| Ca  | se 18-15824 Do         | c 1 File        | d 04/30/18        | Page 1 of 27                    |                      |                                    |
|---|------------------------|-----------------|-------------------|---------------------------------|----------------------|------------------------------------|
| Fill in this information to identify th                                 | e case:                |                 |                   |                                 |                      |                                    |
| United States Bankruptcy Court for th                                   | e:                     |                 |                   |                                 |                      |                                    |
| District Of N   |                        |                 |                   |                                 |                      |                                    |
| Case number (If known):   | State)                 | 11              |                   |                                 |                      | heck if this is a<br>mended filing |
|   |                        |                 |                   |                                 |                      |                                    |
| Official Form 201   |                        |                 |                   |                                 |                      |                                    |
| Voluntary Petitio   | n for Non-In           | dividu          | ıale Fili         | na for Ran                      | kruntcy              | 04/16                              |
|   |                        |                 |                   |                                 |                      | 04/16                              |
| If more space is needed, attach a se number (if known). For more inform |                        |                 |                   |                                 |                      |                                    |
|   |                        |                 |                   |                                 |                      |                                    |
| 1. Debtor's name  | IF Studios, 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  | 7 2 - 3 0 0            | 5 9 9           | 1                 |                                 |                      |                                    |
| Identification Number (EIN)   |                        |                 |                   |                                 |                      |                                    |
| 4. Debtor's address   | Principal place of bus | iness           |                   | Mailing address, if of business | f different from pri | ncipal place                       |
|   | 19866 Century Bou      | ılevard, Unit   | 103               |                                 |                      |                                    |
|   | Number Street          |                 |                   | Number Street                   |                      |                                    |
|   |                        |                 |                   | P.O. Box                        |                      |                                    |
|   | Germantown<br>City     | MD<br>State     | 20874<br>ZIP Code | City                            | State                | ZIP Code                           |
|   | 0.1,                   | Ciaio           | 0000              | •                               |                      |                                    |
|   | MONTOOMEDY             |                 |                   | Location of princip             |                      | ent from                           |
|   | MONTGOMERY<br>County   |                 |                   | North an Otract                 |                      |                                    |
|   |                        |                 |                   | Number Street                   |                      |                                    |
|   |                        |                 |                   |                                 |                      |                                    |
|   |                        |                 |                   | City                            | State                | ZIP Code                           |
| 5. Debtor's website (URL)   |                        |                 |                   |                                 |                      |                                    |
| s Type of debter  |                        | ng Limited Lial | oility Company (  | LLC) and Limited Liabilit       | y Partnership (LLP)  | )                                  |
| 6. Type of debtor   | ☐ Partnership (excludi |                 | . , , ,           | •                               | ,                    |                                    |

Other. Specify:

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| De  | btor IF Studios, Inc.                                      | Case number (if known)   |  |  |  |  |  |
|-----|--|--|--|--|--|--|--|
|     | Name   |  |  |  |  |  |  |
| 7.  | Describe debtor's business                                 | A. Check one:  |  |  |  |  |  |
|     |  | ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))  |  |  |  |  |  |
|     |  | ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  |  |  |  |  |  |
|     | Railroad (as defined in 11 U.S.C. § 101(44))               |  |  |  |  |  |  |
|     |  | ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))   |  |  |  |  |  |
|     |  | ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))  |  |  |  |  |  |
|     |  | ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))   |  |  |  |  |  |
|     |  | None of the above  |  |  |  |  |  |
|     |  | None of the above  |  |  |  |  |  |
|     |  | B. Check all that apply:   |  |  |  |  |  |
|     |  | ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)  |  |  |  |  |  |
|     |  | ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)  |  |  |  |  |  |
|     |  | ☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))  |  |  |  |  |  |
|     |  | C. NIAICO (Alestin Associant Indicator Classification Contago) 4 digit and athetin and department department   |  |  |  |  |  |
|     |  | C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <a href="http://www.uscourts.gov/four-digit-national-association-naics-codes">http://www.uscourts.gov/four-digit-national-association-naics-codes</a> .    |  |  |  |  |  |
|     |  | <u>5</u> <u>4</u> <u>1</u> <u>5</u>  |  |  |  |  |  |
| 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) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).   |  |  |  |  |  |
|     |  |  |  |  |  |  |  |
|     |  | The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement  |  |  |  |  |  |
|     |  | of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).   |  |  |  |  |  |
|     |  | ☐ A plan is being filed with this petition.  |  |  |  |  |  |
|     |  | Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 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 Attachment to Voluntary Petition for Non-Individuals Filing |  |  |  |  |  |
|     |  | for Bankruptcy under Chapter 11 (Official Form 201A) with this form.   |  |  |  |  |  |
|     |  | The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.  |  |  |  |  |  |
|     |  | Chapter 12   |  |  |  |  |  |
| 9.  | Were prior bankruptcy cases filed by or against the debtor | ☑ No   |  |  |  |  |  |
|     | within the last 8 years?                                   | ☐ Yes. District         When         Case number   |  |  |  |  |  |
|     | If more than 2 cases, attach a separate list.              | District When Case number  |  |  |  |  |  |
|     |  | MM / DD / YYYY   |  |  |  |  |  |
| 10. | Are any bankruptcy cases                                   | ☑ No   |  |  |  |  |  |
|     | pending or being filed by a business partner or an         | Yes. Debtor Relationship   |  |  |  |  |  |
|     | affiliate of the debtor?                                   |  |  |  |  |  |  |
|     |  | District When  |  |  |  |  |  |
|     | List all cases. If more than 1, attach a separate list.    | Case number, if known  |  |  |  |  |  |
|     |  |  |  |  |  |  |  |

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| Del | btor     | IF Studios, Inc.                         |   | Case number (if known)_   |  |  |  |  |
|-----|----------|--|---|---|--|--|--|--|
|     |          | Name                                     |   |   |  |  |  |  |
| 11. |          | he case filed in <i>this</i>             | Check all that apply:   |   |  |  |  |  |
|     | district | •  | Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district. |   |  |  |  |  |
|     |          |  | ☐ A bankruptcy case concern   | ing debtor's affiliate, general partner, or p   | partnership is pending in this district.                 |  |  |  |
|     |          |  |   |   |  |  |  |  |
| 12. | possess  | e debtor own or have<br>sion of any real | <ul><li>☒ No</li><li>☐ Yes. Answer below for each</li></ul>   | n property that needs immediate attention   | n. Attach additional sheets if needed.                   |  |  |  |
|     | that nee | or personal property ds immediate        | Why does the proper   | ty need immediate attention? (Check a   | all that apply.)   |  |  |  |
|     | attentio | n?                                       | ☐ It poses or is allege   | ed to pose a threat of imminent and iden  | tifiable hazard to public health or safety.              |  |  |  |
|     |          |  | What is the hazard  | 1?  |  |  |  |  |
|     |          |  | ☐ It needs to be phys   | sically secured or protected from the wea   | ather.   |  |  |  |
|     |          |  |   | ble goods or assets that could quickly de<br>aple, livestock, seasonal goods, meat, da<br>tions). |  |  |  |  |
|     |          |  | _   |   |  |  |  |  |
|     |          |  | _ 55.   |   |  |  |  |  |
|     |          |  | Where is the prepart  | va.   |  |  |  |  |
|     |          |  | Where is the property   | Number Street   |  |  |  |  |
|     |          |  |   |   |  |  |  |  |
|     |          |  |   | City  | State ZIP Code   |  |  |  |
|     |          |  |   |   |  |  |  |  |
|     |          |  | Is the property insure  | ed?   |  |  |  |  |
|     |          |  | ☐ No☐ Yes Insurance agen  | icy   |  |  |  |  |
|     |          |  |   | ·,  |  |  |  |  |
|     |          |  | Contact name  |   | <del></del>  |  |  |  |
|     |          |  | Phone   |   |  |  |  |  |
|     |          |  |   |   |  |  |  |  |
|     | S        | tatistical and adminis                   | trative information   |   |  |  |  |  |
|     |          |  |   |   |  |  |  |  |
| 13. | Debtor's | s estimation of                          | Check one:  |   |  |  |  |  |
|     | availabi | e iulius                                 |   | distribution to unsecured creditors.  | le for distribution to unsecured creditors.              |  |  |  |
|     |          |  | Arter any aurimistrative exp  | renses are paid, no funds will be available   | e for distribution to drisecured creditors.              |  |  |  |
| 4.4 | Ectimot  | ed number of                             | ¥ 1-49  | 1,000-5,000   | 25,001-50,000  |  |  |  |
| 14. | creditor |  | ☐ 50-99<br>☐ 100-199  | □ 5,001-10,000<br>□ 10,001-25,000   | ☐ 50,001-100,000<br>☐ More than 100,000                  |  |  |  |
|     |          |  | 200-999   | 10,001-25,000   | invole than 100,000                                      |  |  |  |
|     |          |  | <b>■</b> \$0-\$50,000   | □ \$1,000,001-\$10 million  | \$500,000,001-\$1 billion                                |  |  |  |
| 15. | Estimate | ed assets                                | \$50,001-\$100,000  | ■ \$10,000,001-\$50 million   | □ \$1,000,000,001-\$10 billion                           |  |  |  |
|     |          |  | □ \$100,001-\$500,000 □ \$500,001-\$1 million   | \$50,000,001-\$100 million<br>\$100,000,001-\$500 million   | □ \$10,000,000,001-\$50 billion □ More than \$50 billion |  |  |  |
|     |          |  | ■ φουυ,υυτ-φτ million   | - φ 100,000,001 -φουι milinn  | wide than \$50 billion                                   |  |  |  |

