Case 17-26335 Doc 1 Filed 12/05/17 Page 1 of 27

Fill	in this information to ident	ify your case:				
Uni	ited States Bankruptcy Court	for the:				
DIS	STRICT OF MARYLAND		_			
Cas	se number (if known)		Chapter 11			
				Check if this an amended filing		
V(ore space is needed, attach	on for Non-Individu a separate sheet to this form. On the to the document, Instructions for Bankrupt	op of any additional pages, write the	e debtor's name and case number (if known).		
1.	I. Debtor's name The Islamic Research and Humanitarian Services Center, Inc					
2.	All other names debtor used in the last 8 years					
	Include any assumed names, trade names and doing business as names					
3.	Debtor's federal Employer Identification Number (EIN)	52-2287842				
4.	Debtor's address	Principal place of business	Mailing addre business	ess, if different from principal place of		
		1 Chamber Ave Capitol Heights, MD 20743				
		Number, Street, City, State & ZIP Code	P.O. Box, Num	nber, Street, City, State & ZIP Code		
		Prince Georges County	Location of p place of busin	rincipal assets, if different from principal ness		
			Number, Stree	t, City, State & ZIP Code		
5.	Debtor's website (URL)					
6.	Type of debtor	Corporation (including Limited Liabil	ity Company (LLC) and Limited Liabilit	v Partnershin (LLP))		
		☐ Partnership (excluding LLP)	, Jampany (LEO) and Emmod Elabilit	,		

☐ Other. Specify:

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Deb	or The Islamic Research	h and Humanitaria	n Services Center	, Case	number (if known)		
	Name			_			
_	5						
7.	Describe debtor's business	_	: / defined in 4	41100 0 404(074))			
				1 U.S.C. § 101(27A))			
		_	•	n 11 U.S.C. § 101(51B)		
			ned in 11 U.S.C. § 10				
			defined in 11 U.S.C. §	. ,,			
			ker (as defined in 11 L	- ' ' ' '			
		☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))					
		None of the abo	ve				
		B. Check all that app	nlv				
			•	11.0.0. 0504)			
			y (as described in 26	= '			
					nent vehicle (as defined in 15 U.S.C. §80a-3)		
		investment advis	sor (as defined in 15 l	J.S.C. §80b-2(a)(11))			
		C. NAICS (North An	nerican Industry Class	sification System) 4-dig	t code that best describes debtor.		
		See http://www.uscourts.gov/four-digit-national-association-naics-codes.					
8.	Under which chapter of the	Check one:					
	Bankruptcy Code is the	☐ Chapter 7					
	debtor filing?	☐ Chapter 9					
		Chapter 11. Check all that apply:					
		Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates)					
					ect to adjustment on 4/01/19 and every 3 years a		
			■ The debtor is a	small business debtor	as defined in 11 U.S.C. § 101(51D). If the debtor i	s a small	
			business debtor	, attach the most recen	t balance sheet, statement of operations, cash-flo	wc	
			•	ederal income tax retu U.S.C. § 1116(1)(B).	n or if all of these documents do not exist, follow	the	
			☐ A plan is being f	- ,,,,			
			☐ Acceptances of	the plan were solicited	prepetition from one or more classes of creditors	, in	
				11 U.S.C. § 1126(b).	•		
				The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the			
					n-Individuals Filing for Bankruptcy under Chapter		
			(Official Form 20	01A) with this form.			
			☐ The debtor is a	shell company as defin	ed in the Securities Exchange Act of 1934 Rule 1	2b-2.	
		☐ Chapter 12					
9.	Were prior bankruptcy	■ No.					
	cases filed by or against	_					
	the debtor within the last 8 years?	☐ Yes.					
	If more than 2 cases, attach a	5 1					
	separate list.	District _		When	Case number		
		District		When	Case number		
10	Are any bankruptcy cases	-					
	pending or being filed by a	■ No					
	business partner or an affiliate of the debtor?	☐ Yes.					
	List all cases. If more than 1,						
	attach a separate list	Debtor			Relationship		
		District		When	Case number, if known		

