** **4,991,903.31**	**2,054,118.01** **1,348,872.06**
Total Equity		**12,538,298.70**	**26.14%**	**N/A** **0.00**	**7,288,909.62** **10,351,788.24**	**5,249,389.08** **2,186,510.46**
Fixed Income						
Mutual Funds						
PIMCO INV GRADE CREDIT BOND FD INST $0.409	722005816 4.68%	9.200	Level2			
1000679.2	2,773,027.7680	25,511,855.47	53.19%	8.89 0.00	24,651,807.74 24,625,008.16	860,047.73 886,847.31
PIMCO LONG TERM US GOVERNMENT BOND OPEN-END FUND INSTL CL	693390205 4.23%	14.010	Level2			
1000679.2	235,951.8810	3,305,685.85	6.89%	14.43 0.00	3,405,588.54 3,230,841.60	-99,902.69 74,844.25
PIMCO MODERATE DURATION FUND OPEN-END FUND INSTL CL	693390593 4.42%	9.520	Level2			

Detailed Schedule of Holdings - Principal Assets (Continued)

Base Currency: USD

Security Description Portfolio Number	Asset Number Yield on Market Units/Par	Unit Price Price Date Market Value	FV Level* % of MV	Avg Unit Cost Accrued Income	Book Value Revalued Cost	Unrealized Gain/Loss On Book Value On Revalued Cost
1000679.2	341,005.8950	3,246,376.12	6.77%	9.16 0.00	3,122,072.21 3,112,129.50	124,303.91 134,246.62
Total Mutual Funds		**32,063,917.44**	**66.85%**	**N/A** **0.00**	**31,179,468.49** **30,967,979.26**	**884,448.95** **1,095,938.18**
Total Fixed Income		**32,063,917.44**	**66.85%**	**N/A** **0.00**	**31,179,468.49** **30,967,979.26**	**884,448.95** **1,095,938.18**
Cash and Cash Equivalents						
Money Market Funds						
FEDERATED GOVERNMENT OBLIGATIONS INSTITUTIONAL SHARES	3140000V3 3.67%	1.000	Level n/a			
1000679.1	3,359,188.9200	3,359,188.92	7.00%	1.00 7,496.66	3,359,188.92 3,359,188.92	0.00 0.00
1000679.2	0.0000	0.00	0.00%	0.00 242.52	0.00 0.00	0.00 0.00
Total for Asset	3,359,188.9200	3,359,188.92	7.00%	1.00 7,739.18	3,359,188.92 3,359,188.92	0.00 0.00
Total Money Market Funds		**3,359,188.92**	**7.00%**	**N/A** **7,739.18**	**3,359,188.92** **3,359,188.92**	**0.00** **0.00**
Total Cash and Cash Equivalents		**3,359,188.92**	**7.00%**	**N/A** **7,739.18**	**3,359,188.92** **3,359,188.92**	**0.00** **0.00**
Net Holdings		**47,961,405.06**	**100.00%**	**N/A** **7,739.18**	**41,827,567.03** **44,678,956.42**	**6,133,838.03** **3,282,448.64**
Total Holdings Principal Assets		**$47,961,405.06**	**100.00%**	**N/A** **$7,739.18**	**$41,827,567.03** **$44,678,956.42**	**$6,133,838.03** **$3,282,448.64**
Total Holdings		**$47,961,405.06**			**$41,827,567.03** **$44,678,956.42**	**$6,133,838.03** **$3,282,448.64**
Accrued Income On						
Principal Holdings		7,739.18		7,739.18	7,739.18	
Total Accrued Income		**7,739.18**		**7,739.18**	**7,739.18**	

Detailed Schedule of Holdings - Principal Assets (Continued)

Base Currency: USD

Security Description Portfolio Number	Asset Number Yield on Market Units/Par	Unit Price Price Date Market Value	FV Level* % of MV	Avg Unit Cost Accrued Income	Book Value Revalued Cost	Unrealized Gain/Loss On Book Value On Revalued Cost
Total Holdings with		$47,969,144.24			$41,835,306.21	$6,133,838.03
Accrued Income					$44,686,695.60	$3,282,448.64

5% Report by Asset - Aggregate Transactions

Valuation: $47,812,564.85 **Threshold:** $2,390,628.24 **Base Currency: USD**

Asset Number / Tran Type	Settle Dt	Asset Description / Units/Par	Purchase Cost/ Sale Proceeds	Broker Commission	Other Expense	Book Value	Previous Annual Market	Net Gain/Loss on Market
3140000V3		**FEDERATED GOVERNMENT OBLIGATIONS INSTITUTIONAL SHARES**						
Purchase	01/02/2025	3,643.8500	3,643.85	0.00	0.00	3,643.85	3,643.85	0.00
Sale	01/02/2025	-47,251.5400	47,251.54	0.00	0.00	-47,251.54	-47,251.54	0.00
Purchase	01/03/2025	1,288,110.4200	1,288,110.42	0.00	0.00	1,288,110.42	1,288,110.42	0.00
Sale	01/03/2025	-1,685,099.4300	1,685,099.43	0.00	0.00	-1,685,099.43	-1,685,099.43	0.00
Purchase	01/10/2025	2,767.4400	2,767.44	0.00	0.00	2,767.44	2,767.44	0.00
Purchase	01/14/2025	419.6700	419.67	0.00	0.00	419.67	419.67	0.00
Purchase	01/15/2025	480.2600	480.26	0.00	0.00	480.26	480.26	0.00
Sale	01/16/2025	-419.6700	419.67	0.00	0.00	-419.67	-419.67	0.00
Purchase	01/22/2025	1,417.3600	1,417.36	0.00	0.00	1,417.36	1,417.36	0.00
Sale	01/23/2025	-10,946.9300	10,946.93	0.00	0.00	-10,946.93	-10,946.93	0.00
Purchase	01/27/2025	717.5800	717.58	0.00	0.00	717.58	717.58	0.00
Purchase	01/27/2025	2,310.0100	2,310.01	0.00	0.00	2,310.01	2,310.01	0.00
Sale	01/28/2025	-11,656.7200	11,656.72	0.00	0.00	-11,656.72	-11,656.72	0.00
Purchase	02/03/2025	609.2400	609.24	0.00	0.00	609.24	609.24	0.00
Sale	02/03/2025	-440,042.7300	440,042.73	0.00	0.00	-440,042.73	-440,042.73	0.00
Purchase	02/05/2025	305.9200	305.92	0.00	0.00	305.92	305.92	0.00
Purchase	02/07/2025	449.3900	449.39	0.00	0.00	449.39	449.39	0.00
Sale	02/12/2025	-2,574.8400	2,574.84	0.00	0.00	-2,574.84	-2,574.84	0.00
Sale	02/18/2025	-18,495.3600	18,495.36	0.00	0.00	-18,495.36	-18,495.36	0.00
Sale	02/26/2025	-3,326.6700	3,326.67	0.00	0.00	-3,326.67	-3,326.67	0.00
Purchase	03/03/2025	21.0700	21.07	0.00	0.00	21.07	21.07	0.00
Sale	03/03/2025	-438,051.5100	438,051.51	0.00	0.00	-438,051.51	-438,051.51	0.00
Sale	03/05/2025	-3,214.9000	3,214.90	0.00	0.00	-3,214.90	-3,214.90	0.00
Purchase	03/06/2025	305.9200	305.92	0.00	0.00	305.92	305.92	0.00
Sale	03/07/2025	-1,628.4200	1,628.42	0.00	0.00	-1,628.42	-1,628.42	0.00
Purchase	03/10/2025	701.5000	701.50	0.00	0.00	701.50	701.50	0.00