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| Debtor      | IF Studios, Inc.                              |  | Case number (##   | nown)  |
|-------------|---|--|---|--|
| 16. Estimat | ed liabilities                                | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million | \$1,000,001-\$10 million     \$10,000,001-\$50 million     \$50,000,001-\$100 million     \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion  More than \$50 billion |
| R           | equest for Relief, Dec                        | laration, and Signatures   |   |  |
| WARNING     |   |  | ement in connection with a bankrupt<br>8 U.S.C. §§ 152, 1341, 1519, and 35  |  |
|             | tion and signature of<br>ed representative of | The debtor requests relie petition.  | f in accordance with the chapter of ti  | tle 11, United States Code, specified in this  |
|             |   | I have been authorized to  | file this petition on behalf of the deb   | tor.   |
|             |   | I have examined the infor<br>correct.  | mation in this petition and have a rea  | asonable belief that the information is true and   |
|             |   | I declare under penalty of per   | jury that the foregoing is true and co  | rrect.   |
|             |   | Executed on 04/30/201 MM / DD / Y  | 8   |  |
|             |   | x /s/ Serrene Grant  | Serre   | ene Grant  |
|             |   | Signature of authorized repre  | sentative of debtor Printed   | name   |
|             |   | Title Chief Operating C  | Officer   |  |
| 18. Signatu | re of attorney                                | ✗ /s/ Keith R. Havens  | Date  | 04/30/2018   |
|             |   | Signature of attorney for deb  | tor   | MM / DD / YYYY   |
|             |   | Keith R. Havens, Esc<br>Printed name   | quire   |  |
|             |   | Havens & Associates  | s, LLC  |  |
|             |   | 2401 Research Boule  | evard, Suite 308  |  |
|             |   | Number Street  Rockville   | N   |  |
|             |   | City   |   | ate ZIP Code   |
|             |   | (301) 947-3330<br>Contact phone  |   | eith.R.Havens@HavensLawFirm.com<br>nail address  |
|             |   | 10909  |   | D  |
|             |   | Bar number   | Sta   | ate  |

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| Fill in this information to identify the case:               |
|--|
| Debtor name IF Studios, Inc.                                 |
| United States Bankruptcy Court for the: District of Maryland |
| Case number (If known):                                      |

### Official Form 206A/B

## Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

| Part 1: Cash and cash equivalents   |                               |  |                                    |
|---|-------------------------------|--|------------------------------------|
| Does the debtor have any cash or cash equivalents     No. Go to Part 2.     Yes. Fill in the information below.                   | s?                            |  |                                    |
| All cash or cash equivalents owned or controlled  | l by the debtor               |  | Current value of debtor's interest |
| 2. Cash on hand   |                               |  | \$ 0.00                            |
| 3. Checking, savings, money market, or financial bro  | kerage accounts (Identify al  | II)  |                                    |
| Name of institution (bank or brokerage firm) 3.1. Wells Fargo Bank 3.2. See Attachment 1 See Attachment 2: Additional Checking, S | checking                      | Last 4 digits of account number  7 0 1 7  or Financial Brokerage Account | \$ 2,261.65<br>\$                  |
| 4. Other cash equivalents (Identify all)  |                               | •  |                                    |
| 4.1   |                               |  | \$<br>\$                           |
| Total of Part 1     Add lines 2 through 4 (including amounts on any addit   | ional sheets). Copy the total | to line 80.  | \$40,008.59                        |
| Part 2: Deposits and prepayments  |                               |  |                                    |
| 6. Does the debtor have any deposits or prepayments   | s?                            |  |                                    |
| ☐ No. Go to Part 3.   |                               |  |                                    |
| Yes. Fill in the information below.   |                               |  |                                    |
|   |                               |  | Current value of debtor's interest |
| 7. Deposits, including security deposits and utility de   | eposits                       |  |                                    |
| Description, including name of holder of deposit  |                               |  |                                    |
| 7.1   |                               |  | \$                                 |
| 7.2   |                               |  | \$                                 |

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Case number (if known)

| Debtor | IF Studios, Inc. |
|--------|------------------|
|        |                  |

| 8. | Prepayments, including prepay   | yments on executory contr       | acts, leases, insurance, taxes, ar | nd rent                |                                    |
|----|---|---------------------------------|------------------------------------|------------------------|------------------------------------|
|    | Description, including name of holder 8.1. Credit with Washington 8.2.    | State Employment Se             | curity Department                  |                        | \$ <u>329.99</u>                   |
| 9  | Total of Part 2.  |                                 |                                    |                        |                                    |
| 0. | Add lines 7 through 8. Copy the t   | total to line 81.               |                                    |                        | \$329.99                           |
|    |   |                                 |                                    |                        |                                    |
| Pa | nt 3: Accounts receivable   | •                               |                                    |                        |                                    |
| 10 | . Does the debtor have any acc  | counts receivable?              |                                    |                        |                                    |
|    | No. Go to Part 4.   |                                 |                                    |                        |                                    |
|    | Yes. Fill in the information b  | pelow.                          |                                    |                        |                                    |
|    |   |                                 |                                    |                        | Current value of debtor's interest |
| 11 | . Accounts receivable   |                                 |                                    |                        |                                    |
|    | 11a. 90 days old or less:   |                                 | =                                  |                        | \$                                 |
|    |   | e amount                        | doubtful or uncollectible accounts | _                      |                                    |
|    | 11b. Over 90 days old: face   | e amount                        | doubtful or uncollectible accounts | →                      | \$                                 |
|    |   |                                 |                                    |                        |                                    |
| 12 | . Total of Part 3   | lle line 40 Comunities total to | line 00                            |                        | \$                                 |
|    | Current value on lines 11a + 11l  | to = line 12. Copy the total to | iiile oz.                          |                        |                                    |
| Pa | art 4: Investments  |                                 |                                    |                        |                                    |
|    | . Does the debtor own any inve  | estments?                       |                                    |                        |                                    |
| 10 | No. Go to Part 5.   | councilio:                      |                                    |                        |                                    |
|    | ☐ Yes. Fill in the information b  | pelow.                          |                                    |                        |                                    |
|    |   |                                 |                                    | Valuation method       | Current value of debtor's          |
|    |   |                                 |                                    | used for current value | interest                           |
| 14 | . Mutual funds or publicly trade<br>Name of fund or stock:                | ed stocks not included in F     | art 1                              |                        |                                    |
|    | 14.1  |                                 |                                    |                        | \$                                 |
|    | 14.2  |                                 |                                    |                        | \$                                 |
|    |   |                                 |                                    |                        |                                    |
| 15 | . Non-publicly traded stock and including any interest in an LI           | d interests in incorporated     | and unincorporated businesses      | ,                      |                                    |
|    |   |                                 |                                    |                        |                                    |
|    | Name of entity:   |                                 | % of ownership:                    |                        | Φ.                                 |
|    | 15.2  |                                 |                                    |                        | \$<br>\$_                          |
| 16 | . Government bonds, corporate instruments not included in P               |                                 | able and non-negotiable            |                        |                                    |
|    | Describe:   |                                 |                                    |                        |                                    |
|    | 16.1  |                                 |                                    |                        | \$                                 |
|    |   |                                 |                                    |                        |                                    |
|    |   |                                 |                                    |                        |                                    |
| ۰. | Total of Days 4   |                                 |                                    |                        | Γ                                  |
| 17 | <ul><li>Total of Part 4</li><li>Add lines 14 through 16. Copy t</li></ul> | the total to line 83            |                                    |                        | \$                                 |
|    | , wa mioo it unough to. copy t  | and total to line ou.           |                                    |                        |                                    |

