Fill in this information to identify the case:				
Debtor	4th Source Holding Corp.			
United States Ba	nkruptcy Court for the:	District of Delaware (State)		
Case number	23-11299			

Official Form 410

Proof of Claim 04/22

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 or 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.

P	art 1: Identify the Clai	ntify the Claim					
1.	Who is the current creditor?	Comptroller of the Treasury Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor					
2.	Has this claim been acquired from someone else?	✓ No Yes. From whom?					
3.	Where should notices and	Where should notices to the creditor be sent? Where should payments to the creditor different)					
	payments to the creditor be sent?	See summary page	,				
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)						
		Contact phone 4107671581 Contact email Twhite2@marylandtaxes.gov	Contact phone Contact email				
		Uniform claim identifier for electronic payments in chapter 13 (if you use	one):				
4.	Does this claim amend one already filed?	No✓ Yes. Claim number on court claims registry (if known)	Filed on <u>02/29/2024</u> MM / DD / YYYY				
5.	Do you know if anyone else has filed a proof of claim for this claim?	No Yes. Who made the earlier filing?					

Official Form 410 Proof of Claim

Part 2:	Give Information Abo	out the Claim as of the Date the Case Was Filed
6 Do v	ou have any number	No.

6.	Do you have any number you use to identify the	☑ No		
	debtor?	Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:		
7.	How much is the claim?	. Does this amount include interest or other charges?		
		☑ No		
		Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).		
8.	What is the basis of the	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.		
	claim?	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.		
		Corporation Tax		
9.	Is all or part of the claim	✓ No		
	secured?	Yes. The claim is secured by a lien on property.		
		Nature or property:		
		Real estate: If the claim is secured by the debtor's principle residence, file a <i>Mortgage Proof of</i>		
		Claim Attachment (Official Form 410-A) with this Proof of Claim. Motor vehicle		
		Other. Describe:		
		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 amount 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		
10.	Is this claim based on a lease?	✓ No Yes. Amount necessary to cure any default as of the date of the petition. \$		
11.	Is this claim subject to a	☑ No		
	right of setoff?	Yes. Identify the property:		

Official Form 410 Proof of Claim

12. Is all or part of the claim	□ No					
entitled to priority under 11 U.S.C. § 507(a)?	_	k all that apply:		Amount entitled to priority		
A claim may be partly priority and partly	Dome		ding alimony and child support) und (B).	er		
nonpriority. For example, in some categories, the law limits the amount			purchase, lease, or rental of proper household use. 11 U.S.C. § 507(a			
entitled to priority.	days l		(up to \$15,150*) earned within 180 n is filed or the debtor's business e 07(a)(4).			
	✓ Taxes	or penalties owed to govern	mental units. 11 U.S.C. § 507(a)(8)	\$ <u>3123.00</u>		
	Contri	ibutions to an employee ber	efit plan. 11 U.S.C. § 507(a)(5).	\$		
	Other	. Specify subsection of 11 U	.S.C. § 507(a)() that applies.	\$		
	* Amounts	are subject to adjustment on 4/01	/25 and every 3 years after that for cases	begun on or after the date of adjustment.		
13. Is all or part of the claim entitled to administrative priority pursuant to 11 U.S.C. 503(b)(9)?	13. Is all or part of the claim entitled to administrative priority pursuant to 11 Yes. Indicate the amount of your claim arising from the value of any goods received by the debtor within 2					
Part 3: Sign Below						
The person completing this proof of claim must sign and date it. FRBP 9011(b). If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is. 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.	I am the trust I am a guaran I understand that a the amount of the I have examined the I declare under per Executed on date /s/Tria White Signature	itor. itor's attorney or authorized attee, or the debtor, or their author, surety, endorser, or other authorized signature on the claim, the creditor gave the cone information in this <i>Proof or</i> nalty of perjury that the foregonalty of the person who is completed. It is white First name Revenue Examiner II Comptroller of the	horized agent. Bankruptcy Rule 3005. er codebtor. Bankruptcy Rule 3005. is Proof of Claim serves as an ackniebtor credit for any payments received	owledgement that when calculating yed toward the debt. hat the information is true and correct. Last name		
	Address					
	Contact phone		Email			



Official Form 410 Proof of Claim

KCC ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (866) 548-5856 | International (781) 575-2073

Debtor:			
23-11299 - 4th Source Holding Corp.			
District:			
District of Delaware			
Creditor:	Has Supporting Doc	umentation:	
Comptroller of the Treasury		ng documentation successfully uploaded	
301 W Preston Street Room #409	Related Document S		
301 W Flesion Street Room #409			
Baltimore, Maryland, 21201	Has Related Claim:		
United States	No		
Phone:	Related Claim Filed	Ву:	
4107671581	Filing Party:		
Phone 2:	Creditor		
Fax:	Creditor		
Email:			
Twhite2@marylandtaxes.gov			
Other Names Used with Debtor:	Amends Claim:		
Other Names osed with Deptor.	Yes, 02/29/2024		
	Acquired Claim:		
	No		
Basis of Claim:	Last 4 Digits:	Uniform Claim Identifier:	
Corporation Tax	No No		
Total Amount of Claim:	Includes Interest or Charges:		
3123.00	No		
Has Priority Claim:	Priority Under:		
Yes	-	07(a)(8): 3123.00	
Has Secured Claim:	Nature of Secured A		
No	Value of Property:	anount.	
Amount of 503(b)(9):			
No	Annual Interest Rate):	
Based on Lease:	Arrearage Amount:		
No	Basis for Perfection:		
Subject to Right of Setoff:			
No	Amount Unsecured:		
Submitted By:			
Tria White on 01-Mar-2024 2:22:31 p.m. Eastern Time			
Title:			
Revenue Examiner III			
Company:			
00pa			

Comptroller of the Treasury

IN THE MATTER OF: : UNITED STATES BANKRUPTCY COURT

4TH SOURCE HOLDING CORP : DISTRICT OF DELAWARE

: CASE NUMBER: 23-11299

: CHAPTER: 11 LEAD #23-11294

AMENDED PROOF OF CLAIM

Debtor,

Lisa LeCompte, the undersigned, is an agent for the State of Maryland, Comptroller of the Treasury, Room 409, State Office Building, 301West Preston Street, Baltimore, Maryland 21201 duly authorized to make this Proof of Claim on behalf of the Comptroller.

The above debtor is justly and truly indebted to the State of Maryland, Comptroller of the Treasury, as follows:

**This Claim covers the following: UNDERPAID CORPORATE TAX YEARS 2021 AND 2022.

	Tax	Interest	Penalty	Total
Sales and Use Priority				
Unsecured				
Withholding Priority				
Unsecured				
CORPORATE PRIORITY Priority	\$3,087.00	\$36.00		\$3,123.00
Unsecured				\$0.00
Total Claim	\$3,087.00	\$36.00	\$0.00	\$3,123.00

No judgment has been rendered on and no security interest is held for this claim, and this claim is not subject to any set-off or counterclaim except for the liens filed on:

Tax and Interest entitled to priority under Section 507 of the Bankruptcy Code.

STATE OF MARYLAND COMPTROLLER OF THE TREASURY

	7/1/		
Bv:	T.W.	/s/ Lisa LeCompte	410-767-1653

FEIN/CR#83-2449629