

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE NORTHERN DISTRICT OF GEORGIA
ROME DIVISION**

IN RE:) **CHAPTER 11**
)
REGIONAL HOUSING & COMMUNITY) **Jointly Administered Under**
SERVICES CORP., et al.,¹) **CASE NO. 21-41034-pwb**
)
Debtors.)

**SCHEDULES OF ASSETS AND LIABILITIES FOR
RHCSC DOUGLAS HEALTH HOLDINGS LLC, (CASE NO. 21-41038)**

¹ The Debtors in these chapter 11 cases include: Regional Housing & Community Services Corporation, RHCSC Columbus AL Holdings LLC, RHCSC Columbus Health Holdings LLC, RHCSC Douglas AL Holdings LLC, RHCSC Douglas Health Holdings LLC, RHCSC Gainesville AL Holdings LLC, RHCSC Gainesville Health Holdings LLC, RHCSC Montgomery I AL Holdings LLC, RHCSC Montgomery I Health Holdings LLC, RHCSC Montgomery II AL Holdings LLC, RHCSC Montgomery II Health Holdings LLC, RHCSC Rome AL Holdings LLC, RHCSC Rome Health Holdings LLC, RHCSC Savannah AL Holdings LLC, RHCSC Savannah Health Holdings LLC, RHCSC Social Circle AL Holdings LLC, and RHCSC Social Circle Health Holdings LLC.

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE NORTHERN DISTRICT OF GEORGIA
ROME DIVISION**

| | | |
|---|---|---------------------------|
| IN RE: |) | CHAPTER 11 |
| |) | |
| REGIONAL HOUSING & COMMUNITY SERVICES CORPORATION, |) | CASE NO. 21- 41034 |
| _____ |) | |
| IN RE: |) | |
| |) | |
| RHCSC COLUMBUS AL HOLDINGS LLC, |) | CASE NO. 21- 41035 |
| _____ |) | |
| IN RE: |) | |
| |) | |
| RHCSC COLUMBUS HEALTH HOLDINGS LLC, |) | CASE NO. 21- 41036 |
| _____ |) | |
| IN RE: |) | |
| |) | |
| RHCSC DOUGLAS AL HOLDINGS LLC, |) | CASE NO. 21- 41037 |
| _____ |) | |
| IN RE: |) | |
| |) | |
| DOUGLAS HEALTH HOLDINGS LLC, |) | CASE NO. 21- 41038 |
| _____ |) | |
| IN RE: |) | |
| |) | |
| GAINESVILLE AL HOLDINGS LLC, |) | CASE NO. 21- 41049 |
| _____ |) | |
| IN RE: |) | |
| |) | |
| GAINESVILLE HEALTH HOLDINGS LLC, |) | CASE NO. 21- 41050 |
| _____ |) | |
| IN RE: |) | |
| |) | |
| MONTGOMERY I AL HOLDINGS LLC, |) | CASE NO. 21- 41039 |
| _____ |) | |

| | | |
|---|---|---------------------------|
| IN RE: |) | |
| |) | |
| MONTGOMERY I HEALTH HOLDINGS LLC, |) | CASE NO. 21- 41040 |
| _____ |) | |
| IN RE: |) | |
| |) | |
| MONTGOMERY II AL HOLDINGS LLC, |) | CASE NO. 21- 41041 |
| _____ |) | |
| IN RE: |) | |
| |) | |
| MONTGOMERY II HEALTH HOLDINGS LLC, |) | CASE NO. 21- 41043 |
| _____ |) | |
| IN RE: |) | |
| |) | |
| ROME AL HOLDINGS LLC, |) | CASE NO. 21- 41032 |
| _____ |) | |
| IN RE: |) | |
| |) | |
| ROME HEALTH HOLDINGS LLC, |) | CASE NO. 21- 41033 |
| _____ |) | |
| IN RE: |) | |
| |) | |
| SAVANNAH AL HOLDINGS LLC, |) | CASE NO. 21- 41044 |
| _____ |) | |
| IN RE: |) | |
| |) | |
| SAVANNAH HEALTH HOLDINGS LLC, |) | CASE NO. 21- 41046 |
| _____ |) | |
| IN RE: |) | |
| |) | |
| SOCIAL CIRCLE AL HOLDINGS LLC, |) | CASE NO. 21- 41047 |
| _____ |) | |
| IN RE: |) | |
| |) | |
| SOCIAL CIRCLE HEALTH HOLDINGS LLC, |) | CASE NO. 21- 41048 |
| |) | |
| Debtors. |) | |

GLOBAL NOTES TO DEBTORS' SCHEDULES OF ASSETS AND LIABILITIES AND STATEMENTS OF FINANCIAL AFFAIRS

The above-captioned debtors and debtors in possession (collectively, the “**Debtors**”)¹, in the above-styled jointly administered case (the “**Case**”) submit their Schedules of Assets and Liabilities (the “**Schedules**”) and Statements of Financial Affairs (the “**SOFAs**”) pursuant to 11 U.S.C. § 521, and Rule 1007 of the Federal Rules of Bankruptcy Procedure.