| Part 5: | Inventory. | excluding | agriculture a | ssets |
|---------|------------|-----------|---------------|-------|
|         | ,          | 020.00.0  | <b>aga</b>    |       |

| 18. | Does the debtor own any inventory (exclude      | ling agriculture assets    | s)?                                    |  |                                    |
|-----|---|----------------------------|--|--|------------------------------------|
|     | No. Go to Part 6.                               |                            |  |  |                                    |
|     | ☐ Yes. Fill in the information below.           |                            |  |  |                                    |
|     |   |                            |  |  |                                    |
|     | General description                             | Date of the last           | Net book value of                      | Valuation method used                      | Current value of                   |
|     |   | physical inventory         | debtor's interest<br>(Where available) | for current value                          | debtor's interest                  |
|     |   |                            | (vvriere available)                    |  |                                    |
| 19. | Raw materials                                   |                            |  |  |                                    |
|     |   | MM / DD / YYYY             | \$                                     |  | \$                                 |
| 20. | Work in progress                                |                            |  |  |                                    |
|     | , ,   |                            | \$                                     |  | \$                                 |
|     |   | MM / DD / YYYY             | Ψ                                      |  |                                    |
| 21. | Finished goods, including goods held for r      | esale                      |  |  |                                    |
|     |   | MM / DD / YYYY             | \$                                     |  | \$                                 |
| 20  | Other inventors or complica                     | IVIIVI / DD / TTTT         |  |  |                                    |
| 22. | Other inventory or supplies                     |                            |  |  |                                    |
|     |   | MM / DD / YYYY             | \$                                     |  | \$                                 |
|     |   |                            |  |  |                                    |
| 23. | Total of Part 5                                 |                            |  |  | \$                                 |
|     | Add lines 19 through 22. Copy the total to line | 84.                        |  |  |                                    |
| 24  | Is any of the property listed in Part 5 perish  | nahla?                     |  |  |                                    |
| 24. | No  | iable:                     |  |  |                                    |
|     | Yes   |                            |  |  |                                    |
| 25  | Has any of the property listed in Part 5 bee    | n nurchased within 20      | daya bafara tha bank                   | runtov was filed?                          |                                    |
| 25. | _   | iii purchaseu withini 20   | days before the bank                   | rupicy was meu?                            |                                    |
|     | No  |                            |  |  |                                    |
|     | Yes. Book value V                               | aluation method            | Curre                                  | ent value                                  |                                    |
| 26. | Has any of the property listed in Part 5 bee    | n appraised by a profe     | essional within the las                | t year?                                    |                                    |
|     | □ No  |                            |  |  |                                    |
|     | ☐ Yes   |                            |  |  |                                    |
| Do  | t 6: Farming and fishing-related ass            | ets (other than title      | ed motor vehicles a                    | nd land)                                   |                                    |
| Fai | top ranning and norming related acc             |                            |  |  |                                    |
| 27. | Does the debtor own or lease any farming        | and fishing-related as     | sets (other than titled                | motor vehicles and land)?                  |                                    |
|     | ■ No. Go to Part 7.                             |                            |  |  |                                    |
|     | ☐ Yes. Fill in the information below.           |                            |  |  |                                    |
|     | _ rec. r iii iii die iiiie iiiie iiiie iiii     |                            |  |  |                                    |
|     | General description                             |                            | Net book value of debtor's interest    | Valuation method used<br>for current value | Current value of debtor's interest |
|     |   |                            | (Where available)                      | TOT CUITCHE VALUE                          | merest                             |
| 28  | Crops—either planted or harvested               |                            | ()                                     |  |                                    |
| 20. | Crops—ettrier planted or narvested              |                            | Φ.                                     |  | Φ                                  |
|     |   |                            | \$                                     |  | \$                                 |
| 29. | Farm animals Examples: Livestock, poultry, f    | arm-raised fish            |  |  |                                    |
|     |   |                            | \$                                     |  | \$                                 |
| 30  | Farm machinery and equipment (Other tha         | n titled motor vehicles)   |  |  |                                    |
| 50. | Tarm machinery and equipment (Other tha         | ir tilica motor verileies) |  |  | •                                  |
|     |   |                            | \$                                     |  | \$                                 |
| 31. | Farm and fishing supplies, chemicals, and       | feed                       |  |  |                                    |
|     |   |                            | \$                                     |  | \$                                 |
| 20  | Other farming and fishing-related property      | not already listed in F    |  |  |                                    |
| 3∠. | Caner raining and rishing-related property      | not an eauy iisteu in F    |  |  |                                    |
|     |   |                            | \$                                     |  | \$                                 |

Case 18-15824 Doc 1 Filed 04/30/18 Page 8 of 27 IF Studios. Inc.

Case number (if known) Debtor 33. Total of Part 6. Add lines 28 through 32. Copy the total to line 85. 34. Is the debtor a member of an agricultural cooperative? Yes. Is any of the debtor's property stored at the cooperative? ■ No Yes 35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed? ☐ No ☐ Yes. Book value \$\_\_\_\_\_\_ Valuation method \_\_\_\_ \_\_ Current value \$\_\_ 36. Is a depreciation schedule available for any of the property listed in Part 6? ☐ No 37. Has any of the property listed in Part 6 been appraised by a professional within the last year? ☐ No ☐ Yes Office furniture, fixtures, and equipment; and collectibles 38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles? No. Go to Part 8. ☐ Yes. Fill in the information below. Net book value of Current value of debtor's Valuation method General description debtor's interest used for current value interest (Where available) 39. Office furniture 40. Office fixtures 41. Office equipment, including all computer equipment and communication systems equipment and software 42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles 42.1 42.2\_ 42.3 43. Total of Part 7. Add lines 39 through 42. Copy the total to line 86. 44. Is a depreciation schedule available for any of the property listed in Part 7? ☐ No 45. Has any of the property listed in Part 7 been appraised by a professional within the last year? ☐ No

☐ Yes

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Debtor

| Part 8: Machinery, equipment, and vehicles   |   |   |                                    |
|--|---|---|------------------------------------|
| 46. Does the debtor own or lease any machinery, equipment, or  | vehicles?   |   |                                    |
| ☐ No. Go to Part 9.  |   |   |                                    |
| Yes. Fill in the information below.  |   |   |                                    |
| General description Include year, make, model, and identification numbers (i.e., VIN,  | Net book value of<br>debtor's interest<br>(Where available) | Valuation method used for current value | Current value of debtor's interest |
| HIN, or N-number)  | (Wilele available)  |   |                                    |
| 47. Automobiles, vans, trucks, motorcycles, trailers, and titled fa  | ırm vehicles  |   |                                    |
| 47.1   | \$  |   | \$                                 |
| 47.2   |   |   | \$                                 |
| 47.3   |   |   | \$                                 |
| 47.4   | \$  |   | \$                                 |
| 48. <b>Watercraft, trailers, motors, and related accessories</b> Example trailers, motors, floating homes, personal watercraft, and fishing v  |   |   |                                    |
| 48.1   | \$  |   | \$                                 |
| 48.2   | \$  |   | \$                                 |
| 49. Aircraft and accessories   |   |   |                                    |
| 49.1   | \$  |   | \$                                 |
| 49.2   |   |   | \$                                 |
| 50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)  |   |   |                                    |
| See Attachment 3   | \$  |   | \$ <u>5,205.00</u>                 |
| 51. Total of Part 8.   |   |   | \$5,205.00                         |
| Add lines 47 through 50. Copy the total to line 87.  |   |   | \$ <del>0,200.00</del>             |
|  |   |   |                                    |
| 52. Is a depreciation schedule available for any of the property li  | sted in Part 8?   |   |                                    |
| No     □     ··  |   |   |                                    |
| ☐ Yes  |   |   |                                    |
| 53. Has any of the property listed in Part 8 been appraised by a p   | professional within the last                                | year?                                   |                                    |
| No     Yes     Yes     No     No |   |   |                                    |
| ■ res  |   |   |                                    |