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Deb	In	ıc	rch and I	and Humanitarian Services Center, Case number (if known)				n)
	Na	ame						
11.		Why is the case filed in		ll that apply	<i>/</i> :			
	this di	is district?					ness, or principal assets art of such 180 days thar	in this district for 180 days immediately n in any other district.
			□ A	bankruptcy	case concerning deb	otor's affiliate, ger	neral partner, or partner	ship is pending in this district.
12.	Does t	Does the debtor own or						
	real pr	ossession of any operty or personal	■ No □ Yes.	Answer b	pelow for each proper	ty that needs imm	nediate attention. Attach	additional sheets if needed.
		ty that needs liate attention?		Why doe	es the property need	l immediate atte	ntion? (Check all that a	apply.)
				☐ It pos	es or is alleged to pos	se a threat of imm	ninent and identifiable ha	azard to public health or safety.
				What i	s the hazard?			
				☐ It nee	ds to be physically se	cured or protecte	ed from the weather.	
								or lose value without attention (for example, d assets or other options).
				☐ Other				
				Where is	the property?	-		
						Number, Street	t, City, State & ZIP Code	9
				_	operty insured?			
				☐ No				
				☐ Yes.	Insurance agency			
					Contact name			
					Phone			
	St	tatistical and admin	istrative i	nformatio	n			
13.		r's estimation of ole funds	. (Check one: _				
				Funds w	ill be available for dis	tribution to unsec	cured creditors.	
				☐ After any	/ administrative exper	nses are paid, no	funds will be available t	to unsecured creditors.
14.		ated number of	■ 1-49			1 ,000-5,	000	□ 25,001-50,000
	credito	ors	□ 50-99)		<u></u> 5001-10		<u> </u>
			☐ 100-1			☐ 10,001-2	25,000	☐ More than100,000
			200-9					
15.	Estima	ated Assets	□ \$0 - \$	50,000			001 - \$10 million	☐ \$500,000,001 - \$1 billion
				01 - \$100,			,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
				,001 - \$500 ,001 - \$1 m			,001 - \$100 million 0,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
			— \$500,	υυ i - φ i II	mmorr	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	-,-3. 4000 mmon	
16.	Estima	ated liabilities	= \$0 - \$	50,000			001 - \$10 million	☐ \$500,000,001 - \$1 billion
				001 - \$100			,001 - \$50 million	\$1,000,000,001 - \$10 billion
				001 - \$500 001 - \$1 m			,001 - \$100 million 0,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
			□ \$500,	-υυι - φιπ	IIIIION	_ \ \ . \ \ \ . \ \ \ \ \ \ \ \ \ \ \ \	-,-5. 4 000 mmon	

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Debtor	The Islamic Resolnc	earch and Humanitarian Services Center,	Case number (if known)					
	Name							
	Request for Relief	, Declaration, and Signatures						
WARNIN		d is a serious crime. Making a false statement in connec or up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,	tion with a bankruptcy case can result in fines up to \$500,000 or and 3571.					
of au	aration and signatu athorized esentative of debtor	The debtor requests relief in accordance with the ch	The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		I have been authorized to file this petition on behalf of the debtor.						
		I have examined the information in this petition and	have a reasonable belief that the information is trued and correct.					
		I declare under penalty of perjury that the foregoing	is true and correct.					
		Executed on December 5, 2017 MM / DD / YYYY						
		X /s/ Talib Abdul Samad	Talib Abdul Samad					
		Signature of authorized representative of debtor	Printed name					
		Title						
I8. Sign	ature of attorney	X /s/ Anu KMT	Date December 5, 2017					
		Signature of attorney for debtor	MM / DD / YYYY					
		Anu KMT 15398						
		Printed name						
		Kemet Hunt Law Group, Inc						
		5000 Sunnyside Dr Suite 101 Beltsville, MD 20705						
		Number, Street, City, State & ZIP Code						
		Contact phone 301.982.0888 Email	address akemet@kemethuntlaw.com					

15398

Bar number and State

Fill in this information to identify the case:							
Debtor name The Islamic Research and Humanitarian Services Center, Inc	_						
United States Bankruptcy Court for the: DISTRICT OF MARYLAND	_						
Case number (if known)							
	☐ Check if this is an amended filing						
	amended ming						
Official Form 202							
Declaration Under Penalty of Perjury for Non-Indivi	dual Debtors 12/15						
beclaration officer remarks of resputy for Hon-marks	dual Debtol 3 12/19						
An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any imendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011. VARNING Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 519, and 3571.							
Declaration and signature I am the president, another officer, or an authorized agent of the corporation; a member or an authorize	d agent of the partnership; or another						
individual serving as a representative of the debtor in this case.							
I have examined the information in the documents checked below and I have a reasonable belief that the	e information is true and correct:						
☐ Schedule A/B: Assets–Real and Personal Property (Official Form 206A/B)							
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)							
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)							
Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)							
 □ Schedule H: Codebtors (Official Form 206H) □ Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum) 							
Amended Schedule							
Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims	and Are Not Insiders (Official Form 204)						
Other document that requires a declaration							
I declare under penalty of perjury that the foregoing is true and correct.							
Executed on December 5, 2017 X /s/ Talib Abdul Samad							
Signature of individual signing on behalf of debtor							
Talib Abdul Samad							
Printed name							
Position or relationship to debtor							

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

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Fill in this inform	mation to identify the case:	
Debtor name	The Islamic Research and Humanitarian Services Center,	
	Inc	
United States E	Bankruptcy Court for the: DISTRICT OF MARYLAND	☐ Check if this is an
Case number (if known):	amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and
Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	If the claim is fully unsecured, fill in only unsecured claim amount. claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		nt and deduction for
Estate of Jacob Brentzel C/O Patti B. Hoellich 8469 St. Andrews Drive Chesapeake Beach, MD 20732		5305 Altoona Street, Capitol Heights, MD 20743 (a/k/a 1 Chamber St)	Disputed	Unknown	\$667,200.00	Unknown

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Fill in this information to identify the case:	
Debtor name	
United States Bankruptcy Court for the: DISTRICT OF MARYLAND	
Case number (if known)	
	☐ Check if this is an amended filing
Official Form 206Sum	
Summary of Assets and Liabilities for Non-Individuals	12/15
Part 1: Summary of Assets	
Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)	

