Fill in this information to identify the case:

Debtor 1 CUMULUS MEDIA INC.

Debtor 2 (Spouse, if filing)

United States Bankruptcy Court for the: **Southern District of Texas**

Case number 26-90346-ARP

☑ **Date Stamped Copy Returned**
☐ **No self addressed stamped envelope**
☐ **No copy to return**

Official Form 410

Proof of Claim

04/25

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?**
   CARROLLTON-FARMERS BRANCH INDEPENDENT SCHOOL DISTRICT
   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 payments to the creditor be sent?**
   Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

Where should notices to the creditor be sent?	**Where should payments to the creditor be sent?** (if different)
LINDA D. REECE Name	CARROLLTON-FARMERS BRANCH INDEPENDENT SCHOOL DISTRICT Name
1919 S. SHILOH ROAD, SUITE 640, LB 40 Number Street	1919 S, SHILOH ROAD, SUITE 640, LB 40 Number Street
GARLAND TX 75042 City State ZIP Code	Garland TX 75042 City State ZIP Code
Contact phone (972) 278-8282	Contact phone
Contact email LReece@pbfcm.com	Contact email

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Uniform claim identifier (if you use one): None

4. **Does this claim amend one already filed?**
   ☒ No
   ☐ Yes. Claim number on court claims registry (if known) _____ Filed on ____ 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?

269034626032300000000000005

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: ____ ____ ____ ____
     Please see attached statement.

7. **How much is the claim?** $9,317.77
   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.
   Ad Valorem Property 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: Personal Property

   The debt is incurred January 1st of each year pursuant to Sections 32.01, 32.05, and 32.07 of the Texas Property Tax Code and is automatically perfected as a matter of law.

   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: Fully Secured
   Amount of the claim that is secured: $9,317.77
   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: ____

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   Annual Interest Rate (when case was filed) 12%
   - ☒ 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:*

	Amount entitled to priority
☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	$_____
☐ Up to $3,800* 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 $17,150*) 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).	$_____
☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	$0.00
☐ 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 4/01/28 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)(3) 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 3/12/2026
MM / DD / YYYY



Signature

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

Name: LINDA D. REECE
First name | Middle name | Last name

Title: Attorney for Claimant

Company: Perdue, Brandon, Fielder, Collins & Mott, L.L.P.
Identify the corporate servicer as the company if the authorized agent is a servicer.

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Address: 1919 S. SHILOH ROAD, SUITE 640, LB 40
Number Street

GARLAND | TX | 75042
City | State | ZIP Code

Contact phone: (972) 278-8282 Email: LReece@pbfcm.com

Tax Statement

CARROLLTON-FARMERS BRANCH INDEPENDENT SCHOOL DISTRICT

P.O. BOX 110611
CARROLLTON, TX 75011

CUMULUS MEDIA
STE 500
750 JOHNSON FERRY RD
ATLANTA, GA 30342-

Taxpayer ID: 3248

IF YOU ARE 65 YEARS OF AGE OR OLDER OR ARE DISABLED AND YOU OCCUPY THE PROPERTY DESCRIBED IN THIS DOCUMENT AS YOUR RESIDENCE HOMESTEAD, YOU SHOULD CONTACT THE APPRAISAL DISTRICT REGARDING ANY ENTITLEMENT YOU MAY HAVE TO A POSTPONEMENT IN THE PAYMENT OF THESE TAXES.

	Tax Year	Tax Due	P and I	Total Due	
CARROLLTON-FARMERS BRANCH INDEPENDENT SCHOOL DISTRICT					
Legal: PERSONAL PROPERTY TM STUDIOS GEO Code: 99903300000019850 Client Property Code:					
	2026	$837.45	$0.00	$837.45	est
Legal: PERSONAL PROPERTY LUMULUS MEDIA INC 1799 LEDBETTER RD GEO Code: 99220512170000000 Client Property Code:					
	2026	$1,467.27	$0.00	$1,467.27	est
CARROLLTON-FARMERS BRANCH INDEPENDENT SCHOOL DISTRICT TOTAL -->				$2,304.72	

Total If Paid By 3/31/2026 **$2,304.72**

Tax Statement

CARROLLTON-FARMERS BRANCH INDEPENDENT SCHOOL DISTRICT

P.O. BOX 110611
CARROLLTON, TX 75011

CUMULUS MEDIA TOWER CO LLC
STE 200
750 PARK OF COMMERCE DR
BOCA RATAN, FL 33487-3650

Taxpayer ID: 127994

IF YOU ARE 65 YEARS OF AGE OR OLDER OR ARE DISABLED AND YOU OCCUPY THE PROPERTY DESCRIBED IN THIS DOCUMENT AS YOUR RESIDENCE HOMESTEAD, YOU SHOULD CONTACT THE APPRAISAL DISTRICT REGARDING ANY ENTITLEMENT YOU MAY HAVE TO A POSTPONEMENT IN THE PAYMENT OF THESE TAXES.

Tax Year	Tax Due	P and I	Total Due	
CARROLLTON-FARMERS BRANCH INDEPENDENT SCHOOL DISTRICT				
Legal: THOMAS EASTER ABST 431 PG 330 TR 4 ACS 15.755 1799 LEDBETTER RD GEO Code: 65043133010040000 Client Property Code:				
2026	$6,427.66	$0.00	$6,427.66	est
Legal: THOMAS EASTER ABST 431 PG 330 TR 4.1 ACS. 1.514 1700 LEDBETTER RD GEO Code: 65043133010040100 Client Property Code:				
2026	$394.75	$0.00	$394.75	est
Legal: BLK 8458 TR 2 ACS 0.162 1700 LEDBETTER RD GEO Code: 00845800000020000 Client Property Code:				
2026	$42.24	$0.00	$42.24	est
Legal: THOMAS EASTER ABST 431 PG 330 TR 4.2 ACS 0.569 1791 LEDBETTER RD GEO Code: 65043133010040200 Client Property Code:				
2026	$148.40	$0.00	$148.40	est
CARROLLTON-FARMERS BRANCH INDEPENDENT SCHOOL DISTRICT TOTAL -->			$7,013.05	

Total If Paid By 3/31/2026 **$7,013.05**