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| Debtor | IF Studios, Inc. | Case number |  |
|--------|------------------|-------------|--|
|        | Name             |             |  |

| Pai | rt 9: Real property   |  |   |   |                                    |  |  |
|-----|---|--|---|---|------------------------------------|--|--|
| 54. | Does the debtor own or lease any real proper  | ty?  |   |   |                                    |  |  |
|     | ■ No. Go to Part 10.  |  |   |   |                                    |  |  |
|     | ☐ Yes. Fill in the information below.   |  |   |   |                                    |  |  |
| 55. | Any building, other improved real estate, or la   | and which the debtor                                     | owns or in which the  | debtor has an interest                  |                                    |  |  |
|     | 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<br>of debtor's interest<br>in property | Net book value of<br>debtor's interest<br>(Where available) | Valuation method used for current value | Current value of debtor's interest |  |  |
|     | 55.1  |  | \$  |   | \$                                 |  |  |
|     | 55.2  |  | \$  |   | \$                                 |  |  |
|     | 55.3  |  | \$  |   | \$                                 |  |  |
|     | 55.4  |  | \$  |   | \$                                 |  |  |
|     | 55.5  |  | \$  |   | \$                                 |  |  |
|     | 55.6  |  |   |   | \$                                 |  |  |
| E6  | Total of Part 9.  |  |   |   |                                    |  |  |
| 56. | Add the current value on lines 55.1 through 55.6  | and entries from any a                                   | dditional sheets. Copy                                      | the total to line 88.                   | \$                                 |  |  |
|     | -   | -  |   |   |                                    |  |  |
| 57. | Is a depreciation schedule available for any o  | f the property listed i                                  | n Part 9?   |   |                                    |  |  |
|     | Yes   |  |   |   |                                    |  |  |
| 58. | Has any of the property listed in Part 9 been a   | appraised by a profes                                    | sional within the last                                      | year?                                   |                                    |  |  |
|     | □ No  | , ,  |   |   |                                    |  |  |
|     | ☐ Yes   |  |   |   |                                    |  |  |
| Par | t 10: Intangibles and Intellectual Prope  | rty  |   |   |                                    |  |  |
| 59. | Does the debtor have any interests in intangi   | bles or intellectual pr                                  | operty?   |   |                                    |  |  |
|     | ■ No. Go to Part 11.  |  |   |   |                                    |  |  |
|     | ☐ Yes. 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 |  |  |
| 60. | Patents, copyrights, trademarks, and trade se   | ecrets   |   |   |                                    |  |  |
| 61. | Internet domain names and websites  |  | \$  |   | \$                                 |  |  |
|     |   |  | \$  |   | \$                                 |  |  |
| 62. | Licenses, franchises, and royalties   |  | \$  |   | \$                                 |  |  |
| 63. | Customer lists, mailing lists, or other compile   | ations   |   |   |                                    |  |  |
| 64  | Other intangibles, or intellectual property   |  | \$  |   | \$                                 |  |  |
|     |   |  | \$  |   | \$                                 |  |  |
| 65. | Goodwill  |  | \$  |   | \$                                 |  |  |
| 66. | Total of Part 10.   |  |   |   | \$                                 |  |  |
|     | Add lines 60 through 65. Copy the total to line 89  | ).   |   |   | Ψ                                  |  |  |
|     |   |  |   |   |                                    |  |  |

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| 67.  | Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) No         | A) and 107)?      |  |  |  |
|------|---|-------------------|--|--|--|
|      | ☐ Yes   |                   |  |  |  |
| 68.  | Is there an amortization or other similar schedule available for any of the property listed in Part 10?                           |                   |  |  |  |
|      | □ No  |                   |  |  |  |
|      | ☐ Yes   |                   |  |  |  |
| 60   | Has any of the property listed in Part 10 been appraised by a professional within the last year?                                  |                   |  |  |  |
| 03.  | No  |                   |  |  |  |
|      | ☐ Yes   |                   |  |  |  |
|      |   |                   |  |  |  |
| Pa   | rt 11: All other assets   |                   |  |  |  |
| 70   | Does the debtor own any other assets that have not yet been reported on this form?  |                   |  |  |  |
| 70.  | Include all interests in executory contracts and unexpired leases not previously reported on this form.                           |                   |  |  |  |
|      | No. Go to Part 12.  |                   |  |  |  |
|      | Yes. Fill in the information below.   |                   |  |  |  |
|      | Tes. I ill ill the illiothation below.  | Current value of  |  |  |  |
|      |   | debtor's interest |  |  |  |
| 71.  | Notes receivable  |                   |  |  |  |
|      | Description (include name of obligor)   |                   |  |  |  |
|      | Total face amount doubtful or uncollectible amount  | \$                |  |  |  |
| 72.  | Tax refunds and unused net operating losses (NOLs)  |                   |  |  |  |
|      |   |                   |  |  |  |
|      | Description (for example, federal, state, local)  |                   |  |  |  |
|      | Tax year  | \$                |  |  |  |
|      | Tax year  | \$                |  |  |  |
|      | Tax year  | \$                |  |  |  |
| 73.  | Interests in insurance policies or annuities  |                   |  |  |  |
|      |   | \$                |  |  |  |
| 74.  | Causes of action against third parties (whether or not a lawsuit has been filed)  |                   |  |  |  |
|      | See Attachment 5  | \$                |  |  |  |
|      | Nature of claim   | Φ                 |  |  |  |
|      |   |                   |  |  |  |
|      | Amount requested \$See Attachment 4: Additional Causes of Action Against Third Parties  |                   |  |  |  |
| 75.  | Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to |                   |  |  |  |
|      | set off claims  |                   |  |  |  |
|      |   | \$                |  |  |  |
|      | Nature of claim   | <b>-</b>          |  |  |  |
|      |   |                   |  |  |  |
|      | Amount requested_ \$  |                   |  |  |  |
| 76.  | Trusts, equitable or future interests in property   |                   |  |  |  |
|      |   | \$                |  |  |  |
| 77.  | Other property of any kind not already listed Examples: Season tickets,   |                   |  |  |  |
|      | country club membership   |                   |  |  |  |
|      |   | \$                |  |  |  |
|      |   | \$                |  |  |  |
| 79   | Total of Part 11.   |                   |  |  |  |
| 1 ö. |   | \$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 professional within the last year?  No Yes                          |                   |  |  |  |

IF Studios, Inc.

