

FEB 11 2025

Nathan Ochsner, Clerk of Court

Fill in this information to identify the case:

Debtor 1 The Container Store, Inc.
Debtor 2 _____
(Spouse, if filing)
United States Bankruptcy Court for the: Southern District of Texas
Case number 24-90626

Official Form 410

Proof of Claim

04/19

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?	<u>North Carolina Department of Revenue</u> <small>Name of the current creditor (the person or entity to be paid for this claim)</small> Other names the creditor used with the debtor _____	
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent? <u>Bankruptcy Unit</u> <small>Name</small> <u>P.O. Box 1168</u> <small>Number Street</small> <u>Raleigh NC 27602</u> <small>City State ZIP Code</small> Contact phone <u>(919) 754-2542</u> Contact email _____ Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	Where should payments to the creditor be sent? (if different) <small>Name</small> _____ <small>Number Street</small> _____ <small>City State ZIP Code</small> Contact phone _____ Contact email _____
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on ____ / ____ / ____ <small>MM DD YYYY</small>	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____	



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: 6 9 8 1

7. How much is the claim? \$ 11,509.74. 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.
Taxes _____

9. 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 *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 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

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)?

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

☐ No

☒ Yes. Check one:

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

Amount entitled to priority

\$ _____

☐ Up to \$3,025* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

\$ _____

☐ Wages, salaries, or commissions (up to \$13,650*) 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).

\$ _____

☒ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

\$ 7,648.68

☐ Contributions to an employee benefit 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 4/01/22 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 acknowledgment 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 a 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 1/30/2025
MM / DD / YYYY

DocuSigned by:

Tabetha L Priest

9C789936CFFC47E

Signature

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

Name Tabetha L Priest
First name Middle name Last name

Title Manager / Bankruptcy Unit

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

Address 501 N. Wilmington Street
Number Street

Raleigh NC 27604
City State ZIP Code

Contact phone (919) 754-2542 Email _____

-Docusign Envelope ID: 8EEC00D8-4607-4C4C-B2C9-028E2C63BD25

**NC DEPARTMENT OF REVENUE
CLAIM EXHIBIT
UNSECURED GENERAL CLAIM**

ID No. XX-XXX6981

ID Re: THE CONTAINER STORE, INC.
500 FREEPORT PARKWAY
COPPELL, TX 75019

Entity ID	Tax Schedule	Account ID	Tax Period	Date Assessed	Pre-Petition Through-Date				Payment Received	Balance Due
					Tax Due	Pre-Petition Interest	Pre-Petition Penalty			
1/XX-XXX6981	Sales & Use	600772975	05/01/2020-05/31/2020	09/22/2020	\$0.00	\$0.00	\$3,696.06		\$0.00	\$3,696.06
1/XX-XXX6981	Corporate Income		04/01/2021-03/31/2022	04/27/2023	\$0.00	\$0.00	\$165.00		\$0.00	\$165.00
Grand Totals					\$0.00	\$0.00	\$3,861.06		\$0.00	\$3,861.06

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**NC DEPARTMENT OF REVENUE
CLAIM EXHIBIT
UNSECURED PRIORITY CLAIM**

ID No. XX-XXX6981

ID Re THE CONTAINER STORE, INC.
500 FREEPORT PARKWAY
COPPELL, TX 75019

Pre-Petition Through-Date 12/22/2024

Entity ID	Tax Schedule	Account No.	Tax Period	Date Assessed	Tax Due	Pre-Petition Interest	Payment Received	Balance Due
1/XX-XXX6981	Sales & Use	600772975	05/01/2020-05/31/2020	09/22/2020	\$73,921.17	\$920.85	\$73,921.17	\$920.85
1/XX-XXX6981	Corporate Income		04/01/2021-03/31/2022	04/27/2023	\$59,744.00	\$983.83	\$54,000.00	\$6,727.83
Grand Totals					\$133,665.17	\$1,904.68	\$127,921.17	\$7,648.68

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