5% Report by Asset - Aggregate Transactions (Continued)

Valuation: $47,812,564.85 **Threshold:** $2,390,628.24 **Base Currency: USD**

Asset Number / Tran Type	Settle Dt	Asset Description / Units/Par	Purchase Cost/ Sale Proceeds	Broker Commission	Other Expense	Book Value	Previous Annual Market	Net Gain/Loss on Market
3140000V3		**FEDERATED GOVERNMENT OBLIGATIONS INSTITUTIONAL SHARES**						
Sale	03/17/2025	-701.5000	701.50	0.00	0.00	-701.50	-701.50	0.00
Sale	03/18/2025	-338.3700	338.37	0.00	0.00	-338.37	-338.37	0.00
Purchase	03/19/2025	639.1500	639.15	0.00	0.00	639.15	639.15	0.00
Purchase	03/20/2025	1,350,705.4200	1,350,705.42	0.00	0.00	1,350,705.42	1,350,705.42	0.00
Sale	03/20/2025	-6,584.1700	6,584.17	0.00	0.00	-6,584.17	-6,584.17	0.00
Purchase	04/01/2025	15.1900	15.19	0.00	0.00	15.19	15.19	0.00
Sale	04/01/2025	-439,531.0600	439,531.06	0.00	0.00	-439,531.06	-439,531.06	0.00
Purchase	04/04/2025	361.0200	361.02	0.00	0.00	361.02	361.02	0.00
Purchase	04/11/2025	344.4100	344.41	0.00	0.00	344.41	344.41	0.00
Sale	04/14/2025	-425.6500	425.65	0.00	0.00	-425.65	-425.65	0.00
Purchase	04/16/2025	639.6000	639.60	0.00	0.00	639.60	639.60	0.00
Sale	04/17/2025	-639.6000	639.60	0.00	0.00	-639.60	-639.60	0.00
Sale	04/28/2025	-7,734.5700	7,734.57	0.00	0.00	-7,734.57	-7,734.57	0.00
Sale	04/29/2025	-2,491.8000	2,491.80	0.00	0.00	-2,491.80	-2,491.80	0.00
Sale	05/01/2025	-439,357.6900	439,357.69	0.00	0.00	-439,357.69	-439,357.69	0.00
Purchase	05/05/2025	2,012.1100	2,012.11	0.00	0.00	2,012.11	2,012.11	0.00
Purchase	05/07/2025	991.3300	991.33	0.00	0.00	991.33	991.33	0.00
Sale	05/08/2025	-3,326.6700	3,326.67	0.00	0.00	-3,326.67	-3,326.67	0.00
Sale	05/14/2025	-8,224.0000	8,224.00	0.00	0.00	-8,224.00	-8,224.00	0.00
Sale	05/15/2025	-7,186.9800	7,186.98	0.00	0.00	-7,186.98	-7,186.98	0.00
Purchase	05/27/2025	778.5800	778.58	0.00	0.00	778.58	778.58	0.00
Sale	06/02/2025	-452,394.2500	452,394.25	0.00	0.00	-452,394.25	-452,394.25	0.00
Sale	06/03/2025	-1,584.0000	1,584.00	0.00	0.00	-1,584.00	-1,584.00	0.00
Sale	06/04/2025	-381.9800	381.98	0.00	0.00	-381.98	-381.98	0.00
Purchase	06/12/2025	3,114.3200	3,114.32	0.00	0.00	3,114.32	3,114.32	0.00

5% Report by Asset - Aggregate Transactions (Continued)

Valuation: $47,812,564.85 **Threshold:** $2,390,628.24 **Base Currency: USD**

Asset Number / Tran Type	Settle Dt	Asset Description / Units/Par	Purchase Cost/ Sale Proceeds	Broker Commission	Other Expense	Book Value	Previous Annual Market	Net Gain/Loss on Market
3140000V3		**FEDERATED GOVERNMENT OBLIGATIONS INSTITUTIONAL SHARES**						
Purchase	06/16/2025	1,565.1400	1,565.14	0.00	0.00	1,565.14	1,565.14	0.00
Sale	06/18/2025	-10,983.0000	10,983.00	0.00	0.00	-10,983.00	-10,983.00	0.00
Sale	06/20/2025	-2,519.7000	2,519.70	0.00	0.00	-2,519.70	-2,519.70	0.00
Purchase	06/26/2025	1,370,329.9100	1,370,329.91	0.00	0.00	1,370,329.91	1,370,329.91	0.00
Sale	06/26/2025	-15.1900	15.19	0.00	0.00	-15.19	-15.19	0.00
Sale	07/01/2025	-437,554.2100	437,554.21	0.00	0.00	-437,554.21	-437,554.21	0.00
Sale	07/02/2025	-272.7400	272.74	0.00	0.00	-272.74	-272.74	0.00
Sale	07/03/2025	-3,404.3300	3,404.33	0.00	0.00	-3,404.33	-3,404.33	0.00
Purchase	07/08/2025	364.1200	364.12	0.00	0.00	364.12	364.12	0.00
Sale	07/30/2025	-7,500.0000	7,500.00	0.00	0.00	-7,500.00	-7,500.00	0.00
Purchase	07/31/2025	471.9000	471.90	0.00	0.00	471.90	471.90	0.00
Sale	08/01/2025	-435,594.4400	435,594.44	0.00	0.00	-435,594.44	-435,594.44	0.00
Sale	08/04/2025	-471.9000	471.90	0.00	0.00	-471.90	-471.90	0.00
Sale	08/14/2025	-8,190.0000	8,190.00	0.00	0.00	-8,190.00	-8,190.00	0.00
Sale	08/18/2025	-5,427.3400	5,427.34	0.00	0.00	-5,427.34	-5,427.34	0.00
Purchase	08/22/2025	444.6500	444.65	0.00	0.00	444.65	444.65	0.00
Sale	09/02/2025	-436,706.3500	436,706.35	0.00	0.00	-436,706.35	-436,706.35	0.00
Purchase	09/08/2025	305.5800	305.58	0.00	0.00	305.58	305.58	0.00
Sale	09/10/2025	-302,624.0000	302,624.00	0.00	0.00	-302,624.00	-302,624.00	0.00
Purchase	09/12/2025	441.9900	441.99	0.00	0.00	441.99	441.99	0.00
Sale	09/17/2025	-305.5800	305.58	0.00	0.00	-305.58	-305.58	0.00
Purchase	09/26/2025	2,174,234.0000	2,174,234.00	0.00	0.00	2,174,234.00	2,174,234.00	0.00
Sale	10/01/2025	-437,020.8900	437,020.89	0.00	0.00	-437,020.89	-437,020.89	0.00
Purchase	10/08/2025	624.2200	624.22	0.00	0.00	624.22	624.22	0.00
Sale	10/09/2025	-624.2200	624.22	0.00	0.00	-624.22	-624.22	0.00