Case number (if known)\_

Part 12:

Debtor

Summary

In Part 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 |
| ). Cash, cash equivalents, and financial assets. Copy line 5, Part 1.                  | \$ <u>40,008.59</u>                |                                |
| 1. Deposits and prepayments. Copy line 9, Part 2.                                      | \$329.99                           |                                |
| 2. Accounts receivable. Copy line 12, Part 3.  | \$0.00                             |                                |
| 3. Investments. Copy line 17, Part 4.  | \$0.00                             |                                |
| 4. Inventory. Copy line 23, Part 5.  | \$0.00                             |                                |
| 5. Farming and fishing-related assets. Copy line 33, Part 6.                           | \$0.00                             |                                |
| 6. Office furniture, fixtures, and equipment, and collectibles.  Copy line 43, Part 7. | \$0.00                             |                                |
| 7. Machinery, equipment, and vehicles. Copy line 51, Part 8.                           | \$ <u>5,205.00</u>                 |                                |
| 3. Real property. Copy line 56, Part 9   | →                                  | \$0.00                         |
| 9. Intangibles and intellectual property. Copy line 66, Part 10.                       | \$ <u>0.00</u>                     |                                |
| D. All other assets. Copy line 78, Part 11.  | <b>+</b> \$0.00                    |                                |
| I. <b>Total.</b> Add lines 80 through 90 for each column91a.                           | \$ <u>45,543.58</u>                | <b>♣</b> 91b. \$0.00           |
|  |                                    |                                |

## Attachment 1/2 Debtor: IF Studios, Inc. Case No:

#### Attachment 1

Wells Fargo Bank

Savings

9951

35,076.22

Wells Fargo Bank

checking

5543

2,305.70

Wells Fargo Bank

checking

7025

365.02

Attachment 2: Additional Checking, Savings, Money Market, or Financial Brokerage Accounts

Institution: Wells Fargo Bank Account Type: checking

Last 4 Digits of Account Number: 5543

Value: \$2.305.70

Institution: Wells Fargo Bank Account Type: checking

Last 4 Digits of Account Number: 7025

Value: \$365.02

#### Attachment 3

Mass network file storage & backups - 400; non-virtualized HeroEngine database server - 100; non-virtualized HeroEngine world server - 3700; Juniper gateway - 95; Juniper switch - 155; power strips (4) - 60; desktop computers (3) - 600; computer monitor - 65; tablet - 30

Attachment 4: Additional Causes of Action Against Third Parties

Description: Claim against Nancye Shipe

Nature of Claim: Misappropriation of Company Funds

Amount Requested: Unknown

Value: Unknown

## Attachment 2/2 Debtor: IF Studios, Inc. Case No:

#### Attachment 5

Claim against Oracle

Breach of Contract

Unknown

Claim against Nancye Shipe

Unknown

Misappropriation of Company Funds

Unknown

| Case 18-1   | 5824 Doc 1 Filed 04/30/18 Page <sup>2</sup>  | 15 of 27  |  |  |
|---|--|---|--|--|
| Fill in this information to identify the case:  |  |   |  |  |
| Debtor name IF Studios, Inc.  | <del></del>  |   |  |  |
| United States Bankruptcy Court for the: District of   | Maryland   |   |  |  |
| Case number (If known):   | _  | C   | Check if this is an amended filing                     |  |
| Official Form 206D  |  |   | amonaca ming   |  |
| Schedule D: Creditors \   | Nho Have Claims Secured b  | y Property  | 12/15  |  |
| Be as complete and accurate as possible.  |  |   |  |  |
| <ul> <li>Do any creditors have claims secured by debtor's property?</li> <li>No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.</li> <li>Yes. Fill in all of the information below.</li> </ul> |  |   |  |  |
| Part 1: List Creditors Who Have Secur   | ed Claims  |   |  |  |
| List in alphabetical order all creditors who h     secured claim, list the creditor separately for ear  | ave secured claims. If a creditor has more than one ich claim.                             | Column A Amount of claim Do not deduct the value of collateral. | Column B  Value of collateral that supports this claim |  |
| 2.1 Creditor's name   | Describe debtor's property that is subject to a lien                                       |   |  |  |
| Creditor's mailing address  |  | _ \$  | \$   |  |
|   | Describe the lien  | -   |  |  |
| Creditor's email address, if known  | Is the creditor an insider or related party?   |   |  |  |
|   | □ No □ Yes   |   |  |  |
| Date debt was incurred  | Is anyone else liable on this claim?   |   |  |  |
| Last 4 digits of account number   | <ul><li>□ No</li><li>□ Yes. Fill out Schedule H: Codebtors (Official Form 206H).</li></ul> |   |  |  |
| Do multiple creditors have an interest in the same property?  | As of the petition filing date, the claim is:<br>Check all that apply.                     |   |  |  |
| ☐ No ☐ Yes. Specify each creditor, including this creditor,   | Contingent Unliquidated  |   |  |  |
| and its relative priority.  | Disputed   |   |  |  |
| 2.2 Creditor's name   | Describe debtor's property that is subject to a lien                                       |   |  |  |
|   | ·  | _ \$  | \$   |  |
| Creditor's mailing address  |  | -   |  |  |
|   | Describe the lien  | -   |  |  |
| Creditor's email address, if known  | Is the creditor an insider or related party?   |   |  |  |
|   | ☐ No<br>☐ Yes  |   |  |  |
| Date debt was incurred  | Is anyone else liable on this claim? ☐ No  |   |  |  |
| Last 4 digits of account number   | Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).                           |   |  |  |
| Do multiple creditors have an interest in the same property?  | As of the petition filing date, the claim is:<br>Check all that apply.                     |   |  |  |
| □ No  | ☐ Contingent ☐ Unliquidated  |   |  |  |
| Yes. Have you already specified the relative priority?  | Disputed   |   |  |  |
| No. Specify each creditor, including this creditor, and its relative priority.  | _  |   |  |  |
| Yes. The relative priority of creditors is specified on lines   | -  |   |  |  |
| 3. Total of the dollar amounts from Part 1, Colu  | mn A, including the amounts from the Additional  | <u>\$0.00</u>   |  |  |

Case 18-15824 Doc 1 Filed 04/30/18 Page 16 of 27 Fill in this information to identify the case: IF Studios, Inc. Debtor United States Bankruptcy Court for the: District of Maryland (If known) Check if this is an amended filing Official Form 206E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form. **List All Creditors with PRIORITY Unsecured Claims** 1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507). No. Go to Part 2. Yes. Go to line 2. 2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1. **Priority amount** Total claim Priority creditor's name and mailing address As of the petition filing date, the claim is: \$6,911.77 \$6,911.77 Alex Seavy Check all that apply. ☐ Contingent 7 Hayford Street Unliquidated Farmingdale, ME 04344 Disputed Date or dates debt was incurred Basis for the claim: Wages/Salaries/Commissions Last 4 digits of account Is the claim subject to offset? number × No Yes Specify Code subsection of PRIORITY unsecured **claim:** 11 U.S.C. § 507(a) (\_\_4\_\_) As of the petition filing date, the claim is: \$108,865.212.2 Priority creditor's name and mailing address \$ 108,865.21 Christopher Larson Check all that apply. □ Contingent 1531 Heritage Manor Circle Unliquidated Saint Peters, MO 63303 □ Disputed Date or dates debt was incurred Basis for the claim: Wages/Salaries/Commissions Last 4 digits of account Is the claim subject to offset? number Yes Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (\_\_4\_\_)

As of the petition filing date, the claim is: \$4,365.392.3 Priority creditor's name and mailing address \$4,365.39 Glenn Villadsen Check all that apply. Contingent 23016 Timber Creek Lane Unliquidated Disputed Clarksburg, MD 20871 Date or dates debt was incurred Basis for the claim: Wages/Salaries/Commissions Last 4 digits of account Is the claim subject to offset? number ■ No Yes Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (\_\_4\_\_) page 1 of 8 Official Form 206E/F Schedule E/F: Creditors Who Have Unsecured Claims

