Fill in this information to identify the case:									
Name of Debtor & Case Number:									
□ Sizmek Inc. (19-10971) □ Point Roll, Inc.(19-10972) □ Sizmek DSP, Inc. (19-10973) □ Sizmek Technologies, Inc. (19-10974)	 □ Wireless Artist LLC (19-10975) □ WirelessDeveloper, Inc. (19-10976) □ X Plus One Solutions, Inc. (19-10977) □ X Plus Two Solutions, LLC (19-10978) 								
United States Bankruptcy Court for the Southern District of New York									

Official Form 410

Proof of Claim 04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: **Identify the Claim** 1. Who is the current creditor? Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor Has this claim been ☐ No acquired from ☐ Yes. From whom? _ someone else? 3. Where should notices Where should notices to the creditor be sent? Where should payments to the creditor be sent? (if and payments to the different) creditor be sent? Federal Rule of Name Name Bankruptcy Procedure (FRBP) 2002(g) Number Street Number Street City State ZIP Code State ZIP Code Contact phone Contact phone Contact email Contact email Uniform claim identifier for electronic payments in chapter 13 (if you use one): 4. Does this claim amend ☐ No one already filed? ☐ Yes. Claim number on court claims registry (if known) MM / DD / YYYY ☐ No 5. Do you know if anyone else has filed a proof ☐ Yes. Who made the earlier filing? of claim for this claim?

3.	Do you have any number you use to identify the debtor?	No Ser No No Ser No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:					
7.	\$ Does this amount include interest or other charges?						
		Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).					
- }.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.					
	olulli.	Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).					
		Limit disclosing information that is entitled to privacy, such as health care information.					
).	Is all or part of the claim secured?	□ No □ Yes. The claim is secured by a lien on property.					
		Nature of property:					
		Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim</i>					
		Attachment (Official Form 410-A) with this Proof of Claim. Motor vehicle					
		Other. Describe:					
		Basis for perfection:					
		Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)					
		Value of property: \$					
		Amount of the claim that is secured: \$					
		Amount of the claim that is unsecured: \$(The sum of the secured and unsecured amounts should match the amount in line 7.					
		Amount necessary to cure any default as of the date of the petition: \$					
		Annual Interest Rate (when case was filed)%					
		Fixed					
		☐ Variable					
	. Is this claim based on a	□ No					
0	lease?	Yes. Amount necessary to cure any default as of the date of the petition.					
0		Test. Amount necessary to cure any default as of the date of the petition.					
	. Is this claim subject to a	□ No					
	. Is this claim subject to a right of setoff?						

12. Is all or part of the claim	☐ No							
entitled to priority under 11 U.S.C. § 507(a)?	☐ Yes. Check				Amount ent	itled to priority		
A claim may be partly priority and partly	☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).			\$				
nonpriority. For example, in some categories, the law limits the amount entitled to priority.		to \$2,850* of deposits toward purchase, lease, or rental of property or services for rsonal, family, or household use. 11 U.S.C. § 507(a)(7).						
entitied to phonty.	☐ Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. \$							
	☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).							
	☐ Contrib	\$						
	☐ Other. Specify subsection of 11 U.S.C. § 507(a)() that applies.							
	* Amounts a	are subject to adjustment on 4/01	/16 and every 3 years after the	hat for cases begur	on or after the date of adju	stment.		
Part 3: Sign Below								
The person completing	Check the appro	opriate box:						
this proof of claim must sign and date it.	☐ I am the creditor.							
FRBP 9011(b).	☐ I am the cre	editor's attorney or authorize	d agent.					
If you file this claim	☐ I am the tru	stee, or the debtor, or their a	uthorized agent. Bankrup	otcy Rule 3004.				
electronically, FRBP 5005(a)(2) authorizes courts	☐ I am a guar	antor, surety, endorser, or o						
to establish local rules specifying what a signature								
is.		t an authorized signature on aim, the creditor gave the de				lating the		
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.							
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.							
3571.	Executed on date							
Signature								
Print the name of the person who is completing and signing this claim:								
	Name	First name	Middle name	Lá	st name			
	Title							
		_						
Company Identify the corporate servicer as the company if the authorized agent is a servicer.								
		Number Street						
		City		State Z	P Code			
	Contact phone			Email				