

Fill in this information to identify the case:

Debtor QLess, Inc.

United States Bankruptcy Court for the: _____ District of Delaware
(State)

Case number 24-11395

**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.

Part 1: Identify the Claim

<p>1. Who is the current creditor?</p>	<p><u>Colorado Department of Revenue</u></p> <p><small>Name of the current creditor (the person or entity to be paid for this claim)</small></p> <p>Other names the creditor used with the debtor _____</p>	
<p>2. Has this claim been acquired from someone else?</p>	<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. From whom? _____</p>	
<p>3. Where should notices and payments to the creditor be sent?</p> <p><small>Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)</small></p>	<p>Where should notices to the creditor be sent?</p> <p>Colorado Department of Revenue Bankruptcy Unit, Rm 104 1881 Pierce St Lakewood, CO 80214, United States</p>	<p>Where should payments to the creditor be sent? (if different)</p>
	<p>Contact phone <u>3038663711</u></p> <p>Contact email <u>dor_tac_bankruptcy@state.co.us</u></p>	<p>Contact phone _____</p> <p>Contact email _____</p>
	<p><small>Uniform claim identifier for electronic payments in chapter 13 (if you use one):</small></p> <p>_____</p>	
<p>4. Does this claim amend one already filed?</p>	<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on _____ <small>MM / DD / YYYY</small></p>	
<p>5. Do you know if anyone else has filed a proof of claim for this claim?</p>	<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Who made the earlier filing? _____</p>	



Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor? No
 Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 5885 ___ ___

7. How much is the claim? \$ 14,565. 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 claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
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.

The grounds of liability is tax due under Colorado Statutes as Revised

9. Is all or part of the claim secured? No
 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 *Mortgage Proof of Claim 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 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 right of setoff? No
 Yes. Identify the property: _____



12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

- No
 Yes. Check all that apply:

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

	Amount entitled to priority
<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$ _____
<input type="checkbox"/> Up to \$3,350* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$ _____
<input type="checkbox"/> Wages, salaries, or commissions (up to \$15,150*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).	\$ _____
<input checked="" type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$ <u>9004.00</u>
<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$ _____
<input type="checkbox"/> 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.

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.

Check the appropriate box:

- I am the creditor.
 I am the creditor's attorney or authorized agent.
 I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
 I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgement that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have reasonable belief that the information is true and correct.

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

Executed on date 07/19/2024
MM / DD / YYYY

/s/Carolyn Cordean
 Signature

Print the name of the person who is completing and signing this claim:

Name Carolyn Cordean
First name Middle name Last name

Title Bankruptcy Compliance Specialist

Company Colorado Department of Revenue
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address _____

Contact phone _____ Email _____



Verita (KCC) ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (866) 967-0493 | International (310) 751-2693

Debtor: 24-11395 - QLess, Inc. District: District of Delaware		
Creditor: Colorado Department of Revenue Bankruptcy Unit, Rm 104 1881 Pierce St Lakewood, CO, 80214 United States Phone: 3038663711 Phone 2: Fax: Email: dor_tac_bankruptcy@state.co.us	Has Supporting Documentation: Yes, supporting documentation successfully uploaded Related Document Statement:	
	Has Related Claim: No Related Claim Filed By:	
	Filing Party:	
Other Names Used with Debtor:	Amends Claim: No Acquired Claim: No	
Basis of Claim: The grounds of liability is tax due under Colorado Statutes as Revised	Last 4 Digits: Yes - 5885	Uniform Claim Identifier:
Total Amount of Claim: 14,565	Includes Interest or Charges: Yes	
Has Priority Claim: Yes	Priority Under: 11 U.S.C. §507(a)(8): 9004.00	
Has Secured Claim: No Based on Lease: No Subject to Right of Setoff: No	Nature of Secured Amount: Value of Property: Annual Interest Rate: Arrearage Amount: Basis for Perfection: Amount Unsecured:	
Submitted By: Carolyn Cordean on 19-Jul-2024 12:25:22 p.m. Eastern Time Title: Bankruptcy Compliance Specialist Company: Colorado Department of Revenue		



Jul 19, 2024

QLESS INC
21 MILLER ALY STE 210
PASADENA CA 91103-5600

Account: 30262392
Letter: L0286551824
Source: TPC

UNITED STATES BANKRUPTCY COURT
FOR THE
Delaware Bankruptcy Court Wilmington -
District of Delaware

Case #: 2411395BLS
Chapter #: Chapter 11
Filing Date: 19-Jun-2024

IN THE MATTER OF: QLESS INC

27-1155885

1. The undersigned, whose business address is 1881 Pierce St, Lakewood, CO 80214, is an agent of the Department of Revenue, Tax Audit & Compliance Division, and is authorized to make this proof of claim on behalf of the State of Colorado, Department of Revenue.
2. The debtor is indebted to the State of Colorado in the amount of \$14,565.00, as stated below, as of the petition date.
3. The basis of the claim is taxes, fees, and/or surcharges due under the Colorado Revised Statutes.

ID	Liability Type	Filing	Assessed	Tax/Fee Amount	Penalty	Interest	Period Status	Comment
27-1155885	WTH	12/31/2016	1/9/2020	\$2,431.00	\$1,705.00	\$1,479.00	Unsecured Priority Claim	
27-1155885	WTH	12/31/2017	1/10/2018	\$3,299.00	\$2,213.00	\$1,740.00	Unsecured Priority Claim	
27-1155885	WTH	05/31/2018	6/18/2018	\$0.00	\$252.00	\$1.00	Unsecured Priority Claim	
27-1155885	WTH	07/31/2018	11/7/2018	\$0.00	\$266.00	\$30.00	Unsecured Priority Claim	
27-1155885	WTH	08/31/2018	11/7/2018	\$0.00	\$196.00	\$15.00	Unsecured Priority Claim	
27-1155885	WTH	09/30/2018	11/7/2018	\$0.00	\$114.00	\$3.00	Unsecured Priority Claim	
27-1155885	WTH	11/30/2018	12/18/2018	\$0.00	\$147.00	\$0.00	Unsecured Priority Claim	
27-1155885	WTH	12/31/2018	1/29/2019	\$0.00	\$181.00	\$5.00	Unsecured Priority Claim	
27-1155885	WTH	07/31/2019	8/16/2019	\$0.00	\$220.00	\$0.00	Unsecured Priority Claim	
27-1155885	WTH	09/30/2019	10/16/2019	\$0.00	\$267.00	\$1.00	Unsecured Priority Claim	
Total Secured:		\$0.00	Total Priority:	\$ 9,004.00	Total General:	\$ 5,561.00	Total Claim:	\$14,565.00

PLEASE SEND PAYMENT OR CORRESPONDENCE TO:
Bankruptcy Department, Rm 104
1881 Pierce St
Lakewood, CO 80214 Phone 303-866-3711

Penalty for presenting fraudulent claim
Fine of not more than \$500,000 or imprisonment for not more than 5
Years or both, Title 18 USC 152 and 3571