5% Report by Asset - Aggregate Transactions (Continued)

Valuation: $47,812,564.85 **Threshold:** $2,390,628.24 **Base Currency: USD**

Asset Number / Tran Type	Settle Dt	Asset Description / Units/Par	Purchase Cost/ Sale Proceeds	Broker Commission	Other Expense	Book Value	Previous Annual Market	Net Gain/Loss on Market
3140000V3		**FEDERATED GOVERNMENT OBLIGATIONS INSTITUTIONAL SHARES**						
Sale	10/15/2025	-23,463.0000	23,463.00	0.00	0.00	-23,463.00	-23,463.00	0.00
Sale	10/17/2025	-5,343.4000	5,343.40	0.00	0.00	-5,343.40	-5,343.40	0.00
Purchase	10/23/2025	329.3700	329.37	0.00	0.00	329.37	329.37	0.00
Sale	11/03/2025	-432,543.7000	432,543.70	0.00	0.00	-432,543.70	-432,543.70	0.00
Purchase	11/05/2025	913.6800	913.68	0.00	0.00	913.68	913.68	0.00
Sale	11/07/2025	-253.3000	253.30	0.00	0.00	-253.30	-253.30	0.00
Sale	11/19/2025	-9,315.0000	9,315.00	0.00	0.00	-9,315.00	-9,315.00	0.00
Sale	11/24/2025	-4,954.0000	4,954.00	0.00	0.00	-4,954.00	-4,954.00	0.00
Sale	12/01/2025	-433,019.8000	433,019.80	0.00	0.00	-433,019.80	-433,019.80	0.00
Purchase	12/03/2025	1,074.7400	1,074.74	0.00	0.00	1,074.74	1,074.74	0.00
Sale	12/05/2025	-76.6100	76.61	0.00	0.00	-76.61	-76.61	0.00
Purchase	12/11/2025	2,447,256.0000	2,447,256.00	0.00	0.00	2,447,256.00	2,447,256.00	0.00
Purchase	12/12/2025	2,447,751.4100	2,447,751.41	0.00	0.00	2,447,751.41	2,447,751.41	0.00
Sale	12/12/2025	-2,447,256.0000	2,447,256.00	0.00	0.00	-2,447,256.00	-2,447,256.00	0.00
Purchase	12/16/2025	472.8900	472.89	0.00	0.00	472.89	472.89	0.00
Sale	12/17/2025	-3,526.8900	3,526.89	0.00	0.00	-3,526.89	-3,526.89	0.00
Purchase	12/22/2025	974.1900	974.19	0.00	0.00	974.19	974.19	0.00
53 Issue Sales								
40 Issue Purchases								

5% Report by Asset - Aggregate Transactions (Continued)

Valuation: $47,812,564.85 **Threshold:** $2,390,628.24 **Base Currency: USD**

Asset Number / Tran Type	Settle Dt	Asset Description / Units/Par	Purchase Cost/ Sale Proceeds	Broker Commission	Other Expense	Book Value	Previous Annual Market	Net Gain/Loss on Market
921909784		**VANGUARD TOTAL INTL STK INDEX FD OPEN-END FUND INSTL CL**						
Sale	03/19/2025	-6,588.3710	911,698.78	0.00	0.00	-712,089.40	-834,878.37	76,820.41
Purchase	03/24/2025	158.8280	21,645.06	0.00	0.00	21,645.06	21,645.06	0.00
Purchase	06/23/2025	387.5980	55,461.34	0.00	0.00	55,461.34	55,461.34	0.00
Sale	06/25/2025	-1,502.9500	219,250.36	0.00	0.00	-162,947.71	-190,673.73	28,576.63
Purchase	09/22/2025	255.8550	40,192.31	0.00	0.00	40,192.31	40,192.31	0.00
Sale	09/25/2025	-6,528.4270	1,016,215.00	0.00	0.00	-709,351.52	-829,199.19	187,015.81
Sale	12/10/2025	-7,549.2850	1,230,609.00	0.00	0.00	-820,273.67	-958,862.07	271,746.93
Purchase	12/22/2025	702.2020	112,464.75	0.00	0.00	112,464.75	112,464.75	0.00
4 Issue Sales								
4 Issue Purchases								

Valuation: $47,812,564.85 **Threshold:** $2,390,628.24 **Base Currency: USD**

Asset Number / Tran Type	Settle Dt	Asset Description / Units/Par	Purchase Cost/ Sale Proceeds	Broker Commission	Other Expense	Book Value	Previous Annual Market	Net Gain/Loss on Market
922908801		**VANGUARD TOTAL STK MKT INDX FD OPEN-END FUND INSTL SHS**						
Purchase	03/28/2025	189.2500	25,711.45	0.00	0.00	25,711.45	25,711.45	0.00
Sale	06/25/2025	-1,504.6000	219,250.36	0.00	0.00	-117,963.15	-212,196.35	7,054.01
Purchase	07/01/2025	156.9270	23,229.89	0.00	0.00	23,229.89	23,229.89	0.00
Sale	09/25/2025	-7,316.2690	1,158,019.00	0.00	0.00	-575,132.42	-1,031,979.36	126,039.64
Purchase	09/30/2025	125.0580	19,912.94	0.00	0.00	19,912.94	19,912.94	0.00
Sale	12/10/2025	-7,376.7480	1,216,647.00	0.00	0.00	-581,530.72	-1,040,880.75	175,766.25
Purchase	12/23/2025	106.5830	17,522.28	0.00	0.00	17,522.28	17,522.28	0.00
3 Issue Sales								

Schedule SB, Line 26 - Schedule of Active Participant Data

January 1, 2025 Valuation
Gibson Greetings, Inc. Retirement Income Plan
(EIN: 34-0065325; PN: 015)

Attained Age	Years of Credited Service									
	Under 1	1 to 4	5 to 9	10 to 14	15 to 19	20 to 24	25 to 29	30 to 34	35 to 39	40 & up
Under 25	-	-	-	-	-	-	-	-	-	-
25 to 29	-	-	-	-	-	-	-	-	-	-
30 to 34	-	-	-	-	-	-	-	-	-	-
35 to 39	-	-	-	-	-	-	-	-	-	-
40 to 44	-	-	-	-	-	-	-	-	-	-
45 to 49	-	-	-	-	-	-	-	-	-	-
50 to 54	-	-	-	-	-	-	-	-	-	-
55 to 59	-	-	-	-	-	-	-	-	-	-
60 to 64	1 (*)	4 (*)	1 (*)	1 (*)	-	-	-	-	-	-
65 to 69	-	-	-	-	-	-	-	-	-	-
70 & up	-	-	-	-	-	-	-	-	-	-

