Your claim can be filed electronically on Verita's website at https://www.veritaglobal.net/EpicCreations

ID: 26376424 PIN: 9tfwfVnV

United States Bankruptcy Court for the District of Delaware

Indicate Debtor against which you assert a claim by checking the appropriate box below. (Check only one Debtor per claim form.)

XX Epic! Creations, Inc (Case No. 24-11161) ☐ Neuron Fuel, Inc. (Case No. 24-11162) ☐ Tangible Play, Inc. (Case No. 24-11163)

Modified 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. Other than a claim under 11 U.S.C. § 503(b)(9), this form should not be used to make a claim for an administrative expense arising after the commencement of the case.

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.

Part 1: Identify the Claim

NameID: 15726967

1. **Who is the current creditor?**
   Hawaii Department of Tax
   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?
   Hawaii Department of Tax
   830 Punchbowl Street
   Honolulu, HI 96813
   Address
   Contact phone
   Contact email

   Where should payments to the creditor be sent? (if different)
   Department of Taxation, State of Hawaii
   Name
   P O Box 259 Attn: Bankruptcy Unit M Robideau
   Number Street
   Honolulu HI 96809-0259
   City State ZIP Code
   Country
   Contact phone 808 543-6820 x 4024
   Contact email

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   MAR 10 2025
   VERITA GLOBAL

   Uniform claim identifier for electronic payments in chapter 13 (if you use one):

4. **Does this claim amend one already filed?**
   XX 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?**
   XX No
   ☐ Yes. Who made the earlier filing?

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