Par	t1: Summary of Assets		
1.	Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)		
	1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$	667,200.00
	1b. Total personal property: Copy line 91A from <i>Schedule A/B.</i>	\$	0.00
	1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$	667,200.00
Par	t 2: Summary of Liabilities		
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)		
	3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of Schedule E/F	\$	0.00
	3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$	0.00
4.	Total liabilities	\$	0.00

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		0400	77 20000 B	00 1 1 110d 12/00/11	1 ago o o 27	
		formation to identify the c				
	or name			an Services Center, Inc		
Unite	d States	s Bankruptcy Court for the:	DISTRICT OF MARY	/LAND		
Case	numbe	r (if known)				Check if this is an amended filing
Off	icial	Form 206A/B				
Scl	hed	ule A/B: Asse	ets - Real a	and Personal Pro	perty	12/15
Includ which	le all pr have n	operty in which the debton to book value, such as full	holds rights and po y depreciated assets	wns or in which the debtor has a wers exercisable for the debtor's s or assets that were not capitaliz ory Contracts and Unexpired Leas	own benefit. Also inclued. In Schedule A/B, list	de assets and properties any executory contracts
the de	btor's	name and case number (if	known). Also identif	needed, attach a separate sheet t y the form and line number to wh attachment in the total for the per	ich the additional inforr	
sche	dule or or's inte	depreciation schedule, the	at gives the details for	priate category or attach separate or each asset in a particular categ s. See the instructions to unders	jory. List each asset onl	y once. In valuing the
		lebtor have any cash or ca				
	No. Go	to Part 2.				
		in the information below.				
AII 2.	Cash o	Current value of debtor's interest Unknown				
3.		ecking, savings, money ma ne of institution (bank or brok		kerage accounts (Identify all) Type of account	Last 4 digits of account	nt
	3.1.	SunTrust		Checking	9872	Unknown
4.	Oth	er cash equivalents (Identi	fy all)			
5.	Tota	al of Part 1.				\$0.00
	Add	lines 2 through 4 (including	amounts on any addit	tional sheets). Copy the total to line	80.	Ψ0.00
Part 2	2:	Deposits and Prepayments	6			
6. Doe	s the d	lebtor have any deposits o	r prepayments?			
		o to Part 3. In the information below.				
Part 3	3:	Accounts receivable				
10. D c	es the	debtor have any accounts	receivable?			
		o to Part 4. I in the information below.				
Part 4	ł:	Investments				

13. Does the debtor own any investments?

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Debtor	The Islamic Research and Humanitarian Se Center, Inc	ervices Case	e number (If known)	
	Name			
■ No	p. Go to Part 5.			
	es Fill in the information below.			
Part 5:	Inventory, excluding agriculture assets			
18. Doe s	s the debtor own any inventory (excluding agriculture	e assets)?		
	o. Go to Part 6.			
□ Ye	es Fill in the information below.			
Part 6:	Farming and fishing-related assets (other than t	itled motor vehicles and lan	d)	
	s the debtor own or lease any farming and fishing-rel		·	
■ N.	o. Go to Part 7.			
	o. Go to Part 7. es Fill in the information below.			
Part 7:	Office furniture, fixtures, and equipment; and co	ollectibles		
38. Doe s	s the debtor own or lease any office furniture, fixture	s, equipment, or collectibles	5?	
	o. Go to Part 8.			
■ Ye	es Fill in the information below.			
	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture			
	50 Chairs and 10 Desks	Unknown		\$0.00
40.	Office fixtures			
41.	Office equipment, including all computer equipmen	t and		
	communication systems equipment and software 12 Windows PCs Approxiamately 4 years old	Unknown		\$0.00
	12 Williams F CS Approximately 4 years ou	Olikilowii		φυ.υυ
42.	Collectibles Examples: Antiques and figurines; paintin books, pictures, or other art objects; china and crystal; collections; other collections, memorabilia, or collectible	stamp, coin, or baseball card		
43.	Total of Part 7.			\$0.00
	Add lines 39 through 42. Copy the total to line 86.			
44.	Is a depreciation schedule available for any of the p	property listed in Part 7?		
	No			
	☐ Yes			
45.	Has any of the property listed in Part 7 been apprais	sed by a professional within	the last year?	
	■ No □ Yes			
Dout 0	<u></u>			
Part 8: 46. Doe s	Machinery, equipment, and vehicles the debtor own or lease any machinery, equipment.	or vehicles?		
_		, 5. 101110101		
	o. Go to Part 9. es Fill in the information below.			