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| Part 1. Additional Page |
|-------------------------|
|-------------------------|

|             | by this page if more space is needed. Continue no<br>vious page. If no additional PRIORITY creditors e | - · · · · · · · · · · · · · · · · · · ·   | Total claim         | Priority amount |
|-------------|--|---|---------------------|-----------------|
| 2. <u>4</u> | Priority creditor's name and mailing address   | As of the motition filling data the plain in.   | \$ 10,026.36        | \$ 10,026.36    |
|             | Jay Aaron Miller   | As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated |                     |                 |
|             | 90 Vantis Drive, Unit 4113   | ☐ Disputed  |                     |                 |
|             | Aliso Viejo, CA 92656  |   |                     |                 |
|             | Date or dates debt was incurred  | Basis for the claim:<br>Wages/Salaries/Commissions  |                     |                 |
|             | Last 4 digits of account number  | Is the claim subject to offset?   |                     |                 |
|             | Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. $\S$ 507(a) (4)                         | ☐ Yes   |                     |                 |
| 2. <u>5</u> | Priority creditor's name and mailing address   |   | \$ 5,250.00         | \$ 5,250.00     |
|             |  | As of the petition filing date, the claim is: Check all that apply.                           |                     |                 |
|             | Joe Stann  | Contingent Unliquidated   |                     |                 |
|             | 4511 Feldspar Road   | ☐ Disputed  |                     |                 |
|             | Middletown, MD 21769   |   |                     |                 |
|             | Date or dates debt was incurred  | Basis for the claim:<br>Wages/Salaries/Commissions  |                     |                 |
|             | Last 4 digits of account number  | Is the claim subject to offset?  No   |                     |                 |
|             | Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § $507(a)$ ( $\_4$ )                    | Yes   |                     |                 |
| 2. <u>6</u> | Priority creditor's name and mailing address   | As of the petition filing date, the claim is: Check all that apply.                           | \$ <u>18,365.38</u> | \$ 18,365.38    |
|             | Jonathan Grant   | ☐ Contingent  |                     |                 |
|             | 19866 Century Boulevard, Unit 103  | Unliquidated Disputed   |                     |                 |
|             | Germantown, MD 20874   | _ Disputod  |                     |                 |
|             | Date or dates debt was incurred  | Basis for the claim:<br>Wages/Salaries/Commissions  |                     |                 |
|             | Last 4 digits of account number  | Is the claim subject to offset? ☑ No  |                     |                 |
|             | Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § $507(a)$ ( $\underline{4}$ )          | ☐ Yes   |                     |                 |
| 2.7         | Priority creditor's name and mailing address   | As of the petition filing date, the claim is:   | \$_Unknown          | \$ Unknown      |
|             | Missouri Department of Revenue   | Check all that apply.  Contingent   |                     |                 |
|             | See Attachment 1   | ☐ Unliquidated  |                     |                 |
|             | Jefferson City, MO 65101   | ☐ Disputed  |                     |                 |
|             | Date or dates debt was incurred  | Basis for the claim: Taxes and Other Government   |                     |                 |
|             | Last 4 digits of account number  | Debts Is the claim subject to offset?  No   |                     |                 |
|             | Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. $\S$ 507(a) (8)                         | Yes   |                     |                 |

<u>IF Studios, Inc. Case 18-15824</u> <u>Doc 1</u> <u>Filed 04/30/18 Page 18 of 27</u>

| Part 1. | <b>Additional</b> | Page |
|---------|-------------------|------|
|---------|-------------------|------|

|               | by this page if more space is needed. Continue no<br>vious page. If no additional PRIORITY creditors e |  | Total claim          | Priority amount      |
|---------------|--|--|----------------------|----------------------|
| 2. <u>8</u>   | Priority creditor's name and mailing address   | As of the petition filing date, the claim is:                                    | \$ <u>163,061.33</u> | <u>\$ 163,061.33</u> |
|               | Sarrene Grant  | Check all that apply.  Contingent  |                      |                      |
|               | 19866 Century Boulevard, Unit 103  | ☐ Unliquidated   |                      |                      |
|               | Germantown, MD 20874   | ☐ Disputed   |                      |                      |
|               | Date or dates debt was incurred  | Basis for the claim: Wages/Salaries/Commissions                                  |                      |                      |
|               | Last 4 digits of account number  | Is the claim subject to offset? ☑ No   |                      |                      |
|               | Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)                            | Yes  |                      |                      |
| 2.9           | Priority creditor's name and mailing address   | As of the petition filing date, the claim is:                                    | \$ Unknown           | <u>\$ Unknown</u>    |
|               | State of California  | Check all that apply.  Contingent  |                      |                      |
|               | See Attachment 2   | Unliquidated   |                      |                      |
|               | Sacramento, CA 94280   | ☐ Disputed   |                      |                      |
|               | ·  |  |                      |                      |
|               | Date or dates debt was incurred  | Basis for the claim: Taxes and Other Government Debts                            |                      |                      |
|               | Last 4 digits of account   | Is the claim subject to offset?  |                      |                      |
|               | number   | ☑ No<br>☐ Yes  |                      |                      |
|               |  |  |                      |                      |
| 2. <u>1</u> 0 | Priority creditor's name and mailing address   | As of the petition filing date, the claim is:                                    | \$ <u>0.00</u>       | \$ 0.00              |
|               |  | Check all that apply.  |                      |                      |
|               |  | Contingent Unliquidated  |                      |                      |
|               |  | Disputed   |                      |                      |
|               | Date or dates debt was incurred  | Basis for the claim:   |                      |                      |
|               | Last 4 digits of account   | Is the claim subject to offset?  |                      |                      |
|               | number   | □ No   |                      |                      |
|               | Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()                             | Yes  |                      |                      |
| 2. <u>1</u> 1 | Priority creditor's name and mailing address   | As of the petition filing date, the claim is:  Check all that apply.  Contingent | \$                   | \$                   |
|               |  | ☐ Unliquidated☐ Disputed   |                      |                      |
|               | Date or dates debt was incurred  | Basis for the claim:   |                      |                      |
|               | Last 4 digits of account number  | Is the claim subject to offset?  |                      |                      |
|               | Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()                             | ☐ Yes  |                      |                      |

Part 2:

**List All Creditors with NONPRIORITY Unsecured Claims** 

| 3.  | List in alphabetical order all of the creditors with nonpriority<br>unsecured claims, fill out and attach the Additional Page of Part |  | 4 creditors with nonpriority |
|-----|---|--|------------------------------|
|     | •   |  | Amount of claim              |
| 3.1 | Nonpriority creditor's name and mailing address  AWS  | As of the petition filing date, the claim is:  Check all that apply.  Contingent   | \$_35,000.00                 |
|     | 410 Terry Ave North   | ☐ Unliquidated<br>☐ Disputed   |                              |
|     | Seattle, WA 98109   | Basis for the claim: Services  |                              |
|     | Date or dates debt was incurred  Last 4 digits of account number  4 1 7 7   | Is the claim subject to offset?  ☑ No ☐ Yes  |                              |
| 3.2 | Nonpriority creditor's name and mailing address Banc of America Leasing & Capital LLC 2600 W. Big Beaver Road Troy, MI 20852          | As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim: Loan | \$_130,251.33                |
|     | Date or dates debt was incurred  Last 4 digits of account number  | Is the claim subject to offset?  ☑ No ☐ Yes  |                              |
| 3.3 | Nonpriority creditor's name and mailing address  Cogent Communications EU   | As of the petition filing date, the claim is:  Check all that apply.  Contingent   | <u>\$ 0.00</u>               |
|     | P.O. Box 791087  Baltimore, MD 21279  | ☐ Unliquidated ☐ Disputed ☐ Basis for the claim: Services  | _                            |
|     | Date or dates debt was incurred  Last 4 digits of account number 6 0 0 1  | Is the claim subject to offset?  ☑ No ☐ Yes  |                              |
| 3.4 | Nonpriority creditor's name and mailing address Cogent Communications West  P.O. Box 791087   | As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed                            | \$_13,382.20                 |
|     | Baltimore, MD 21279   | Basis for the claim: Services  | _                            |
|     | Date or dates debt was incurred  Last 4 digits of account number  0 0 0 1   | Is the claim subject to offset?  ☑ No ☐ Yes  |                              |
| 3.5 | Nonpriority creditor's name and mailing address Commmissioner of Labor and Industry  100 N. Eutaw Street Room 607                     | As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed                            | \$_8,688.92                  |
|     | Baltimore, MD 21201   | Basis for the claim: Wage Claim  | _                            |
|     | Date or dates debt was incurred  Last 4 digits of account number  | Is the claim subject to offset?  ☑ No ☐ Yes  |                              |
| 3.6 | Nonpriority creditor's name and mailing address Copgent Communications East  P.O. Box 791087  Baltimore, MD 21279                     | As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed                            | \$ <u>41,581.94</u>          |
|     |   | Basis for the claim: Services  |                              |
|     | Date or dates debt was incurred  Last 4 digits of account number  0 0 0 2   | Is the claim subject to offset?  ☑ No ☐ Yes  |                              |