* Average compensation is not shown since there are fewer than 1,000 active participants in this plan

Schedule SB, Part V – Statement of Actuarial Assumptions
Gibson Greetings Inc. Retirement Income Plan
January 1, 2025 Valuation
EIN/PN: 34-0065325 / 015

Appendix B
Statement of Actuarial Assumptions and Methods

Minimum Funding Annual Interest Rates

24-month segment rates averaged through the end of August 2024 and published in September 2024 (as prescribed by IRC 430) and adjusted to reflect ARPA:

- Segment 1 (0 – 5 years) 5.07%
- Segment 2 (5 to 20 years) 5.31%
- Segment 3 (more than 20 years) 5.50%
- Effective Interest Rate 5.31%

Maximum Deductible Annual Interest Rates

24-month segment rates averaged through the end of August 2024 and published in September 2024 (as prescribed by IRC 430) as follows:

- Segment 1 (0 – 5 years) 5.07%
- Segment 2 (5 to 20 years) 5.33%
- Segment 3 (more than 20 years) 5.36%
- Effective Interest Rate 5.30%

Annual Expected Return on Assets

Interest Rate for developing Actuarial Value of Assets; limited to third segment rate (5.59%) 6.00%

Rationale: based on a review of historical returns with advice from the investment advisor

PBGC and LDROM Annual Interest Rates

24-month segment rates averaged through the end of August 2024 and published in September 2024 using the Standard Method (as prescribed by IRC 430) as follows:

- Segment 1 (0 – 5 years) 4.65%
- Segment 2 (5 to 20 years) 5.28%
- Segment 3 (more than 20 years) 5.63%
- Effective Interest Rate 5.25%

Salary Scale

Not applicable as all benefits are frozen.

Mortality

Funding: Mortality as provided in Notice 2024-42 male and female, with different rate for annuitants and nonannuitants (as prescribed by IRC 430).

Appendix B (Continued)

Rates of Retirement

Age(s)	Rate
55	2.0%
56	3.0
57	4.0
58	5.0
59	7.0
60	9.0
61	14.5
62	22.0
63	19.5
64	12.0
65	100.0

Terminated Vested participants and Deferred Beneficiaries are assumed to commence at Normal Retirement Date.

Rationale: as selected by the Plan Sponsor to meet historical experience

Weighted Average Retirement Age is 64. This is the average retirement age for someone eligible to retire at all ages using the assumed retirement rates and no other decrements.

Rates of Turnover

Rates varying by age, sex, and service. Sample rates shown below.

		Male		Female	
Age	Service	<1	5+	<1	5+
25		21.50%	6.91%	34.90%	14.91%
40		21.30	6.83	34.80	14.87
50		20.80	6.67	34.50	14.73

Rationale: as selected by Plan Sponsor to meet historical experience

Rates of Disability

Rates varying by age. Sample rates shown below.

Age(s)	Rate
25	.09%
40	.20
50	.58

Rationale: as selected by Plan Sponsor to meet historical experience

Appendix B (Continued)

Assumptions Made In Valuing Spouse's Benefit	Sixty percent of the male and forty-five percent of the female employees included in the valuation are assumed to be married. These percentages are used as the probabilities that survivor benefits will be payable due to preretirement deaths. The wife is assumed to be three years younger than the husband.
Optional Form Selection	All employees are assumed to elect the life annuity form of benefit.
Provision for Expenses	The expected administrative (i.e. non-investment) expenses that will be paid from plan assets, which were assumed to equal actual administrative expenses during the prior year plus PBGC premiums for the current year, were included in the Target Normal Cost for minimum contribution purposes.
Standing Elections	The client has not signed an election that provides for the automatic use of the Carryover Balance and/or Prefunding Balance if necessary to meet the minimum funding requirement.
Asset Method	Funding: Market Value of Assets plus interest adjusted accrued but unpaid contributions as of the valuation date plus an adjustment to defer full recognition of investment losses and gains over a two-year period. The investment (gain)/loss for every year equals the market value at the beginning of the year projected to the end of the year using the interest rate above, but no greater than the third segment rate for the plan year, minus the end of the year actual market value. The actuarial value of assets will be no less than 90% and no more than 110% of the market value (including interest-adjusted accrued but unpaid contributions). Note that due to the regulatory constraint on the interest rate, a characteristic of this asset valuation method is that, over time, it may be more likely to produce an actuarial value of assets that is less than the market value of assets.
Funding Method	Pure Unit Credit The actuarial liabilities shown in this report are determined using software purchased from an outside vendor which was developed for this purpose. Certain information is entered into this model in order to generate the liabilities. These inputs include economic and non-economic assumptions, plan provisions, and census information. We rely on the coding within the software to value the liabilities using the actuarial methods and assumptions selected. Both the input to and the output from the model is checked for accuracy and reviewed for reasonableness.

Appendix B (Continued)

Employees Valued	Only participants as of the valuation date were valued.
Changes in Assumptions and Methods since the Last Actuarial Valuation	The interest rates used for determining the funding target were 4.75%, 4.87% and 5.59%. These rates were updated to the rates required for the current plan year. The mortality table for the funding target was changed as required under PPA '06.
Justification for Changes in Actuarial Assumptions	The only assumption changes were to prescribed actuarial assumptions or as a result of At-Risk status. Therefore, the plan did not need IRS approval to change assumptions and there is no need to disclose any "Change in Actuarial Assumptions."