Official Form 206A/B

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Debtor	The Islamic Research and Humanitarian Services Center, Inc Name Case number (If known)						
Part 9:	Real property						
54. Doe s	s the debtor own or lease any real	property?					
	o. Go to Part 10.						
55.	Any building, other improved rea	il estate, or land which	n the debtor owns or in w	nich the debtor has an inter	est		
	Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest		
	55.1. 5305 Altoona Street, Capitol Heights, MD 20743 (a/k/a 1 Chamber St)	Fee simple	\$0.00	Tax records	\$667,200.00		
56.	Total of Part 9. Add the current value on lines 55.1 Copy the total to line 88.	through 55.6 and entri	es from any additional shee	ts.	\$667,200.00		
57.	Is a depreciation schedule availa ■ No □ Yes	ble for any of the pro	perty listed in Part 9?				
58.	Has any of the property listed in Part 9 been appraised by a professional within the last year? ■ No □ Yes						
Part 10:							
59. Doe s	s the debtor have any interests in i	intangibles or intellec	tual property?				
	o. Go to Part 11. es Fill in the information below.						
Part 11:							
Inclu	s the debtor own any other assets de all interests in executory contract or. Go to Part 12.			this form.			
	es Fill in the information below.						
					Current value of debtor's interest		
71.	Notes receivable Description (include name of obligo	or)					
72.	Tax refunds and unused net oper Description (for example, federal, s						
73.	Interests in insurance policies or	annuities					

Official Form 206A/B

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Debtor	The Islamic Research and Humanitarian Services Center, Inc Name	Case number (If known)	
74.	Causes of action against third parties (whether or not a lawsuit has been filed)		
75.	Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims		
76. 77.	Trusts, equitable or future interests in property		
	Other property of any kind not already listed Examples: Season tickets, country club membership		
	Religious Books and Ritual artifacts		Unknown
78.	Total of Part 11.		\$0.00
	Add lines 71 through 77. Copy the total to line 90.		·
79.	Has any of the property listed in Part 11 been appraised by a professi ■ No □ Yes	onal within the last year?	

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Debtor The Islamic Research and Humanitarian Services
Center, Inc
Name
Case number (If known)

Part 12: Summary

In Pa	art 12 copy all of the totals from the earlier parts of the form		
	Type of property	Current value of personal property	Current value of real property
80.	Cash, cash equivalents, and financial assets. Copy line 5, Part 1	\$0.00	
81.	Deposits and prepayments. Copy line 9, Part 2.	\$0.00	
82.	Accounts receivable. Copy line 12, Part 3.	\$0.00	
83.	Investments. Copy line 17, Part 4.	\$0.00	
84.	Inventory. Copy line 23, Part 5.	\$0.00	
85.	Farming and fishing-related assets. Copy line 33, Part 6.	\$0.00	
86.	Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	\$0.00	
87.	Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$0.00	
88.	Real property. Copy line 56, Part 9	>	\$667,200.00
89.	Intangibles and intellectual property. Copy line 66, Part 10.	\$0.00	
90.	All other assets. Copy line 78, Part 11.	+\$0.00	
91.	Total. Add lines 80 through 90 for each column	\$0.00	+ 91b. \$667,200.00
92.	Total of all property on Schedule A/B. Add lines 91a+91b=92	2	\$667,200.00

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	Case	: 17-20333 DOC 1 THEG 12/03/17 T	age 15 0	21	
Fill	in this information to identify the o	case:			
Deb	tor name The Islamic Research	ch and Humanitarian Services Center, Inc			
Unit	red States Bankruptcy Court for the:	DISTRICT OF MARYLAND			
Cas	e number (if known)			_	Check if this is an amended filing
⊃ tt	:-:-I			•	Ç
	icial Form 206D	What Have Claims Convert by D			
<u>5C</u>	nedule D: Creditors	Who Have Claims Secured by P	roperty		12/15
	s complete and accurate as possible.				
	any creditors have claims secured by	debtor's property? age 1 of this form to the court with debtor's other schedules	Dobtor has no	othing also to	roport on this form
	<u> </u>		Debior has no	offiling else to	report on this form.
	Yes. Fill in all of the information b				
Par		ho have secured claims. If a creditor has more than one secured	Column A		Column B
	n, list the creditor separately for each clair		Amount of	claim	Value of collateral
			Do not dedu	ict the value	that supports this claim
2.1	Estate of Jacob Brentzel	Describe debtor's property that is subject to a lien		Jnknown	\$667,200.00
	Creditor's Name C/O Patti B. Hoellich 8469 St. Andrews Drive	5305 Altoona Street, Capitol Heights, MD 20743 (a/k/a 1 Chamber St)			
	Chesapeake Beach, MD 20732		-		
	Creditor's mailing address	Describe the lien			
		Is the creditor an insider or related party?	_		
		■ No			
	Creditor's email address, if known	☐ Yes Is anyone else liable on this claim?			
	Date debt was incurred	No No			
	Date dept was incurred	☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H)			
	Last 4 digits of account number	= 100.1 m out 00/1000/1/2 00000/1/2 (01/10/1/2 10/1/2)			
	Do multiple creditors have an interest in the same property?	As of the petition filing date, the claim is: Check all that apply			
	No	☐ Contingent			
	☐ Yes. Specify each creditor,	☐ Unliquidated			
	including this creditor and its relative priority.	Disputed			
3.	Total of the dollar amounts from Part 1	, Column A, including the amounts from the Additional Page, i	any.	\$0.00	
Par	12: List Others to Be Notified for	a Debt Already Listed in Part 1			
	in alphabetical order any others who n gnees of claims listed above, and attor	nust be notified for a debt already listed in Part 1. Examples of rneys for secured creditors.	entities that ma	y be listed are	e collection agencies,
If no	others need to notified for the debts li	isted in Part 1, do not fill out or submit this page. If additional p	pages are neede	ed, copy this p	oage.
	Name and address	On	which line in Pa enter the relate	rt 1 did	Last 4 digits of account number for this entity
	Estate of Jacob Brentzel C/O Victor Lembo	Line	2.1		,
	900 Bestgate Rd Suite 103 Annapolis, MD 21401				