1. These global notes (the “**Global Notes**”) regarding the Debtors’ Schedules and SOFAs comprise an integral part of the Schedules and SOFAs filed by the Debtors, and should be referenced in connection with any review of the Schedules and SOFAs.

2. The Schedules and SOFAs prepared by the Debtors are unaudited, and were prepared with data available to the Debtors as near as possible to August 26, 2021, the date of commencement of the Debtors’ chapter 11 cases (the “**Petition Date**”). Although the Debtors’ management made every reasonable effort to ensure that the Schedules and SOFAs are accurate and complete based on information that was available to them at the time of preparation, inadvertent errors or omissions may exist, and subsequent information or discovery may result in material changes to the Schedules and SOFAs, including, but not limited to, the discovery of prepetition invoices that were not available (or that the Debtors had not yet received) at the time the Schedules and SOFAs were prepared. Accordingly, the Schedules and SOFAs remain subject to further review and verification by the Debtors, and the Debtors reserve the right to amend the Schedules and SOFAs from time-to-time as may be necessary or appropriate. Nothing contained in the Schedules and SOFAs shall constitute, or be deemed, a waiver of any rights, claims or defenses of the Debtors against any third party, or with respect to any aspect of these chapter 11 cases or any related litigation or arbitration. Except as otherwise agreed pursuant to a stipulation, agreed order, or general order entered by the Bankruptcy Court, nothing contained in the Schedules and SOFAs is intended or should be construed as an admission or stipulation of the validity of any claim against the Debtors, or as a waiver of the Debtors’ rights to dispute any claim or assert any cause of action or defense against any party, and the Debtors reserve all rights to dispute or challenge the characterization of the structure of any transaction or any document or instrument related to a creditor’s claim.

3. The Schedules and SOFAs do not purport to represent financial statements prepared in accordance with U.S. Generally Accepted Accounting Principles. The preparation of the Schedules and SOFAs required the Debtors to make estimates and assumptions with respect

¹ The Debtors in these chapter 11 cases include: Regional Housing & Community Services Corporation, RHCSC Columbus AL Holdings LLC, RHCSC Columbus Health Holdings LLC, RHCSC Douglas AL Holdings LLC, RHCSC Douglas Health Holdings LLC, RHCSC Gainesville AL Holdings LLC, RHCSC Gainesville Health Holdings LLC, RHCSC Montgomery I AL Holdings LLC, RHCSC Montgomery I Health Holdings LLC, RHCSC Montgomery II AL Holdings LLC, RHCSC Montgomery II Health Holdings LLC, RHCSC Rome AL Holdings LLC, RHCSC Rome Health Holdings LLC, RHCSC Savannah AL Holdings LLC, RHCSC Savannah Health Holdings LLC, RHCSC Social Circle AL Holdings LLC, and RHCSC Social Circle Health Holdings LLC.

to the reported amounts of assets and liabilities, the amount of contingent assets and contingent liabilities, and the reported amounts of any revenues and expenses during the applicable reporting periods. Actual results could differ from the Debtors' estimates.

4. Any failure to designate a claim on the Debtors' Schedules and/or SOFAs as "disputed," "contingent" or "unliquidated" does not constitute an admission by the Debtors that such claim is not "disputed," "contingent" or "unliquidated." The Debtors reserve the right to dispute, or to assert offsets or defenses to, any claim reflected on their Schedules and SOFAs as to amount, liability, priority, secured or unsecured status, or classification, or to otherwise designate any claim as "disputed," "contingent" or "unliquidated" by filing and serving an appropriate amendment. The Debtors reserve the right to amend their Schedules and/or SOFAs as necessary and/or appropriate.

5. It would be prohibitively expensive, unduly burdensome, and an inefficient use of estate assets for the Debtors to obtain current market valuations of all of their assets. Accordingly, unless otherwise indicated, net book values as of the Petition Date are reflected on the Schedules and SOFAs. For this reason, amounts ultimately realized may vary from net book value, and such variances may be material. In addition, the amounts shown for total liabilities exclude any items identified as "unknown" or "undetermined" and, thus, ultimate liabilities may differ materially from those stated in the Schedules and SOFAs. The Debtors reserve the right to amend or adjust the value of any asset or liability set forth in the Debtors' Schedules and SOFAs.

6. Despite reasonable efforts, the Debtors may not have identified and/or set forth all causes of action against third parties in their Schedules and SOFAs. The Debtors reserve any and all rights with respect to any causes of action they may have, and neither these Global Notes nor the Schedules and SOFAs shall be deemed a waiver of any such causes of action, nor may they be used in any litigation in these, or related to these, chapter 11 cases.

