

Report of Organizational Actions Affecting Basis of Securities

OMB No. 1545-0123

► See separate instructions.

Part I Reporting Issuer

1 Issuer's name		2 Issuer's employer identification number (EIN)	
INNOVATE Corp.		54-1708481	
3 Name of contact for additional information	4 Telephone No. of contact	5 Email address of contact	
Michael Sena	914-220-2258	msena@innovatecorp.com	
6 Number and street (or P.O. box if mail is not delivered to street address) of contact		7 City, town, or post office, state, and ZIP code of contact	
295 Madison Avenue, 12th Floor		New York, NY 10017	
8 Date of action		9 Classification and description	
August 4, 2025		Debt for debt exchange	
10 CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Account number(s)
See attached		VATE	

Part II Organizational Action Attach additional statements if needed. See back of form for additional questions.

14 Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for the action ► [See attached.](#)

15 Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustment per share or as a percentage of old basis ► [See attached.](#)

16 Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the valuation dates ► [See attached.](#)

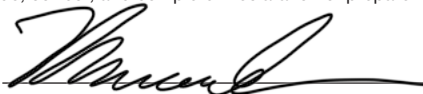
Part II **Organizational Action** *(continued)*

17 List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ► [See attached.](#)

18 Can any resulting loss be recognized? ► [See attached.](#)

19 Provide any other information necessary to implement the adjustment, such as the reportable tax year ► [See attached.](#)

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature ► 

Date ► 9/18/25

Print your name ► Michael Sena

Title ► CFO

**Paid
Preparer
Use Only**

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Firm's name ►			Firm's EIN ►	
Firm's address ►			Phone no.	