Official Form 206D

		Case	: 17-20335 D00	C i Filed i2/	05/17	Page 14 01 2	11		
Fill in th	nis inforn	nation to identify the	case:						
Debtor r	name 7	Γhe Islamic Resear	ch and Humanitarian	Services Center	, Inc				
United S	States Bai	nkruptcy Court for the:	DISTRICT OF MARYL	_AND					
	ımber (if k								
Case no	illibei (ii k						_	heck if this is	
							ar	mended filing	İ
Offici	ial Fo	rm 206E/F							
Sche	dule	E/F: Credito	rs Who Have	Unsecured	l Clair	ns			12/15
List the of Personal	ther party Property (oxes on the	to any executory contra Official Form 206A/B) ar ne left. If more space is n	Jse Part 1 for creditors with cts or unexpired leases the id on Schedule G: Executor leeded for Part 1 or Part 2, RITY Unsecured Claim	nat could result in a cla ory Contracts and Une , fill out and attach the	aim. Also lis expired Leas	t executory contracts ses (Official Form 206	on <i>Schedule</i> G). Number t	e <i>A/B: Assets</i> the entries in F	- Real and
1. D	o any cred	ditors have priority unse	cured claims? (See 11 U.S	S.C. § 507).					
	No. Go t	o Part 2.							
	☐ Yes. Go	to line 2.							
3.1	List in alpl out and atta Nonpriorit		ailing address	unsecured claims. If t		as more than 6 creditor. e claim is: Check all that	•	rity unsecured	claims, fill
ı	Last 4 digi	ts of account number	<u>—</u>	Basis for the claim:					
				Is the claim subject to	offset?	No			
Part 3:	List Of	thers to Be Notified A	bout Unsecured Claims	s					
			must be notified for claim eys for unsecured creditors.		I 2. Example	s of entities that may be	e listed are co	llection agenci	es,
If no of	thers need	I to be notified for the de	ebts listed in Parts 1 and 2	, do not fill out or sub	mit this pag	e. If additional pages	are needed,	copy the next	page.
I	Name and	mailing address				line in Part1 or Part 2 editor (if any) listed?	is the	Last 4 digits account nu any	
Part 4:	Total A	Amounts of the Priori	ty and Nonpriority Unse	ecured Claims					
5. Add th	e amounts	s of priority and nonprio	rity unsecured claims.						
5a. Total	claims fro	om Part 1			5a.	Total of claim a		.00	
5b. Total	l claims fro	om Part 2			5b. +	\$.00	
	of Parts 1				5c.	\$		0.00	

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Fill in	this information to identify the case:		
Debto	r name The Islamic Research and Humanitarian Service	ces Center, Inc	
United	I States Bankruptcy Court for the: DISTRICT OF MARYLAND		
	number (if known)		
Case		☐ Check if th amended f	
Offic	cial Form 206G		
	edule G: Executory Contracts and l	Jnexpired Leases	12/15
	complete and accurate as possible. If more space is needed, c	•	secutively.
	oes the debtor have any executory contracts or unexpired lease No. Check this box and file this form with the debtor's other scheol Yes. Fill in all of the information below even if the contacts of lease I Form 206A/B).	dules. There is nothing else to report on this form.	Property
2. Lis	at all contracts and unexpired leases	State the name and mailing address for all other pa whom the debtor has an executory contract or une lease	
2.1	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.2	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.3	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.4	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of		

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		200 17 200	DOU 1	1 1100 12/00	Trago to or	
Fill in th	is information to identify	the case:				
Debtor n	ame The Islamic Res	earch and Hur	nanitarian Serv	ices Center, Inc	c	
United S	tates Bankruptcy Court for	the: DISTRICT	OF MARYLAND			
Case nu	mber (if known)					☐ Check if this is an amended filing
	al Form 206H dule H: Your C	odebtors	1			12/15
	mplete and accurate as p al Page to this page.	ossible. If more	space is needed,	copy the Additio	onal Page, numbering the	e entries consecutively. Attach the
1. D	o you have any codebtors	s?				
■ No. C	heck this box and submit th	nis form to the co	urt with the debtor's	s other schedules.	. Nothing else needs to be	reported on this form.
cred		lude all guarantoi	s and co-obligors.	In Column 2, iden	ntify the creditor to whom the	debtor in the schedules of ne debt is owed and each schedule arately in Column 2.
	Name	Mailing Addre	ess		Name	Check all schedules that apply:
2.1		Street			_	□ D □ E/F □ G
		City	State	Zip Code		
2.2		Street				□ D □ E/F □ G
		City	State	Zip Code	_	
2.3		Street				□ D □ E/F
		City	State	Zip Code	_	□G
2.4		Street				D D = E/F
					_	□G