7. Information requested by the Schedules and SOFAs requires the Debtors to make judgments regarding the appropriate category in which information should be presented or how certain parties, claims or other data should be labeled. The Debtors' decisions regarding the category or label to use is based on the best information available as of the filing of these Schedules and SOFAs within the time constraints imposed by the Bankruptcy Code, Bankruptcy Rules and order of the Bankruptcy Court. The Debtors may have excluded certain immaterial assets and liabilities. The Debtors reserve the right to modify, change or delete any information in the Schedules and SOFAs by amendment, including to the extent some information currently presented should be moved to a different category or labeled in a different way.

8. These Global Notes are in addition to any specific notes set forth in the Schedules, SOFAs and/or herein. The fact that the Debtors may have prepared a specific note with respect to any of the Schedules and SOFAs and not to others should not be interpreted in any way, and specifically should not be interpreted as a decision by the Debtors to exclude the applicability of any Global Note to any of the Debtors' Schedules and SOFAs.

9. All totals that are included in the Schedules and SOFAs represent totals of the liquidated amounts for the individual schedule and/or SOFA entry for which they are listed. To the extent there are unknown or undetermined amounts, the actual total may be different than the

listed total. The description of an amount as “unknown,” “TBD,” or “undetermined” is not intended to reflect upon the materiality of such amount.

10. Although the Debtors may have scheduled claims of various creditors as secured claims on Schedule D, except as otherwise agreed pursuant to a stipulation, agreed order, or general order entered by the Bankruptcy Court, the Debtors reserve the right to dispute or challenge the secured nature or the validity of any such creditor’s claim or the characterization of the structure of any such transaction or any document or instrument related to such creditor’s claim. The descriptions provided in Schedule D are intended only to be a summary. Without limiting the foregoing, the inclusion on Schedule D of creditors that have asserted liens of any nature is not intended to be an acknowledgement of the validity, extent, or priority of any such liens, and the Debtors reserve their rights to challenge such liens and the underlying claims on any ground whatsoever, except as otherwise agreed pursuant to a stipulation, agreed order, or general order entered by the Bankruptcy Court. Reference to the applicable agreements and other related relevant documents is necessary for a complete description of the collateral and the nature, extent and priority of any liens. Nothing in the Global Notes or the Schedules and SOFAs shall be deemed a modification or interpretation of the terms of any such agreements.

11. The Debtors reserve the right to dispute or challenge whether creditors listed on Schedule E are entitled to priority claims. Schedule E does not include priority employee claims that were paid pursuant to the *Order Granting Motion for Order Authorizing Payment of Pre-Petition Wages, Payroll Taxes, Certain Employee Benefits, Related Expenses, and Other Compensation to Employees and Independent Contractors* dated September 2, 2021 [Docket No. 34]. Also, the Debtors have omitted from their responses to SOFA question #3b payments made to employees within 90 days of the Petition Date.

12. The liabilities identified in Schedule F are derived from the Debtors’ books and records. The Debtors have made a good faith attempt to set forth their unsecured obligations, although the actual amount of claims against the Debtors may vary from those liabilities represented on Schedule F. The listed liabilities may not reflect the correct amount of any unsecured creditor’s allowed claim or the correct amount of all unsecured claims. Parties in interest should not anticipate that the relationship of aggregate asset values and aggregate liabilities set forth in the Schedules and SOFAs will reflect their ultimate recoveries in these cases. Parties in interest should consult their own professionals and/or advisors with respect to pursuing a claim. Although the Debtors and their professionals have generated financials that the Debtors believe to be reasonable, actual liabilities and assets may deviate from the Schedules and SOFAs due to certain events that occur throughout the duration of these chapter 11 cases and upon the potential discovery of additional information.

13. Certain prepetition fixed, liquidated and undisputed unsecured claims owing as of the Petition Date were paid in accordance with certain first-day orders before the date of the filing of the Schedules and SOFAs. As such, certain Schedules may exclude amounts that were payable as of the Petition Date or liabilities that are expected to be paid pursuant to Court order. For example, the Debtors obtained approval to continue their pre-petition insurance programs and policies and to pay premiums in connection therewith. Said claims are excluded from the Schedules.

14. The dollar amounts listed in Schedule F may be exclusive of contingent and unliquidated amounts. All parties to executory contracts and unexpired leases, including those listed on Schedule G, are holders of contingent and unliquidated unsecured claims arising from (i) obligations under those executory contracts and unexpired leases and/or (ii) rejection damages in the event that any such executory contracts and unexpired leases are rejected. Additionally, residents pay rent on the first of each month and may be entitled to a prorated refund if they leave during the month. Not all such claims are duplicated on Schedule F.