KeyBank

Account Statement

GIBSON GREETINGS RET-CONSOLIDATED 1000679
January 01, 2025 - December 31, 2025

5% Report by Asset - Aggregate Transactions

Valuation: $47,812,564.85 **Threshold:** $2,390,628.24 **Base Currency: USD**

Asset Number / Tran Type	Settle Dt	Asset Description / Units/Par	Purchase Cost/ Sale Proceeds	Broker Commission	Other Expense	Book Value	Previous Annual Market	Net Gain/Loss on Market
3140000V3		**FEDERATED GOVERNMENT OBLIGATIONS INSTITUTIONAL SHARES**						
Purchase	01/02/2025	3,643.8500	3,643.85	0.00	0.00	3,643.85	3,643.85	0.00
Sale	01/02/2025	-47,251.5400	47,251.54	0.00	0.00	-47,251.54	-47,251.54	0.00
Purchase	01/03/2025	1,288,110.4200	1,288,110.42	0.00	0.00	1,288,110.42	1,288,110.42	0.00
Sale	01/03/2025	-1,685,099.4300	1,685,099.43	0.00	0.00	-1,685,099.43	-1,685,099.43	0.00
Purchase	01/10/2025	2,767.4400	2,767.44	0.00	0.00	2,767.44	2,767.44	0.00
Purchase	01/14/2025	419.6700	419.67	0.00	0.00	419.67	419.67	0.00
Purchase	01/15/2025	480.2600	480.26	0.00	0.00	480.26	480.26	0.00
Sale	01/16/2025	-419.6700	419.67	0.00	0.00	-419.67	-419.67	0.00
Purchase	01/22/2025	1,417.3600	1,417.36	0.00	0.00	1,417.36	1,417.36	0.00
Sale	01/23/2025	-10,946.9300	10,946.93	0.00	0.00	-10,946.93	-10,946.93	0.00
Purchase	01/27/2025	717.5800	717.58	0.00	0.00	717.58	717.58	0.00
Purchase	01/27/2025	2,310.0100	2,310.01	0.00	0.00	2,310.01	2,310.01	0.00
Sale	01/28/2025	-11,656.7200	11,656.72	0.00	0.00	-11,656.72	-11,656.72	0.00
Purchase	02/03/2025	609.2400	609.24	0.00	0.00	609.24	609.24	0.00
Sale	02/03/2025	-440,042.7300	440,042.73	0.00	0.00	-440,042.73	-440,042.73	0.00
Purchase	02/05/2025	305.9200	305.92	0.00	0.00	305.92	305.92	0.00
Purchase	02/07/2025	449.3900	449.39	0.00	0.00	449.39	449.39	0.00
Sale	02/12/2025	-2,574.8400	2,574.84	0.00	0.00	-2,574.84	-2,574.84	0.00
Sale	02/18/2025	-18,495.3600	18,495.36	0.00	0.00	-18,495.36	-18,495.36	0.00
Sale	02/26/2025	-3,326.6700	3,326.67	0.00	0.00	-3,326.67	-3,326.67	0.00
Purchase	03/03/2025	21.0700	21.07	0.00	0.00	21.07	21.07	0.00
Sale	03/03/2025	-438,051.5100	438,051.51	0.00	0.00	-438,051.51	-438,051.51	0.00
Sale	03/05/2025	-3,214.9000	3,214.90	0.00	0.00	-3,214.90	-3,214.90	0.00
Purchase	03/06/2025	305.9200	305.92	0.00	0.00	305.92	305.92	0.00
Sale	03/07/2025	-1,628.4200	1,628.42	0.00	0.00	-1,628.42	-1,628.42	0.00
Purchase	03/10/2025	701.5000	701.50	0.00	0.00	701.50	701.50	0.00

KeyBank

Account Statement

GIBSON GREETINGS RET-CONSOLIDATED 1000679
January 01, 2025 - December 31, 2025

5% Report by Asset - Aggregate Transactions (Continued)

Valuation: $47,812,564.85 **Threshold:** $2,390,628.24 **Base Currency: USD**

Asset Number / Tran Type	Settle Dt	Asset Description / Units/Par	Purchase Cost/ Sale Proceeds	Broker Commission	Other Expense	Book Value	Previous Annual Market	Net Gain/Loss on Market
3140000V3		**FEDERATED GOVERNMENT OBLIGATIONS INSTITUTIONAL SHARES**						
Sale	03/17/2025	-701.5000	701.50	0.00	0.00	-701.50	-701.50	0.00
Sale	03/18/2025	-338.3700	338.37	0.00	0.00	-338.37	-338.37	0.00
Purchase	03/19/2025	639.1500	639.15	0.00	0.00	639.15	639.15	0.00
Purchase	03/20/2025	1,350,705.4200	1,350,705.42	0.00	0.00	1,350,705.42	1,350,705.42	0.00
Sale	03/20/2025	-6,584.1700	6,584.17	0.00	0.00	-6,584.17	-6,584.17	0.00
Purchase	04/01/2025	15.1900	15.19	0.00	0.00	15.19	15.19	0.00
Sale	04/01/2025	-439,531.0600	439,531.06	0.00	0.00	-439,531.06	-439,531.06	0.00
Purchase	04/04/2025	361.0200	361.02	0.00	0.00	361.02	361.02	0.00
Purchase	04/11/2025	344.4100	344.41	0.00	0.00	344.41	344.41	0.00
Sale	04/14/2025	-425.6500	425.65	0.00	0.00	-425.65	-425.65	0.00
Purchase	04/16/2025	639.6000	639.60	0.00	0.00	639.60	639.60	0.00
Sale	04/17/2025	-639.6000	639.60	0.00	0.00	-639.60	-639.60	0.00
Sale	04/28/2025	-7,734.5700	7,734.57	0.00	0.00	-7,734.57	-7,734.57	0.00
Sale	04/29/2025	-2,491.8000	2,491.80	0.00	0.00	-2,491.80	-2,491.80	0.00
Sale	05/01/2025	-439,357.6900	439,357.69	0.00	0.00	-439,357.69	-439,357.69	0.00
Purchase	05/05/2025	2,012.1100	2,012.11	0.00	0.00	2,012.11	2,012.11	0.00
Purchase	05/07/2025	991.3300	991.33	0.00	0.00	991.33	991.33	0.00
Sale	05/08/2025	-3,326.6700	3,326.67	0.00	0.00	-3,326.67	-3,326.67	0.00
Sale	05/14/2025	-8,224.0000	8,224.00	0.00	0.00	-8,224.00	-8,224.00	0.00
Sale	05/15/2025	-7,186.9800	7,186.98	0.00	0.00	-7,186.98	-7,186.98	0.00
Purchase	05/27/2025	778.5800	778.58	0.00	0.00	778.58	778.58	0.00
Sale	06/02/2025	-452,394.2500	452,394.25	0.00	0.00	-452,394.25	-452,394.25	0.00
Sale	06/03/2025	-1,584.0000	1,584.00	0.00	0.00	-1,584.00	-1,584.00	0.00
Sale	06/04/2025	-381.9800	381.98	0.00	0.00	-381.98	-381.98	0.00
Purchase	06/12/2025	3,114.3200	3,114.32	0.00	0.00	3,114.32	3,114.32	0.00

KeyBank

Account Statement

GIBSON GREETINGS RET-CONSOLIDATED 1000679
January 01, 2025 - December 31, 2025

5% Report by Asset - Aggregate Transactions (Continued)