City

State

Zip Code

Fil	I in this info	ormation to identify the	case:					
De	ebtor name	The Islamic Resear	ch and Humanitar	ian Services Co	enter, Inc			
Ur	ited States	Bankruptcy Court for the:	DISTRICT OF MAR	RYLAND				
Ca	ase number	(if known)						Check if this is an
								amended filing
0	fficial F	orm 207						
St	atemer	nt of Financial	Affairs for No	on-Individ	uals Filii	ng for Ban	kruptcy	04/10
		ist answer every question or's name and case num		needed, attach a	separate she	et to this form. (On the top of a	any additional pages,
Pa	rt 1: Inco	ome						
1.	Gross reve	enue from business						
	☐ None.							
		he beginning and endin ay be a calendar year	g dates of the debto	r's fiscal year,	Sources Check all	of revenue that apply		Gross revenue (before deductions and exclusions)
	For prio				☐ Operat	ing a business		\$110,826.00
	From 1/0	01/2016 to 12/31/2016			■ Other	Charitable Do	onations	
	For year	r before that:			☐ Operat	ing a business		\$90,000.00
	From 1/ 0	01/2015 to 12/31/2015			_	Charitable Do	onations	
2.	Include reve	ess revenue enue regardless of whethers. List each source and the						ney collected from lawsuits
	None.							
					Descripti	on of sources of	revenue	Gross revenue from each source (before deductions and exclusions)
Pa	rt 2: List	Certain Transfers Made	Before Filing for Ba	ankruptcy				
3.	List paymer filing this ca	yments or transfers to counts or transfers-including ase unless the aggregate of years after that with resp	expense reimbursemelalue of all property tr	entsto any credit ansferred to that o	or, other than reditor is less			
	None.							
	Creditor'	s Name and Address		Dates	Total ar	nount of value	Reasons fo Check all tha	r payment or transfer at apply

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Case number (if known)

The Islamic Research and Humanitarian Services Center,

	_	Inc						
4.	List pay or cosig may be listed in	nts or other transfers of property myments or transfers, including expense gned by an insider unless the aggregated adjusted on 4/01/19 and every 3 years line 3. <i>Insiders</i> include officers, direct and their relatives; affiliates of the deb	reimbursem te value of al s after that w ors, and any	ents, made within 1 I property transferre vith respect to cases one in control of a c	year before filing this case do to or for the benefit of the filed on or after the date of corporate debtor and their re-	on debte insider fadjustnelatives;	is owed to an ing it is less than \$6 nent.) Do not ing general partners.	5,425. (This amount nclude any payments ers of a partnership
	■ No	ne.						
		er's name and address tionship to debtor		Dates	Total amount of value	e Rea	asons for pay	ment or transfer
5.	List all	sessions, foreclosures, and returns property of the debtor that was obtaine osure sale, transferred by a deed in lie	ed by a credit					d by a creditor, sold at
	■ No	ne						
	Cred	itor's name and address	Describe	e of the Property		Date		Value of property
6.		/ creditor, including a bank or financial lebtor without permission or refused to						
		itor's name and address	Descrip	tion of the action o	reditor took	Date :	action was	Amount
-	- wt O-	Legal Actions or Assignments				taken		
7.	List the		ons, arbitrati	ons, mediations, an	d audits by federal or state	agencie		debtor was involved
		Case title Case number	Nature o		ourt or agency's name auddress	nd	Status of ca	se
	7.1.	Estate of Jacob Brentzel CAL 16-26471	Contrac	C 1	rince George's County Sircuit Court 4735 Main Street Ipper Marlboro, MD 20		■ Pending □ On appe □ Conclude	
8.	List any	nments and receivership property in the hands of an assignee r, custodian, or other court-appointed ne				this cas	e and any prop	perty in the hands of a
P	art 4:	Certain Gifts and Charitable Contril	butions					
9.		gifts or charitable contributions the s to that recipient is less than \$1,00		e to a recipient wi	thin 2 years before filing	this cas	e unless the a	ggregate value of
	■ No	ne						
		Recipient's name and address	Descrip	tion of the gifts or	contributions	Dates g	iven	Value
P	art 5:	Certain Losses						

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

Debtor

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Debto		The Islamic Research and Huma Inc	nitarian Services Center, Case numb	er (if known)	
	No	ne			
		ription of the property lost and the loss occurred	Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	Dates of loss	Value of property lost
Part 6	6:	Certain Payments or Transfers	772. 766616		
Lis of t	t any		of property made by the debtor or person acting on being attorneys, that the debtor consulted about debt con		
	□ No	ne.			
		Who was paid or who received the transfer? Address	If not money, describe any property transferr	ed Dates	Total amount or value
1	11.1.	Kemet Hunt Law Group, Inc 5000 Sunnyside Dr Ste 101 Beltsville, MD 20705	Attorney Fees		\$0.00
		Email or website address akemet@kemethuntlaw.com			
Lis to a	st any a self	ttled trusts of which the debtor is a by payments or transfers of property made f-settled trust or similar device. include transfers already listed on this se	le by the debtor or a person acting on behalf of the de	btor within 10 years befor	e the filing of this case
	No	ne.			
١	Name	e of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
Lis 2 y	st any ears	before the filing of this case to another	ent y sale, trade, or any other means made by the debtor person, other than property transferred in the ordinary security. Do not include gifts or transfers previously list	y course of business or fir	
	No	ne.			
		Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
Part	7:	Previous Locations			
		us addresses previous addresses used by the debtor	within 3 years before filing this case and the dates the	e addresses were used.	
	Do	es not apply			
		Address		Dates of occupand	y