15. The Debtors' businesses are complex. While commercially reasonable efforts have been made to ensure the accuracy of Schedule G regarding the Debtors' executory contracts and unexpired leases, inadvertent errors, omissions, or over-inclusions may have occurred. Listing a contract, lease or agreement on Schedule G does not constitute an admission that such contract, lease or agreement is an executory contract or unexpired lease or that such contract, lease or agreement was in effect on the Petition Date or is valid or enforceable. The Debtors reserve all of their rights to dispute the validity, effectiveness, status, or enforceability of any contracts, agreements, or leases set forth in Schedule G (including, but not limited to, whether any lease is a true lease or financing arrangement) and to amend or supplement Schedule G as necessary. Certain of the Debtors are parties to Resident Agreement with residents at the respective facilities. Due to confidentiality concerns, these Resident Agreements are not individually listed on Schedule G.

16. The contracts, agreements, and leases listed on Schedule G may have expired or may have been modified, amended, and supplemented from time to time by various amendments, restatement, waivers, estoppel certificates, letter and other documents, instruments, and agreements which may not be listed therein. Where the Debtors may be party to an agreement that has expired by its terms, but where all parties thereto continue to operate under the agreement, out of an abundance of caution the Debtors may have listed such agreement on Schedule G. The Debtors' inclusion of such contracts or agreements on Schedule G is not an admission that any such contract or agreement is an executory contract or unexpired lease.

17. Certain of the leases and contracts listed on Schedule G may contain certain renewal options, guarantees of payment, options to purchase, rights of first refusal, and other miscellaneous rights. Such rights, powers, duties, and obligations may not be set forth separately on Schedule G. Nothing in Schedule G shall operate as a bar to the Debtors' right to treat such agreements as severable. In addition, the Debtors may have entered into various other types of agreements in the ordinary course of their businesses, such as easements, rights of way, subordination agreements, nondisturbance agreements, supplemental agreements, amendments, letter agreements, title agreements, and confidentiality agreements. Such documents may not be set forth on Schedule G. Schedule G may not include certain standalone purchase orders for goods or equipment or nondisclosure agreements.

18. Except as may be otherwise indicated in the SOFAs or the Schedules, the Debtors have included payments made during the one-year period preceding the Petition Date to persons deemed an "insider," as that term is defined in section 101(31) of the Bankruptcy Code. The Debtors do not take any position with respect to (a) any such person's influence over the control of the Debtors, (b) the management responsibilities or functions of any such person, (c) the decision-

making or corporate authority of any such person, or (d) whether any such person could successfully argue that he or she is not an “insider” under applicable law.

19. Katie S. Goodman has executed the Declarations concerning the SOFAs and Schedules solely in her capacity as Chief Restructuring Officer of the Debtors and at the direction of the Debtors’ respective Authorized Officers.

20. The Debtors specifically reserve the right to amend, modify, supplement, correct, change, or alter any part of their Schedules, SOFAs and Global Notes as and to the extent necessary and as they deem appropriate.

Fill in this information to identify the case:

Debtor Name: In re : RHCSG Douglas Health Holdings LLC
 United States Bankruptcy Court for the: Northern District of Georgia
 Case number (if known): 21-41038 (PWB)

Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from *Schedule A/B*

\$ 2,007,797.62

1b. **Total personal property:**

Copy line 91A from *Schedule A/B*

\$ 0.00

1c. **Total of all property:**

Copy line 92 from *Schedule A/B*

\$ 2,007,797.62

Part 2: Summary of Liabilities

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*

\$ 5,412,896.21

3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of *Schedule E/F*

\$ 4,000.75

3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*

+ \$ 0.00

4. **Total liabilities**

Lines 2 + 3a + 3b

\$ 5,416,896.96

| |
|--|
| Fill in this information to identify the case: |
| Debtor Name: In re : RHCSC Douglas Health Holdings LLC |
| United States Bankruptcy Court for the: Northern District of Georgia |
| Case number (if known): 21-41038 (PWB) |

Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- No. Go to Part 2.
- Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand

2.1 None \$ _____

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

| | | | | | |
|--|-----------------|---------------------------------|----|--|------|
| Name of institution (bank or brokerage firm) | Type of account | Last 4 digits of account number | | | |
| 3.1 CIBC | Propco | 5945 | \$ | | 0.00 |

4. Other cash equivalents (Identify all)

4.1 None \$ _____

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

| | |
|----------|------|
| \$ _____ | 0.00 |
|----------|------|

Debtor: RHSCS Douglas Health Holdings LLC

Document Page 11 of 33

Case number (if known): 21-41038

Name

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

- No. Go to Part 3.
- Yes. Fill in the information below.