<u>IF Studios, Inc. Case 18-15824</u> <u>Doc 1</u> <u>Filed 04/30/18 Page 20 of 27</u>

Debtor

Part 2: Additional Page

|              | opy this page only if more space is needed. Continue numberi<br>evious page. If no additional NONPRIORITY creditors exist, do | Amount of claim  |                      |
|--------------|---|--|----------------------|
| 3. <u>7</u>  | Nonpriority creditor's name and mailing address  CorePHP  | As of the petition filing date, the claim is:  Check all that apply.  Contingent                       | § 6,050.00           |
|              | 245 Michigan Ave. W Battle Creek, MI 49017  | Unliquidated Disputed Liquidated and neither contingent nor disputed                                   |                      |
|              | Date or dates debt was incurred   | Basis for the claim: Services  Is the claim subject to offset?   | _                    |
|              | Last 4 digits of account number d i o s   | X No<br>□ Yes  |                      |
| 3.8_         | Nonpriority creditor's name and mailing address  Daniel A. Grossberg, LLC  19847-J Century Boulevard  Germantown, MD 20874    | As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed | <u>\$ 2,000.00</u>   |
|              | Germanown, MD 20074   | Basis for the claim:   | _                    |
|              | Date or dates debt was incurred  Last 4 digits of account number  | Is the claim subject to offset?  ☑ No ☐ Yes  |                      |
| 3. <u>9</u>  | Nonpriority creditor's name and mailing address  Herb Marsalas  11329 178th Place NE  | As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed | <u>\$ 164,505.50</u> |
|              | Redmond, WA 98052   | Basis for the claim: Services  | _                    |
|              | Date or dates debt was incurred  Last 4 digits of account number  | Is the claim subject to offset?  ☑ No ☐ Yes  |                      |
| 3. <u>10</u> | Nonpriority creditor's name and mailing address   | As of the petition filing date, the claim is:  Check all that apply.  Contingent                       | \$ 108,000.00        |
|              | 5446 Sunset Boulevard Suite 201 Lexington, SC 29072   | ☐ Unliquidated<br>☐ Disputed   |                      |
|              | Lexington, SC 29072   | Basis for the claim: Services  | _                    |
|              | Date or dates debt was incurred  Last 4 digits of account number  d i o s   | Is the claim subject to offset?  ☑ No ☐ Yes  |                      |
| 3.11         | Nonpriority creditor's name and mailing address   |  |                      |
|              | RAD Games   | As of the petition filing date, the claim is:<br>Check all that apply.                                 | \$ <u>51,000.00</u>  |
|              | 550 Kirkland Way Suite 406  | Contingent Unliquidated Disputed   |                      |
|              | Kirkland, WA 98033  |  |                      |
|              | Date or dates debt was incurred   | Basis for the claim: Services Is the claim subject to offset?  No                                      | _                    |
|              | Last 4 digits of account number   | Yes  |                      |

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Debtor

Part 2: Additional Page

|              | py this page only if more space is needed. Continue numberi<br>evious page. If no additional NONPRIORITY creditors exist, do |  | Amount of claim     |
|--------------|--|--|---------------------|
| 3. <u>12</u> | Nonpriority creditor's name and mailing address Rogers Consulting  | As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed | <u>\$ 16,674.60</u> |
|              | 19847 Century Boulevard Suite 200  | Liquidated and neither contingent nor  |                     |
|              | Germantown, MD 20874   | disputed   |                     |
|              |  | Basis for the claim: Rent  | _                   |
|              | Date or dates debt was incurred  | Is the claim subject to offset?  No  |                     |
|              | Last 4 digits of account number  | Yes  |                     |
| 3. <u>13</u> | Nonpriority creditor's name and mailing address  | As of the petition filing date, the claim is:  |                     |
|              | Singular Inversions, Inc.  | Check all that apply.  Contingent Unliquidated   | \$_22,000.00        |
|              | 2191 Yonge Street Suite 3412   | Disputed   |                     |
|              | Toronto, Ontario, Canada M4S 3H8   | Basis for the claim: Services  |                     |
|              | Date or dates daht was insured   | Is the claim subject to offset?  | _                   |
|              | Date or dates debt was incurred  Last 4 digits of account number  d i 0 S  | ☐ No ☐ Yes   |                     |
|              | Last 4 digits of account number  | ☐ Yes  |                     |
| 3. <u>14</u> | Nonpriority creditor's name and mailing address  | As of the notition filing date the claim is:   |                     |
|              | Umbra Software Oy  | As of the petition filing date, the claim is:  Check all that apply.                                   | \$_92,835.00        |
|              | Kalevankatu 30, 00100  | <ul> <li>Contingent</li> <li>Unliquidated</li> <li>Disputed</li> </ul>                                 |                     |
|              | Helsinki, Finland,   | -  |                     |
|              |  | Basis for the claim: <u>Services</u>   | _                   |
|              | Date or dates debt was incurred  | Is the claim subject to offset?  ☑ No  |                     |
|              | Last 4 digits of account number  | Yes  |                     |
| 3. <u>15</u> | Nonpriority creditor's name and mailing address  | As of the petition filing date, the claim is:  | s                   |
|              |  | Check all that apply.  Contingent  | ·                   |
|              |  | ☐ Unliquidated ☐ Disputed  |                     |
|              |  | Basis for the claim:   |                     |
|              | Date or dates debt was incurred  | Is the claim subject to offset?  | _                   |
|              | Last 4 digits of account number  | ☐ No   |                     |
|              | Last 4 digits of account number  | ☐ Yes  |                     |
| 3.16         | Nonpriority creditor's name and mailing address  |  |                     |
| J. <u>10</u> | monphority oreditor a name and maining address   | As of the petition filing date, the claim is: Check all that apply.                                    | \$                  |
|              |  | Contingent   |                     |
|              |  | ☐ Unliquidated ☐ Disputed  |                     |
|              |  | Basis for the claim:   |                     |
|              | Date or dates debt was incurred  | Is the claim subject to offset?  | _                   |
|              | Last 4 digits of account number  | □ No □ Yes   |                     |
|              |  | <u> </u>   |                     |

**List Others to Be Notified About Unsecured Claims** 

Part 3: 4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors. If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page. Name and mailing address On which line in Part 1 or Part 2 is the Last 4 digits of account number, if related creditor (if any) listed? Line 3.2 4.1. Whttaker & Associates, PC ■ Not listed. Explain \_\_\_\_ 1010 Rockville Pike, Suite 607 Rockville, MD 20852 Line 3.5 4.2. Jessica B. Kaufman, Esquire 500 N. Calvert Street, Suite 406 ■ Not listed. Explain \_\_\_\_ Baltimore, MD 21202 4.3. Line \_\_\_ ■ Not listed. Explain \_\_\_\_\_ 4.4. Line \_\_\_ ■ Not listed. Explain \_\_\_\_\_ 4.5. Line \_\_ ■ Not listed. Explain \_\_\_\_ 4.6. Not listed. Explain \_\_\_\_\_ 4.7. Line Not listed. Explain \_\_\_\_ Line \_\_\_\_ 4.8. ■ Not listed. Explain \_\_\_\_ 4.9. Not listed. Explain \_\_\_\_\_ 4.10. Line \_\_\_ ■ Not listed. Explain \_ 4.11. Line \_\_ ■ Not listed. Explain \_\_\_\_ 4.12.