Part 8: Health Care Bankruptcies

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Deptor	Ine Islamic Research and Huma	Initarian Services Cent	er,	Jase number (if kr.	own) 	
Is the - diag	th Care bankruptcies e debtor primarily engaged in offering servences gnosing or treating injury, deformity, or dis viding any surgical, psychiatric, drug treat	sease, or				
■	No. Go to Part 9. Yes. Fill in the information below.					
	Facility name and address	Nature of the business the debtor provides	s operation, inc	luding type of s	and h	btor provides meals nousing, number of nts in debtor's care
Part 9:	Personally Identifiable Information					
16. Does	s the debtor collect and retain personal	lly identifiable informatio	n of customers	?		
■ □ 17. With	No. Yes. State the nature of the information in 6 years before filing this case, have		otor been partic	cipants in any EF	RISA, 401(k), 403(b), or other pension o
	No. Go to Part 10. Yes. Does the debtor serve as plan adm	ebtor as an employee bei			, , , , , , , , , , , , , , , , , , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Part 10:	Certain Financial Accounts, Safe De	posit Boxes, and Storage	e Units			
Withi move Inclu- coop	ed financial accounts in 1 year before filing this case, were any ed, or transferred? de checking, savings, money market, or o eratives, associations, and other financial	other financial accounts; ce				
_ '	Financial Institution name and Address	Last 4 digits of account number	Type of according trument	clos mov	e account was ed, sold, ed, or sferred	Last balance before closing or transfer
	deposit boxes any safe deposit box or other depository for .	or securities, cash, or other	valuables the d	ebtor now has or	did have within 1 ye	ar before filing this
= 1	None					
De	pository institution name and address	Names of anyone access to it Address	with	Description of	the contents	Do you still have it?
List a	oremises storage any property kept in storage units or warel n the debtor does business.	nouses within 1 year before	e filing this case.	Do not include fa	cilities that are in a	part of a building in
= 1	None					
Fa	cility name and address	Names of anyone access to it	with	Description of	the contents	Do you still have it?
Part 11:	Property the Debtor Holds or Contro		Not Own			

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Case number (if known)

The Islamic Research and Humanitarian Services Center,

	IIIC			
21.	Property held for another List any property that the debtor holds or cont	rols that another entity owns. Include any pr	operty borrowed from, being stored f	or, or held in trust. Do
	not list leased or rented property. None			
Pa	art 12: Details About Environment Informa	ition		
For	r the purpose of Part 12, the following definition Environmental law means any statute or gov medium affected (air, land, water, or any other	vernmental regulation that concerns pollution	, contamination, or hazardous mater	rial, regardless of the
	Site means any location, facility, or property, owned, operated, or utilized.	, including disposal sites, that the debtor nov	owns, operates, or utilizes or that th	ne debtor formerly
	Hazardous material means anything that an similarly harmful substance.	environmental law defines as hazardous or	toxic, or describes as a pollutant, cor	ntaminant, or a
Rej	port all notices, releases, and proceedings	known, regardless of when they occurred	.k	
22.	Has the debtor been a party in any judicia	al or administrative proceeding under any	environmental law? Include settle	ements and orders.
	■ No.			
	Yes. Provide details below.			
	Case title Case number	Court or agency name and address	Nature of the case	Status of case
23.	Has any governmental unit otherwise notif environmental law?	fied the debtor that the debtor may be liak	ole or potentially liable under or in	violation of an
	■ No.			
	Yes. Provide details below.			
	Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
24.	Has the debtor notified any governmental u	unit of any release of hazardous material	?	
	■ No.			
	☐ Yes. Provide details below.			
	Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Pa	art 13: Details About the Debtor's Business	s or Connections to Any Business		
25.	Other businesses in which the debtor has List any business for which the debtor was an Include this information even if already listed i	owner, partner, member, or otherwise a per	son in control within 6 years before f	iling this case.
	None			
	Business name address	Describe the nature of the business	Employer Identification numb Do not include Social Security numb	
			Dates business existed	
26.	Books, records, and financial statements 26a. List all accountants and bookkeepers wh ☐ None	no maintained the debtor's books and record	s within 2 years before filing this case	e.
	Name and address			nte of service