Valuation: $47,812,564.85 **Threshold:** $2,390,628.24 **Base Currency: USD**

Asset Number / Tran Type	Settle Dt	Asset Description / Units/Par	Purchase Cost/ Sale Proceeds	Broker Commission	Other Expense	Book Value	Previous Annual Market	Net Gain/Loss on Market
3140000V3		**FEDERATED GOVERNMENT OBLIGATIONS INSTITUTIONAL SHARES**						
Purchase	06/16/2025	1,565.1400	1,565.14	0.00	0.00	1,565.14	1,565.14	0.00
Sale	06/18/2025	-10,983.0000	10,983.00	0.00	0.00	-10,983.00	-10,983.00	0.00
Sale	06/20/2025	-2,519.7000	2,519.70	0.00	0.00	-2,519.70	-2,519.70	0.00
Purchase	06/26/2025	1,370,329.9100	1,370,329.91	0.00	0.00	1,370,329.91	1,370,329.91	0.00
Sale	06/26/2025	-15.1900	15.19	0.00	0.00	-15.19	-15.19	0.00
Sale	07/01/2025	-437,554.2100	437,554.21	0.00	0.00	-437,554.21	-437,554.21	0.00
Sale	07/02/2025	-272.7400	272.74	0.00	0.00	-272.74	-272.74	0.00
Sale	07/03/2025	-3,404.3300	3,404.33	0.00	0.00	-3,404.33	-3,404.33	0.00
Purchase	07/08/2025	364.1200	364.12	0.00	0.00	364.12	364.12	0.00
Sale	07/30/2025	-7,500.0000	7,500.00	0.00	0.00	-7,500.00	-7,500.00	0.00
Purchase	07/31/2025	471.9000	471.90	0.00	0.00	471.90	471.90	0.00
Sale	08/01/2025	-435,594.4400	435,594.44	0.00	0.00	-435,594.44	-435,594.44	0.00
Sale	08/04/2025	-471.9000	471.90	0.00	0.00	-471.90	-471.90	0.00
Sale	08/14/2025	-8,190.0000	8,190.00	0.00	0.00	-8,190.00	-8,190.00	0.00
Sale	08/18/2025	-5,427.3400	5,427.34	0.00	0.00	-5,427.34	-5,427.34	0.00
Purchase	08/22/2025	444.6500	444.65	0.00	0.00	444.65	444.65	0.00
Sale	09/02/2025	-436,706.3500	436,706.35	0.00	0.00	-436,706.35	-436,706.35	0.00
Purchase	09/08/2025	305.5800	305.58	0.00	0.00	305.58	305.58	0.00
Sale	09/10/2025	-302,624.0000	302,624.00	0.00	0.00	-302,624.00	-302,624.00	0.00
Purchase	09/12/2025	441.9900	441.99	0.00	0.00	441.99	441.99	0.00
Sale	09/17/2025	-305.5800	305.58	0.00	0.00	-305.58	-305.58	0.00
Purchase	09/26/2025	2,174,234.0000	2,174,234.00	0.00	0.00	2,174,234.00	2,174,234.00	0.00
Sale	10/01/2025	-437,020.8900	437,020.89	0.00	0.00	-437,020.89	-437,020.89	0.00
Purchase	10/08/2025	624.2200	624.22	0.00	0.00	624.22	624.22	0.00
Sale	10/09/2025	-624.2200	624.22	0.00	0.00	-624.22	-624.22	0.00

KeyBank

Account Statement

GIBSON GREETINGS RET-CONSOLIDATED 1000679
January 01, 2025 - December 31, 2025

5% Report by Asset - Aggregate Transactions (Continued)

Valuation: $47,812,564.85 **Threshold:** $2,390,628.24 **Base Currency: USD**

Asset Number / Tran Type	Settle Dt	Asset Description / Units/Par	Purchase Cost/ Sale Proceeds	Broker Commission	Other Expense	Book Value	Previous Annual Market	Net Gain/Loss on Market
3140000V3		**FEDERATED GOVERNMENT OBLIGATIONS INSTITUTIONAL SHARES**						
Sale	10/15/2025	-23,463.0000	23,463.00	0.00	0.00	-23,463.00	-23,463.00	0.00
Sale	10/17/2025	-5,343.4000	5,343.40	0.00	0.00	-5,343.40	-5,343.40	0.00
Purchase	10/23/2025	329.3700	329.37	0.00	0.00	329.37	329.37	0.00
Sale	11/03/2025	-432,543.7000	432,543.70	0.00	0.00	-432,543.70	-432,543.70	0.00
Purchase	11/05/2025	913.6800	913.68	0.00	0.00	913.68	913.68	0.00
Sale	11/07/2025	-253.3000	253.30	0.00	0.00	-253.30	-253.30	0.00
Sale	11/19/2025	-9,315.0000	9,315.00	0.00	0.00	-9,315.00	-9,315.00	0.00
Sale	11/24/2025	-4,954.0000	4,954.00	0.00	0.00	-4,954.00	-4,954.00	0.00
Sale	12/01/2025	-433,019.8000	433,019.80	0.00	0.00	-433,019.80	-433,019.80	0.00
Purchase	12/03/2025	1,074.7400	1,074.74	0.00	0.00	1,074.74	1,074.74	0.00
Sale	12/05/2025	-76.6100	76.61	0.00	0.00	-76.61	-76.61	0.00
Purchase	12/11/2025	2,447,256.0000	2,447,256.00	0.00	0.00	2,447,256.00	2,447,256.00	0.00
Purchase	12/12/2025	2,447,751.4100	2,447,751.41	0.00	0.00	2,447,751.41	2,447,751.41	0.00
Sale	12/12/2025	-2,447,256.0000	2,447,256.00	0.00	0.00	-2,447,256.00	-2,447,256.00	0.00
Purchase	12/16/2025	472.8900	472.89	0.00	0.00	472.89	472.89	0.00
Sale	12/17/2025	-3,526.8900	3,526.89	0.00	0.00	-3,526.89	-3,526.89	0.00
Purchase	12/22/2025	974.1900	974.19	0.00	0.00	974.19	974.19	0.00
53 Issue Sales								
40 Issue Purchases								

KeyBank

Account Statement

GIBSON GREETINGS RET-CONSOLIDATED 1000679
January 01, 2025 - December 31, 2025

5% Report by Asset - Aggregate Transactions (Continued)

Valuation: $47,812,564.85 **Threshold:** $2,390,628.24 **Base Currency: USD**

Asset Number / Tran Type	Settle Dt	Asset Description / Units/Par	Purchase Cost/ Sale Proceeds	Broker Commission	Other Expense	Book Value	Previous Annual Market	Net Gain/Loss on Market
921909784		**VANGUARD TOTAL INTL STK INDEX FD OPEN-END FUND INSTL CL**						
Sale	03/19/2025	-6,588.3710	911,698.78	0.00	0.00	-712,089.40	-834,878.37	76,820.41
Purchase	03/24/2025	158.8280	21,645.06	0.00	0.00	21,645.06	21,645.06	0.00
Purchase	06/23/2025	387.5980	55,461.34	0.00	0.00	55,461.34	55,461.34	0.00
Sale	06/25/2025	-1,502.9500	219,250.36	0.00	0.00	-162,947.71	-190,673.73	28,576.63
Purchase	09/22/2025	255.8550	40,192.31	0.00	0.00	40,192.31	40,192.31	0.00
Sale	09/25/2025	-6,528.4270	1,016,215.00	0.00	0.00	-709,351.52	-829,199.19	187,015.81
Sale	12/10/2025	-7,549.2850	1,230,609.00	0.00	0.00	-820,273.67	-958,862.07	271,746.93
Purchase	12/22/2025	702.2020	112,464.75	0.00	0.00	112,464.75	112,464.75	0.00
4 Issue Sales								
4 Issue Purchases								