Current value of debtor's interest

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

_____ \$ _____

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

_____ \$ _____

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

| | | |
|----|--|------|
| \$ | | 0.00 |
|----|--|------|

Debtor: RHCSC Douglas Health Holdings LLC

Document Page 12 of 33

Case number (if known): 21-41038

Name

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- No. Go to Part 4.
- Yes. Fill in the information below.

Current value of debtor's interest

11. Accounts receivable

| | Description | face amount | doubtful or uncollectible accounts | =.... → | \$ |
|------|----------------------|-------------|------------------------------------|---------|----------|
| 11a. | 90 days old or less: | \$ _____ | - \$ _____ | → | \$ _____ |
| 11b. | Over 90 days old: | \$ _____ | - \$ _____ | → | \$ _____ |

12. Total of Part 3.

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

| | |
|----------|------|
| \$ _____ | 0.00 |
|----------|------|

Debtor: RHSCS Douglas Health Holdings LLC

Document Page 13 of 33

Case number (if known): 21-41038

Name

Part 4: Investments

13. Does the debtor own any investments?

- No. Go to Part 5.
- Yes. Fill in the information below.

| Valuation method used for current value | Current value of debtor's interest |
|---|------------------------------------|
|---|------------------------------------|

14. Mutual funds or publicly traded stocks not included in Part 1

Name of fund or stock:

_____ \$ _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity: _____ % of ownership: _____

_____ \$ _____

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

_____ \$ _____

17. Total of Part 4.

Add lines 14 through 16. Copy the total to line 83.

| | |
|----------|------|
| \$ _____ | 0.00 |
|----------|------|

Name

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- No. Go to Part 6.
- Yes. Fill in the information below.

| General description | Date of the last physical inventory | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|---|-------------------------------------|--|---|------------------------------------|
| 19. Raw materials | | \$ | | \$ |
| 20. Work in progress | | \$ | | \$ |
| 21. Finished goods, including goods held for resale | | \$ | | \$ |
| 22. Other inventory or supplies | | \$ | | \$ |

23. Total of Part 5.

Add lines 19 through 22. Copy the total to line 84.

| | |
|----|------|
| \$ | 0.00 |
|----|------|

24. Is any of the property listed in Part 5 perishable?

- No
- Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- No
- Yes. Description _____ Book value \$ _____ Valuation method _____ Current value \$ _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- No
- Yes

Debtor: RHCSC Douglas Health Holdings LLC

Document Page 15 of 33

Case number (if known):

21-41038

Name

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- No. Go to Part 7.
- Yes. Fill in the information below.

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|---|--|---|------------------------------------|
| 28. Crops—either planted or harvested | \$ _____ | _____ | \$ _____ |
| 29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish | \$ _____ | _____ | \$ _____ |
| 30. Farm machinery and equipment (Other than titled motor vehicles) | \$ _____ | _____ | \$ _____ |
| 31. Farm and fishing supplies, chemicals, and feed | \$ _____ | _____ | \$ _____ |
| 32. Other farming and fishing-related property not already listed in Part 6 | \$ _____ | _____ | \$ _____ |
| 33. Total of Part 6. Add lines 28 through 32. Copy the total to line 85. | | | \$ _____ 0.00 |

34. Is the debtor a member of an agricultural cooperative?

- No
- Yes. Is any of the debtor's property stored at the cooperative?
 - No
 - Yes

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

- No
- Yes. Description _____ Book value \$ _____ Valuation method _____ Current value \$ _____

36. Is a depreciation schedule available for any of the property listed in Part 6?

- No
- Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

- No
- Yes

Debtor: RHSCS Douglas Health Holdings LLC

Document Page 16 of 33

Case number (if known):

21-41038

Name

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- No. Go to Part 8.
- Yes. Fill in the information below.

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|---|--|---|------------------------------------|
| 39. Office furniture | \$ _____ | _____ | \$ _____ |
| 40. Office fixtures | \$ _____ | _____ | \$ _____ |
| 41. Office equipment, including all computer equipment and communication systems equipment and software | \$ _____ | _____ | \$ _____ |
| 42. Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles | \$ _____ | _____ | \$ _____ |

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

| | |
|----------|------|
| \$ _____ | 0.00 |
|----------|------|

44. Is a depreciation schedule available for any of the property listed in Part 7?

- No
- Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- No
- Yes

Debtor: RHCS Douglas Health Holdings LLC

Document Page 17 of 33

Case number (if known): 21-41038

Name

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- No. Go to Part 9.
- Yes. Fill in the information below.

| General description | Net book value of debtor's interest | Valuation method used for current value | Current value of debtor's interest |
|---|-------------------------------------|---|------------------------------------|
| Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number) | (Where available) | | |