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Debtor

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Debto	r Th Inc		Humanitarian Services Center	·, c	Case num	nber (if known)	
N	lame a	nd address					Date of service From-To
2	6a.1.	Carl A. Colston Jr.					
26t	withir	n 2 years before filing this cas	ve audited, compiled, or reviewed dese.	ebtor's books o	f accoun	t and records or prepare	d a financial statement
	■ No	one					
260	c. List a ■ No		re in possession of the debtor's bool	ks of account a	and recor	ds when this case is filed	d.
N		nd address				books of account and ailable, explain why	records are
260		ıll financial institutions, credito ment within 2 years before fili	ors, and other parties, including mere ng this case.	cantile and trac			issued a financial
	■ No	one					
N	lame a	nd address					
27. Inv Ha			operty been taken within 2 years bef	ore filing this c	ase?		
	l No l Yes	. Give the details about the tv	vo most recent inventories.				
		ame of the person who sup eventory	ervised the taking of the	Date of inve	entory	The dollar amount ar	nd basis (cost, market, ch inventory
		ebtor's officers, directors, i of the debtor at the time of	managing members, general partr i the filing of this case.	ners, members	s in cont	rol, controlling shareh	olders, or other people
N	lame		Address		Position interest	n and nature of any	% of interest, if any
C	Carl Co	olston			Treasu	rer	
N	lame		Address		Position	n and nature of any	% of interest, if any
7	alib A	bdul-Samad			Truste	e	
_							
			case, did the debtor have officers s in control of the debtor who no				tners, members in
	l No						
	l Yes	. Identify below.					
Wit	hin 1 ye		rals credited or given to insiders the debtor provide an insider with vons, and options exercised?	alue in any fori	m, includ	ling salary, other comper	nsation, draws, bonuses,
■	l No l Yes	. Identify below.					

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Debtor	The Islamic Research and Humanit	arian Services Center,	Case nur	mber	(if known)		
	·	Amount of money or description an property	nd value o	of	Dates		Reason for providing the value
31. Withi	n 6 years before filing this case, has the	debtor been a member of any cons	olidated g	roup	for tax purpo	ses?	
	No Yes. Identify below.						
Name	of the parent corporation			nploy rpora		on num	ber of the parent
32. Withi	n 6 years before filing this case, has the	debtor as an employer been respor	nsible for c	contri	ibuting to a p	ension	fund?
	No Yes. Identify below.						
Name	of the parent corporation			nploy rpora		on num	ber of the parent
Part 14:	Signature and Declaration						
conr	RNING Bankruptcy fraud is a serious crim lection with a bankruptcy case can result in .S.C. §§ 152, 1341, 1519, and 3571.					ey or pro	operty by fraud in
	re examined the information in this Stateme correct.	nt of Financial Affairs and any attachn	nents and h	have	a reasonable t	belief tha	at the information is true
I dec	clare under penalty of perjury that the forego	oing is true and correct.					
Executed	d on December 5, 2017						
	o Abdul Samad e of individual signing on behalf of the debto	Talib Abdul Samad Printed name					
Position	or relationship to debtor	_					
Are addit ■ No □ Yes	ional pages to <i>Statement of Financial Af</i>	fairs for Non-Individuals Filing for I	Bankruptc	y (Of	ficial Form 20	07) attac	hed?

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United States Bankruptcy Court District of Maryland

In re The Islamic Research and Humanita	rian Services Cente	er, Inc	Case No.			
	De	ebtor(s)	Chapter	11		
LIST OF EQUITY SECURITY HOLDERS Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case						
Name and last known address or place of business of holder	Security Class	Number of Securities	s F	Kind of Interest		
-NONE-						
DECLARATION UNDER PENALTY O	F PERJURY ON	BEHALF OF COR	PORATIO	ON OR PARTNERSHIP		
I, the of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.						
Date December 5, 2017	Signati	are /s/ Talib Abdul Sa				

Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. \$\$ 152 and 3571.

United States Bankruptcy Court District of Maryland

In re	The Islamic Research and Humanitarian	Services Center, Inc	Case No.	
•		Debtor(s)	Chapter	11
	VERIFICAT	TION OF CREDITOR M	IATRIX	
	f the corporation named as the debtor in this nowledge.	case, hereby verify that the attached	list of creditors	s is true and correct to the best
	Daniel au 5 0047	(a/Talib Ab ded Come d		
Date:	December 5, 2017	/s/ Talib Abdul Samad		
		Talib Abdul Samad/		
		Signer/Title		

Estate of Jacob Brentzel C/O Patti B. Hoellich 8469 St. Andrews Drive Chesapeake Beach, MD 20732

Estate of Jacob Brentzel C/O Victor Lembo 900 Bestgate Rd Suite 103 Annapolis, MD 21401

United States Bankruptcy Court District of Maryland

In re The Islamic Research and H	umanitarian Services Center, Inc	Case No.	
	Debtor(s)	Chapter	11
CORP	PORATE OWNERSHIP STATEMENT	(RULE 7007.1)	
recusal, the undersigned counsel for action, certifies that the following is	ptcy Procedure 7007.1 and to enable the June The Islamic Research and Humanitarian is a (are) corporation(s), other than the debt my class of the corporation's(s') equity interest.	Services Center, for or a governme	<u>Inc</u> in the above captioned ental unit, that directly or
■ None [<i>Check if applicable</i>]			
December 5, 2017	/s/ Anu KMT		
Date	Anu KMT 15398		
	Signature of Attorney or Litig		
	Counsel for The Islamic Res	earch and Humar	nitarian Services Center, Inc
	5000 Sunnyside Dr Suite 101		
	Beltsville, MD 20705		
	301.982.0888 Fax:301.982.0889 akemet@kemethuntlaw.com		