Valuation: $47,812,564.85 **Threshold:** $2,390,628.24 **Base Currency: USD**

Asset Number / Tran Type	Settle Dt	Asset Description / Units/Par	Purchase Cost/ Sale Proceeds	Broker Commission	Other Expense	Book Value	Previous Annual Market	Net Gain/Loss on Market
922908801		**VANGUARD TOTAL STK MKT INDX FD OPEN-END FUND INSTL SHS**						
Purchase	03/28/2025	189.2500	25,711.45	0.00	0.00	25,711.45	25,711.45	0.00
Sale	06/25/2025	-1,504.6000	219,250.36	0.00	0.00	-117,963.15	-212,196.35	7,054.01
Purchase	07/01/2025	156.9270	23,229.89	0.00	0.00	23,229.89	23,229.89	0.00
Sale	09/25/2025	-7,316.2690	1,158,019.00	0.00	0.00	-575,132.42	-1,031,979.36	126,039.64
Purchase	09/30/2025	125.0580	19,912.94	0.00	0.00	19,912.94	19,912.94	0.00
Sale	12/10/2025	-7,376.7480	1,216,647.00	0.00	0.00	-581,530.72	-1,040,880.75	175,766.25
Purchase	12/23/2025	106.5830	17,522.28	0.00	0.00	17,522.28	17,522.28	0.00
3 Issue Sales								

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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.

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

▶ **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
GIBSON GREETINGS, INC. RETIREMENT INCOME PLAN

B Three-digit plan number (PN) ▶ 015

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
AMERICAN GREETINGS CORPORATION

D Employer Identification Number (EIN)
34-0065325

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2025

2 Assets:

a Market value	**2a**	47,816,506
b Actuarial value	**2b**	46,422,644

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	736	44,560,716	44,560,716
b For terminated vested participants	159	6,990,358	6,990,358
c For active participants	7	30,125	63,838
d Total	902	51,581,199	51,614,912

4 If the plan is in at-risk status, check the box and complete lines (a) and (b) [ ]

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**	5.31%

6 Target normal cost

a Present value of current plan year accruals	**6a**	0
b Expected plan-related expenses	**6b**	511,592
c Target normal cost	**6c**	511,592

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

Gail R. Steward GRS
Signature of actuary

09/23/2026
Date

Gail R. Steward
Type or print name of actuary

2606835
Most recent enrollment number

USI Consulting Group
Firm name

216-875-1900
Telephone number (including area code)

1001 Lakeside Avenue, Suite 1200
CLEVELAND OH 44114
Address of the firm

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	646,387
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	215,305
9	Amount remaining (line 7 minus line 8)	0	431,082
10	Interest on line 9 using prior year's actual return of 6.32 %	0	27,244
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	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 4.98 %		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		
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	458,326

Part III Funding Percentages

14	Funding target attainment percentage	14	89.05 %
15	Adjusted funding target attainment percentage	15	91.57 %
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	100.35 %
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
09/15/2026	633,601	0			

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

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	
5.07 %	5.31 %	5.50%	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	4
22 Weighted average retirement age	**22**	64

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**	511,592
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	5,650,594	526,864
b Waiver amortization installment	0	0

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**	1,038,456

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	458,326	458,326

36 Additional cash requirement (line 34 minus line 35)	**36**	580,130
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	580,130
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	**38a**	0
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	
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

Schedule SB, Line 22 – Description of Weighted Average Retirement Age
Gibson Greetings Inc. Retirement Income Plan
January 1, 2025 Valuation
EIN/PN: 34-0065325 / 015

Rates of Retirement

Age(s)	Rate
55	2.0%
56	3.0
57	4.0
58	5.0
59	7.0
60	9.0
61	14.5
62	22.0
63	19.5
64	12.0
65	100.0

Terminated Vested participants and Deferred Beneficiaries are assumed to commence at Normal Retirement Date.

Rationale: as selected by the Plan Sponsor to meet historical experience

Weighted Average Retirement Age is 64. This is the average retirement age for someone eligible to retire at all ages using the assumed retirement rates and no other decrements.

Appendix A
Summary of Principal Plan Provisions

Plan Sponsor	American Greetings Corporation
EIN/PN	34-0065325/015
Effective Date	January 1, 1970. Last amended and restated effective February 2024.
Plan Year	The 12-month period beginning each January 1
Participation Date	The first of the month following the earlier of (1) attainment of age 30 or (2) attainment of age 21 and completion of one Year of Service. The plan was frozen with respect to participation as of December 31, 2000.
Credited Service	All service with Gibson Greetings while a member of the Plan, including service before the inception of the Plan in 1970 (if after age 30). The plan was frozen with respect to service as of December 31, 2000.
Pensionable Pay	Total compensation including overtime, bonuses, retention premiums, and severance to the extent paid in month employment terminates.
Average earnings	The average of the highest 60 consecutive months of Pensionable Pay during the 120 month period ending on the earlier of the Participant's termination date, retirement date, or December 31, 2000.
Covered Compensation	35 year average of Social Security maximum taxable wage base for OASDI purposes.
Accrued Benefit	As of any date, one-twelfth of the larger of (a), or (b) as of December 31, 1988 for super-highly compensated employees and as of December 31, 1993, for other employees. a. 0.9% of Average Earnings up to Covered Compensation plus 1.5% of Average Earnings over Covered Compensation, multiplied by Credited Service up to 35 years; plus 0.9% of Average Earnings multiplied by Credited Service over 35 years. b. Effective after December 31, 1998, is equal to: 1. $360 times Credited Service for Participants who retired or terminated during 1999 with vested benefits, or Participants who retired and started receiving benefits before July 1, 2000, or

Appendix A (Continued)

Accrued Benefit (Continued)

2. The accrued benefit as of December 31, 1998, plus $200 (prorated for Participants terminating during 1999) for Participants who were not highly compensated for 1999.

Benefits under the plan were frozen as of December 31, 2000.

Normal Retirement Benefit

Eligibility:

Age 65.

Monthly Benefit:

The Accrued Benefit.

Early Retirement Benefit

Eligibility:

After attaining age 55, completing 10 years of Credited Service, and the sum of age and service is at least 70. Unreduced Early Retirement when nonhighly compensated employee completes 40 Years of Service.

Monthly Benefit:

The Accrued Benefit, determined at termination, and starting at the Normal Retirement Date, or starting immediately but actuarially reduced 0.54% for each month that the commencement of payment precedes Normal Retirement Age.

Disability Benefit

Eligibility:

10 years of Vesting Service, with the Social Security disability date occurring prior to December 31, 2000.

Monthly Benefit:

The Accrued Benefit.

Appendix A (Continued)

Termination Benefit

Eligibility:

Termination of employment with at least five Years of Service.

Monthly Benefit:

The Accrued Benefit, actuarially reduced for payment before 65.

Death Benefit

Eligibility:

Active participant or terminated vested and married.

Monthly Benefit:
A monthly benefit for life commencing at the time the participant would have been eligible for retirement. The benefit is equal to 50% of the benefit vested on the date of death, adjusted as appropriate for early commencement and the 50% Joint and Survivor Annuity form of payment.

Optional Form of Payment

Life Annuity
Five Year Certain & Continuous
50% Joint & Survivor
75% Joint & Survivor
100% Joint & Survivor

The conversion factors are based on the UP-1984 Mortality Table set back 1 year for both participants and beneficiaries and 7.50% interest.