47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

_____ \$ _____ \$ _____

48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

_____ \$ _____ \$ _____

49. Aircraft and accessories

_____ \$ _____ \$ _____

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

_____ \$ _____ \$ _____

51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

| | |
|----------|------|
| \$ _____ | 0.00 |
|----------|------|

52. Is a depreciation schedule available for any of the property listed in Part 8?

- No
- Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- No
- Yes

Name

Part 9: Real property

54. Does the debtor own or lease any real property?

- No. Go to Part 10.
- Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

| Description and location of property <small>Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.</small> | Nature and extent of debtor's interest in property | Net book value of debtor's interest <small>(Where available)</small> | Valuation method used for current value | Current value of debtor's interest |
|---|--|---|---|------------------------------------|
| 55.1 The Landings at Douglas assisted living facility located at 1360 West Gordon Street, Douglas, GA, 31533 | Fee Simple | \$ 2,007,797.62 | Net Book Value | \$ 2,007,797.62 |

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

| |
|-----------------|
| \$ 2,007,797.62 |
|-----------------|

57. Is a depreciation schedule available for any of the property listed in Part 9?

- No
- Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- No
- Yes

Name

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- No. Go to Part 11.
- Yes. Fill in the information below.

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|---|--|---|------------------------------------|
| 60. Patents, copyrights, trademarks, and trade secrets | | | |
| 60.1 None | \$ | | \$ |
| 61. Internet domain names and websites | | | |
| 61.1 None | \$ | | \$ |
| 62. Licenses, franchises, and royalties | | | |
| 62.1 None | \$ | | \$ |
| 63. Customer lists, mailing lists, or other compilations | | | |
| 63.1 None | \$ | | \$ |
| 64. Other intangibles, or intellectual property | | | |
| 64.1 Other Intangibles, or Intellectual Property | \$ | | \$ Unknown |
| 65. Goodwill | | | |
| 65.1 Goodwill | \$ | | \$ Unknown |

66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

| | |
|----|------|
| \$ | 0.00 |
|----|------|

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- No
- Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- No
- Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- No
- Yes

Name

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?
 Include all interests in executory contracts and unexpired leases not previously reported on this form.
 No. Go to Part 12.
 Yes. Fill in the information below.

Current value of debtor's interest

71. Notes receivable

| | | | |
|---------------------------------------|-------------------|------------------------------------|-------------|
| Description (include name of obligor) | Total face amount | doubtful or uncollectible accounts | |
| 71.1 None | \$ | - \$ | =..... → \$ |

72. Tax refunds and unused net operating losses (NOLs)

| | | | |
|--|---|----------|----|
| Description (for example, federal, state, local) | — | Tax year | \$ |
| 72.1 None | | | |

73. Interests in insurance policies or annuities

| | | |
|-------------------------------------|----|---------|
| 73.1 See Schedule A/B 73 Attachment | \$ | Unknown |
|-------------------------------------|----|---------|

74. Causes of action against third parties (whether or not a lawsuit has been filed)

| | |
|------------------|----|
| 74.1 None | \$ |
| Nature of claim | |
| Amount requested | \$ |

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

| | |
|------------------|----|
| 75.1 None | \$ |
| Nature of claim | |
| Amount requested | \$ |

76. Trusts, equitable or future interests in property

| | |
|-----------|----|
| 76.1 None | \$ |
|-----------|----|

77. Other property of any kind not already listed Examples: Season tickets, country club membership

| | |
|-----------|----|
| 77.1 None | \$ |
|-----------|----|

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

| | |
|----|------|
| \$ | 0.00 |
|----|------|

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- No
 Yes

Debtor: RHCS Douglas Health Holdings LLC

Document Page 21 of 33

Case number (if known): 21-41038

Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

| Type of property | Current value of personal property | Current value of real property |
|---|------------------------------------|--------------------------------|
| 80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i> | \$ 0.00 | |
| 81. Deposits and prepayments. <i>Copy line 9, Part 2.</i> | \$ 0.00 | |
| 82. Accounts receivable. <i>Copy line 12, Part 3.</i> | \$ 0.00 | |
| 83. Investments. <i>Copy line 17, Part 4.</i> | \$ 0.00 | |
| 84. Inventory. <i>Copy line 23, Part 5.</i> | \$ 0.00 | |
| 85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i> | \$ 0.00 | |
| 86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i> | \$ 0.00 | |
| 87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i> | \$ 0.00 | |
| 88. Real property. <i>Copy line 56, Part 9.....</i> → | | \$ 2,007,797.62 |
| 89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i> | \$ 0.00 | |
| 90. All other assets. <i>Copy line 78, Part 11.</i> | \$ 0.00 | |
| 91. Total. Add lines 80 through 90 for each column.....91a. | \$ 0.00 | \$ 2,007,797.62 |
| 92. Total of all property on Schedule A/B. Lines 91a + 91b = 92. | | \$ 2,007,797.62 |

Fill in this information to identify the case:

Debtor Name: In re : RHCSC Douglas Health Holdings LLC
 United States Bankruptcy Court for the: Northern District of Georgia
 Case number (if known): 21-41038 (PWB)

Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A
Amount of claim
 Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

| 2.1 Creditor's name | Describe debtor's property that is subject to a lien | | | |
|---|---|----|--------------|------------|
| UMB Bank, N.A., as Trustee <small>Creditor's Name</small> | Asserting blanket lien on substantially all assets of the debtor | \$ | 5,412,896.21 | \$ Unknown |
| Creditor's mailing address | Describe the lien | | | |
| Notice Name | UCC-1 filed asserting lien in connection with Wisconsin Public Finance Authority issued Series 2018A, Series 2018B, Series 2018C and Series 2018D Revenue Refunding Bonds | | | |
| 2 South Broadway <small>Street</small> | | | | |
| Suite 600 | Is the creditor an insider or related party? | | | |
| St. Louis MO 63102 <small>City State ZIP Code</small> | <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | |
| Country | Is anyone else liable on this claim? | | | |
| Creditor's email address, if known | <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors(Official Form 206H)</i> . | | | |
| Date debt was incurred See Footnote (1) | As of the petition filing date, the claim is: Check all that apply. | | | |
| Last 4 digits of account number | <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | | |
| Do multiple creditors have an interest in the same property? | | | | |
| <input checked="" type="checkbox"/> No | | | | |
| <input type="checkbox"/> Yes. Have you already specified the relative priority? | | | | |
| <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. | | | | |
| <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines | | | | |

(1) Series A&B 7/25/18 Series C&D 12/19/18

Debtor: RHCSC Douglas Health Holdings LLC

Document Page 23 of 33

Case number (if known): 21-41038

Name

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$ 5,412,896.21

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

| Name and address | On which line in Part 1 did you enter the related creditor? | Last 4 digits of account number for this entity |
|--|---|---|
| Greenberg Traurig, LLC Name <hr/> John D. Elrod Notice Name <hr/> 3333 Piedmont Road, NE, Suite 2500 Street <hr/> Terminus 200 <hr/> Atlanta GA 30305 City State ZIP Code <hr/> Country | Line 2.1 | |
| Greenberg Traurig, LLP Name <hr/> Kevin J. Walsh Notice Name <hr/> One International Place Street <hr/> Suite 2000 <hr/> Boston MA 02110 City State ZIP Code <hr/> Country | Line 2.1 | |
| Greenberg Traurig, LLP Name <hr/> Chip Azano Notice Name <hr/> One International Place Street <hr/> Suite 2000 <hr/> Boston MA 02110 City State ZIP Code <hr/> Country | Line 2.1 | |

Fill in this information to identify the case:

Debtor Name: In re : RHCSC Douglas Health Holdings LLC
 United States Bankruptcy Court for the: Northern District of Georgia
 Case number (if known): 21-41038 (PWB)

Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- No. Go to Part 2.
- Yes. Go to Line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

| | Total claim | Priority amount |
|--|-------------|-----------------|
| 2.1 Priority creditor's name and mailing address | \$ 4,000.75 | \$ 4,000.75 |

See Schedule E/F Part 1 Attachment
 Creditor Name

As of the petition filing date, the claim is: \$
 Check all that apply.

- Contingent
- Unliquidated
- Disputed

Creditor's Notice name

Address

Basis for the claim:

City State ZIP Code

Country

Date or dates debt was incurred

Last 4 digits of account number

Is the claim subject to offset?

- No
- Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1 Nonpriority creditor's name and mailing address

None _____

Creditor Name _____

Creditor's Notice name _____

Address _____

City State ZIP Code

Country _____

Date or dates debt was incurred _____

Last 4 digits of account _____

number

As of the petition filing date, the claim is: \$ _____

Check all that apply.

Contingent

Unliquidated

Disputed

Basis for the claim:

Is the claim subject to offset?

No

Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors. If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

| Name and mailing address | On which line in Part 1 or Part 2 is the related creditor (if any) listed? | Last 4 digits of account number, if any |
|-----------------------------------|--|---|
| Name _____ _____ | Line <input type="checkbox"/> Not Listed.Explain | _____ _____ |
| Notice Name _____ | _____ | _____ |
| Street _____ _____ _____ | _____ | _____ |
| City _____ | _____ | _____ |
| Country _____ | _____ | _____ |

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

| | | Total of claim amounts |
|---|----------|-------------------------------|
| 5a. Total claims from Part 1 | 5a. \$ | 4,000.75 |
| 5b. Total claims from Part 2 | 5b. + \$ | 0.00 |
| 5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c. | 5c. \$ | 4,000.75 |

Fill in this information to identify the case:

Debtor Name: In re : RHCSC Douglas Health Holdings LLC
 United States Bankruptcy Court for the: Northern District of Georgia
 Case number (if known): 21-41038 (PWB)

Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

| 2. List all contracts and unexpired leases | | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease | | |
|--|--|---|------------------------------|---|
| 2.1 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Real Property Lease for facility located at The Landings at Douglas</p> <p>State the term remaining</p> <p>1 year, 8 months (April 30, 2023)</p> <p>List the contract number of any government contract</p> | <p>RHCSC Douglas AL Holdings LLC</p> <hr/> <p>Name</p> <hr/> <p>Notice Name</p> <hr/> <p>PO Box 2568</p> <hr/> <p>Address</p> <hr/> <p>Hickory</p> <hr/> <p>City</p> | <p>NC</p> <hr/> <p>State</p> | <p>28603</p> <hr/> <p>ZIP Code</p> <hr/> <p>Country</p> |

Fill in this information to identify the case:

Debtor Name: In re : RHCSC Douglas Health Holdings LLC
 United States Bankruptcy Court for the: Northern District of Georgia
 Case number (if known): 21-41038 (PWB)

Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

- No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

| Column 1: Codebtor | | Column 2: Creditor | |
|-----------------------------------|---|----------------------------|---|
| Name | Mailing address | Name | Check all schedules that apply: |
| 2.1 RHCSC Douglas AL Holdings LLC | 1360 W. Gordon Street Street Douglas GA 31533 City State ZIP Code Country | UMB Bank, N.A., as Trustee | <input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |

Fill in this information to identify the case:

Debtor Name: In re : RHCSC Douglas Health Holdings LLC
United States Bankruptcy Court for the: Northern District of Georgia
Case number (if known): 21-41038 (PWB)

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Checkboxes for various schedules: Schedule A/B: Assets-Real and Personal Property, Schedule D: Creditors Who Have Claims Secured by Property, Schedule E/F: Creditors Who Have Unsecured Claims, Schedule G: Executory Contracts and Unexpired Leases, Schedule H: Codebtors, Summary of Assets and Liabilities for Non-Individuals, Amended Schedule, Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders, Other document that requires a declaration.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 10/07/2021 MM / DD / YYYY

Signature of individual signing on behalf of debtor

Katie S. Goodman Printed name

Chief Restructuring Officer Position or relationship to debtor

In re: RHCSC Douglas Health Holdings LLC

Case No. 21-41038

Schedule A/B 73

Interests in insurance policies or annuities

| Company | Account number / Policy number | Current value of debtor's interest |
|---|-----------------------------------|---------------------------------------|
| Everest Indemnity Insurance Co | SB00000001-21 | Unknown |
| Federal Insurance Group | 82481063 | Unknown |
| Great American Alliance Insurance Company | SB00000001-21 | Unknown |
| Great American Alliance Insurance Company | SBEX000001-211 | Unknown |
| Great American Alliance Insurance Company | WCE38376402 | Unknown |
| Philadelphia Insurance Companies | PHPK2308012 | Unknown |
| Westchester Surplus Lines Insurance Company | D42265743003 | Unknown |
| | TOTAL: | Unknown |

In re: RHCS Douglas Health Holdings LLC

Case No. 21-41038

Schedule E/F, Part 1

Creditors Who Have PRIORITY Unsecured Claims

| Line | Priority Creditor's Name | Address 1 | Address 2 | City | State | Zip | Specify Code subsection: 11 § U.S.C. 507(a)() | Basis for claim | Subject to offset (Y/N) | Contingent | Unliquidated | Disputed | Total claim | Priority amount |
|---------------|--------------------------------|-----------------------------|------------|--------------|-------|------------|--|---------------------|-------------------------|------------|--------------|-------------------|-------------------|-----------------|
| | | | | | | | | | | | | | | |
| 2.1 | Coffee County Tax Commissioner | PO Box 1207 | | Douglas | GA | 31534 | 8 | Property Taxes | N | | | | \$4,000.75 | \$4,000.75 |
| 2.2 | Georgia Department of Labor | 148 Andrew Young Intl Blvd | Suite 826 | Atlanta | GA | 30303-1751 | 8 | Governmental Agency | N | X | | | \$0.00 | \$0.00 |
| 2.3 | Georgia Department of Revenue | 1800 Century Blvd, NE | Suite 9100 | Atlanta | GA | 30345 | 8 | Taxing Authority | N | X | | | \$0.00 | \$0.00 |
| 2.4 | Internal Revenue Service | PO Box 7346 | | Philadelphia | PA | 19101-7346 | 8 | Taxing Authority | N | X | | | \$0.00 | \$0.00 |
| 2.5 | Internal Revenue Service | 401 W. Peachtree Street, NW | Stop 334-D | Atlanta | GA | 30308 | 8 | Taxing Authority | N | X | | | \$0.00 | \$0.00 |
| TOTAL: | | | | | | | | | | | | \$4,000.75 | \$4,000.75 | |