Line \_\_

Not listed. Explain \_\_\_\_\_

Part 4:

#### **Total Amounts of the Priority and Nonpriority Unsecured Claims**

| i. Add the amounts of priority and nonpriority unsecured claims. |              |                        |  |
|--|--------------|------------------------|--|
|  |              | Total of claim amounts |  |
| 5a. Total claims from Part 1                                     | 5a.          | \$316,845.44           |  |
| 5b. <b>Total claims from Part 2</b>                              | 5b. <b>+</b> | \$ 691,969.49          |  |
| 5c. <b>Total of Parts 1 and 2</b> Lines 5a + 5b = 5c.            | 5c.          | \$1,008,814.93         |  |

# Attachment Debtor: IF Studios, Inc. Case No:

Attachment 1

Harry S Truman State Office Building, 301 West High Street

Attachment 2

**Employment Development Department, P.O. Box 826880** 

| Fill | in this information to identify  | the case:                        |                         |  |                      |                     |  |
|------|--|----------------------------------|-------------------------|--|----------------------|---------------------|--|
|      | otor name _IF Studios, Inc.  |                                  |                         |  |                      |                     |  |
|      | ted States Bankruptcy Court for the:   | District of Maryland             |                         |  |                      |                     |  |
|      | se number (If known):  |                                  | Chapter11_              |  |                      |                     |  |
|      | . , ,  |                                  |                         |  |                      |                     |  |
|      |  |                                  |                         |  |                      | Check if this is an |  |
| Ott  | Sicial Form 2060   |                                  |                         |  |                      | amended filing      |  |
|      | ficial Form 206G   | 1 0                              |                         |  |                      |                     |  |
|      | hedule G: Exec   |                                  |                         |  |                      | 12/15               |  |
| Be a | s complete and accurate as po  | ossible. If more space           | is needed, copy and     | d attach the additional page   | e, numbering the ent | ries consecutively. |  |
|      | Does the debtor have any exe   | •                                | •                       |  |                      |                     |  |
|      | <ul><li>No. Check this box and file t</li><li>Yes. Fill in all of the informat</li></ul> |                                  |                         |  |                      |                     |  |
|      | Form 206A/B).  | non below even if the co         | onitiacts of leases are |  |                      |                     |  |
| 2.   | 2. List all contracts and unexpired leases   |                                  |                         | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease |                      |                     |  |
|      | State what the contract or<br>lease is for and the nature<br>of the debtor's interest    | Contract for Accounting Services |                         | Daniel A. Grossberg, L   | LC                   |                     |  |
| 2.1  |  |                                  |                         | 19847-J Century Boule  | vard                 |                     |  |
|      | State the term remaining   |                                  |                         |  |                      | 00074               |  |
|      | List the contract number of  |                                  |                         | Germantown   | MD                   | 20874               |  |
|      | any government contract  |                                  |                         |  |                      |                     |  |
| 2.2  | State what the contract or lease is for and the nature of the debtor's interest          |                                  |                         |  |                      |                     |  |
| 2.2  |  |                                  |                         |  |                      |                     |  |
|      | State the term remaining   |                                  |                         | -  |                      |                     |  |
|      | List the contract number of<br>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<br>any government contract                                   | <del></del>                      |                         |  |                      |                     |  |
|      | 1  |                                  |                         |  |                      |                     |  |
| 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<br>any government contract                                   |                                  |                         |  |                      |                     |  |
|      | State what the contract or   |                                  |                         |  |                      |                     |  |
| 2.5  | lease is for and the nature  |                                  |                         |  |                      |                     |  |
|      | of the debtor's interest   |                                  |                         |  |                      |                     |  |
|      | State the term remaining  List the contract number of                                    |                                  |                         | -  |                      |                     |  |
|      | any government contract  |                                  |                         |  |                      |                     |  |

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| Fill i        | n this information to ident  | ify the case:  |                             |                     |   |                                    |  |
|---------------|--|--|-----------------------------|---------------------|---|------------------------------------|--|
| Debto         | or name IF Studios, Inc.   |  |                             |                     |   |                                    |  |
| Unite         | d States Bankruptcy Court for th   | ne: District of Mary   | land                        |                     |   |                                    |  |
| Case          | number (If known):   |  | _                           |                     |   |                                    |  |
|               |  |  |                             |                     |   |                                    |  |
| Offi          | cial Form 206H   |  |                             |                     | I   | Check if this is an amended filing |  |
| Scl           | hedule H: Co   | debtors  |                             |                     |   | 12/15                              |  |
| e as<br>ne Ac | complete and accurate as<br>Iditional Page to this page  | s possible. If more  | e space is needed, copy t   | he Additional Page  | e, numbering the entries conse  | ecutively. Attach                  |  |
| 2.            | ☐ Yes In Column 1, list as codeb creditors, Schedules D-G.   | submit this form to<br>tors all of the peo<br>Include all guarar | ople or entities who are al | so liable for any d | ebts listed by the debtor in the creditor to whom the debt is owe               | schedules of<br>d and each         |  |
|               | schedule on which the creditor is listed. If the codebtor is liable on a debt to more the Column 1: Codebtor |  |                             |                     | an one creditor, list each creditor separately in Column 2.  Column 2: Creditor |                                    |  |
|               | Name   | Mailing address  | 3                           |                     | Name  | Check all schedules                |  |
|               |  | Ū  |                             |                     |   | that apply:                        |  |
| 2.1           |  | Street   |                             |                     |   | □ D<br>□ E/F<br>□ G                |  |
|               |  | City   | State                       | ZIP Code            |   |                                    |  |
| 2.2           |  |  |                             |                     |   | □ D                                |  |
|               |  | Street   |                             |                     |   | □ E/F<br>□ G                       |  |
|               |  | City   | State                       | ZIP Code            |   |                                    |  |
| 2.3           |  |  |                             |                     |   | □ D                                |  |
|               |  | Street   |                             |                     |   | □ E/F<br>□ G                       |  |
|               |  |  |                             |                     |   |                                    |  |
| 2.4           |  | City   | State                       | ZIP Code            |   |                                    |  |
|               |  | Street   |                             |                     |   | □ D<br>□ E/F<br>□ G                |  |
|               |  | City   | State                       | ZIP Code            |   |                                    |  |
| 2.5           |  |  |                             |                     |   | □ D                                |  |
|               |  | Street   |                             |                     |   | □ E/F<br>□ G                       |  |
|               |  | City   | State                       | ZIP Code            |   |                                    |  |
| 2.6           |  | Street   |                             |                     | ·   | □ D<br>□ E/F<br>□ G                |  |

Official Form 206H Schedule H: Codebtors page 1 of 1

ZIP Code

State

City

| _   |                      |
|---|----------------------|
| Fill in this information to identify the case:  |                      |
| Debtor name IF Studios, Inc.  |                      |
| United States Bankruptcy Court for the: District of Maryland  |                      |
| Case number (If known):   |                      |
|   | ☐ Check if this is a |
|   | amended filing       |
|   |                      |
| Official Form 206Sum  |                      |
| Summary of Assets and Liabilities for Non-Individuals   | 12/15                |
|   |                      |
|   |                      |
| Part 1: Summary of Assets   |                      |
| Cabadida A/D. Assata Bad and Banagad Branarts/Official Farm 2006 (D)  |                      |
| Schedule A/B: Assets–Real and Personal Property (Official Form 206A/B)      Real property:  |                      |
| 1a. Real property:           Copy line 88 from Schedule A/B   | \$ <u>0.00</u>       |
| # Total passaged passages   |                      |
| 1b. <b>Total personal property:</b> Copy line 91A from <i>Schedule A/B</i>  | \$ <u>45,543.58</u>  |
| 1c. Total of all property:  | 45.540.50            |
| Copy line 92 from Schedule A/B  | \$ <u>45,543.58</u>  |
|   |                      |
|   |                      |
| Part 2: Summary of Liabilities  |                      |
| Summary of Liabilities  |                      |
|   |                      |
| Schodula D. Craditara Who Hold Claims Secured by Branarty (Official Form 206D)  |                      |
| <ol> <li>Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 206D)</li> <li>Copy the total dollar amount listed in Column A, Amount of claim, at the bottom of page 1 of Schedule D</li> </ol> | \$ <u>0.00</u>       |
| B. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)   |                      |
| . Schedule Lift. Greditors who have onsecured dialins (Official Form 200E/F)  |                      |
| 3a. <b>Total claim amounts of priority unsecured claims:</b> Copy the total claims from Part 1 from line 6a of <i>Schedule E/F</i>  | \$_316,845.44        |
|   |                      |
| 3b. <b>Total amount of claims of non-priority amount of unsecured claims:</b> Copy the total of the amount of claims from Part 2 from line 6b of <i>Schedule E/F</i>  | + \$ 691,969.49      |
| 2-1 <sub>F</sub> ,  |                      |
|   |                      |
| 4. <b>Total liabilities</b>   | \$ 1,008,814.93      |