Benefits Available as Lump Sums

This plan only pays small lump sums (less than $7,500).

The conversion factors are based on the Applicable Mortality Table and Applicable Interest Rate for the month of October as required under IRC Section 417(e)(3); the stability period is the plan year.

Changes in Plan Provisions

The automatic changes, if any, in the plan compensation limit and maximum benefit limit were recognized as amendments for funding purposes.

There was an amendment for an annuity purchase for 769 participants for a premium of $15,442,072.

KeyBank

Account Statement

GIBSON GREETINGS RET-CONSOLIDATED 1000679
January 01, 2025 - December 31, 2025

Detailed Schedule of Holdings - Principal Assets

Base Currency: USD

Security Description Portfolio Number	Asset Number Yield on Market Units/Par	Unit Price Price Date Market Value	FV Level* % of MV	Avg Unit Cost Accrued Income	Book Value Revalued Cost	Unrealized Gain/Loss On Book Value On Revalued Cost
Equity						
Mutual Funds						
VANGUARD TOTAL STK MKT INDX FD OPEN-END FUND INSTL SHS	922908801 1.12%	163.230	Level2			
1000679.2	37,968.0410	6,197,523.33	12.92%	79.07 0.00	3,002,252.26 5,359,884.93	3,195,271.07 837,638.40
Total Mutual Funds		**6,197,523.33**	**12.92%**	**N/A** **0.00**	**3,002,252.26** **5,359,884.93**	**3,195,271.07** **837,638.40**
Non-US Mutual Funds						
VANGUARD TOTAL INTL STK INDEX FD OPEN-END FUND INSTL CL	921909784 3.17%	162.090	Level2			
1000679.2	39,118.8560	6,340,775.37	13.22%	109.58 0.00	4,286,657.36 4,991,903.31	2,054,118.01 1,348,872.06
Total Non-US Mutual Funds		**6,340,775.37**	**13.22%**	**N/A** **0.00**	**4,286,657.36** **4,991,903.31**	**2,054,118.01** **1,348,872.06**
Total Equity		**12,538,298.70**	**26.14%**	**N/A** **0.00**	**7,288,909.62** **10,351,788.24**	**5,249,389.08** **2,186,510.46**
Fixed Income						
Mutual Funds						
PIMCO INV GRADE CREDIT BOND FD INST $0.409	722005816 4.68%	9.200	Level2			
1000679.2	2,773,027.7680	25,511,855.47	53.19%	8.89 0.00	24,651,807.74 24,625,008.16	860,047.73 886,847.31
PIMCO LONG TERM US GOVERNMENT BOND OPEN-END FUND INSTL CL	693390205 4.23%	14.010	Level2			
1000679.2	235,951.8810	3,305,685.85	6.89%	14.43 0.00	3,405,588.54 3,230,841.60	-99,902.69 74,844.25
PIMCO MODERATE DURATION FUND OPEN-END FUND INSTL CL	693390593 4.42%	9.520	Level2			

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Account Statement

GIBSON GREETINGS RET-CONSOLIDATED 1000679
January 01, 2025 - December 31, 2025

Detailed Schedule of Holdings - Principal Assets (Continued)

Base Currency: USD

Security Description Portfolio Number	Asset Number Yield on Market Units/Par	Unit Price Price Date Market Value	FV Level* % of MV	Avg Unit Cost Accrued Income	Book Value Revalued Cost	Unrealized Gain/Loss On Book Value On Revalued Cost
1000679.2	341,005.8950	3,246,376.12	6.77%	9.16 0.00	3,122,072.21 3,112,129.50	124,303.91 134,246.62
Total Mutual Funds		**32,063,917.44**	**66.85%**	**N/A** **0.00**	**31,179,468.49** **30,967,979.26**	**884,448.95** **1,095,938.18**
Total Fixed Income		**32,063,917.44**	**66.85%**	**N/A** **0.00**	**31,179,468.49** **30,967,979.26**	**884,448.95** **1,095,938.18**
Cash and Cash Equivalents						
Money Market Funds						
FEDERATED GOVERNMENT OBLIGATIONS INSTITUTIONAL SHARES	3140000V3 3.67%	1.000	Level n/a			
1000679.1	3,359,188.9200	3,359,188.92	7.00%	1.00 7,496.66	3,359,188.92 3,359,188.92	0.00 0.00
1000679.2	0.0000	0.00	0.00%	0.00 242.52	0.00 0.00	0.00 0.00
Total for Asset	3,359,188.9200	3,359,188.92	7.00%	1.00 7,739.18	3,359,188.92 3,359,188.92	0.00 0.00
Total Money Market Funds		**3,359,188.92**	**7.00%**	**N/A** **7,739.18**	**3,359,188.92** **3,359,188.92**	**0.00** **0.00**
Total Cash and Cash Equivalents		**3,359,188.92**	**7.00%**	**N/A** **7,739.18**	**3,359,188.92** **3,359,188.92**	**0.00** **0.00**
Net Holdings		**47,961,405.06**	**100.00%**	**N/A** **7,739.18**	**41,827,567.03** **44,678,956.42**	**6,133,838.03** **3,282,448.64**
Total Holdings Principal Assets		**$47,961,405.06**	**100.00%**	**N/A** **$7,739.18**	**$41,827,567.03** **$44,678,956.42**	**$6,133,838.03** **$3,282,448.64**
Total Holdings		**$47,961,405.06**			**$41,827,567.03** **$44,678,956.42**	**$6,133,838.03** **$3,282,448.64**
Accrued Income On						
Principal Holdings		7,739.18		7,739.18	7,739.18	
Total Accrued Income		**7,739.18**		**7,739.18**	**7,739.18**	

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Account Statement

GIBSON GREETINGS RET-CONSOLIDATED 1000679
January 01, 2025 - December 31, 2025

Detailed Schedule of Holdings - Principal Assets (Continued)

Base Currency: USD

Security Description Portfolio Number	Asset Number Yield on Market Units/Par	Unit Price Price Date Market Value	FV Level* % of MV	Avg Unit Cost Accrued Income	Book Value Revalued Cost	Unrealized Gain/Loss On Book Value On Revalued Cost
Total Holdings with		$47,969,144.24			$41,835,306.21	$6,133,838.03
Accrued Income					$44,686,695.60	$3,282,448.64

Schedule SB, Line 32 – Schedule of Amortization Bases
Gibson Greetings Inc. Retirement Income Plan
January 1, 2025 Valuation
EIN/PN: 34-0065325 / 015

Schedule of Amortization Bases

Shortfall Amortization Bases

Date Established	Present Value of Payments	Remaining Years	Amortization Installment
1/1/2025	$ 5,650,594	15	$ 526,864
Total	$ 5,650,594		$ 526,864

Waiver Amortization Bases

Date Established	Present Value of Payments	Remaining Years	Amortization Installment
1/1/2025	$ 0	N/A	$ 0
Total	$ 0		$ 0