Fill in this information to identify the case:

Debtor Yardbird Chicago, LLC

United States Bankruptcy Court for the: _____ District of Delaware (State)

Case number 26-11484

Modified Official Form 410
Proof of Claim

04/25

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. **Do not send original documents;** they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to $500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) **that you received.**

Part 1: Identify the Claim

1. **Who is the current creditor?**

Illinois Department of Revenue

Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor _____

2. **Has this claim been acquired from someone else?**

☑ No

☐ Yes. From whom? _____

3. **Where should notices and payments to the creditor be sent?**

Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

Where should notices to the creditor be sent?	**Where should payments to the creditor be sent?** (if different)
Illinois Department of Revenue P.O. Box 19035 Springfield, Illinois 62794	
Contact phone 217-557-9474	Contact phone _____
Contact email Rev.Bankruptcy@illinois.gov	Contact email _____

Uniform claim identifier (if you use one):

_ _

4. **Does this claim amend one already filed?**

☑ No

☐ Yes. Claim number on court claims registry (if known) _____ Filed on _____ MM / DD / YYYY

5. **Do you know if anyone else has filed a proof of claim for this claim?**

☑ No

☐ Yes. Who made the earlier filing? _____

26114842610300000000000001

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. **Do you have any number you use to identify the debtor?**

☐ No

☑ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 6273

7. **How much is the claim?** $ 4,998.02 . **Does this amount include interest or other charges?**

☐ No

☑ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. **What is the basis of the claim?**

Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.

Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).

Limit disclosing information that is entitled to privacy, such as health care information.

Taxes

9. **Is all or part of the claim secured?**

☑ No

☐ Yes. The claim is secured by a lien on property.

Nature or property:

☐ Real estate: If the claim is secured by the debtor's principle residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.

☐ Motor vehicle

☐ Other. Describe: _____

Basis for perfection: _____

Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)

Value of property: $_____

Amount of the claim that is secured: $_____

Amount of the claim that is unsecured: $_____ (The sum of the secured and unsecured amount should match the amount in line 7.)

Amount necessary to cure any default as of the date of the petition: $_____

Annual Interest Rate (when case was filed)_____%

☐ Fixed

☐ Variable

10. **Is this claim based on a lease?**

☑ No

☐ Yes. **Amount necessary to cure any default as of the date of the petition.** $_____

11. **Is this claim subject to a right of setoff?**

☐ No

☑ Yes. Identify the property: See summary page

26114842610300000000000001

12. **Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?**

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

☐ No

☑ Yes. *Check all that apply:*

	Amount entitled to priority
☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	$
☐ Up to $3,800* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	$
☐ Wages, salaries, or commissions (up to $17,150*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).	$
☑ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	$ 4,559.92
☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	$
☐ Other. Specify subsection of 11 U.S.C. § 507(a)(__) that applies.	$

* Amounts are subject to adjustment on 4/01/28 and every 3 years after that for cases begun on or after the date of adjustment.

13. **Is all or part of the claim entitled to administrative priority pursuant to 11 U.S.C. § 503(b)(9)?**

☑ No

☐ Yes. Indicate the amount of your claim arising from the value of any goods received by the debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.

$_____

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(3) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to $500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

☑ I am the creditor.

☐ I am the creditor's attorney or authorized agent.

☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgement that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 10/30/2026
MM / DD / YYYY

/s/Taryn Wehling
Signature

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

Name: Taryn Wehling
First name | Middle name | Last name

Title: RTS II

Company: Illinois Department of Revenue Bankruptcy Unit
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

Contact phone _____ Email _____

2611484261030000000000001

Verita (KCC) ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (866) 506-4002 | International (781) 575-2094

Debtor:
26-11484 - Yardbird Chicago, LLC
District:
District of Delaware

Creditor:
Illinois Department of Revenue
P.O. Box 19035
Springfield, Illinois, 62794
Phone:
217-557-9474
Phone 2:
Fax:
Email:
Rev.Bankruptcy@illinois.gov

Has Supporting Documentation:
Yes, supporting documentation successfully uploaded
Related Document Statement:

Has Related Claim:
No
Related Claim Filed By:

Filing Party:
Creditor

Other Names Used with Debtor:

Amends Claim:
No
Acquired Claim:
No

Basis of Claim:
Taxes

Last 4 Digits:
Yes - 6273

Uniform Claim Identifier:

Total Amount of Claim:
4,998.02

Includes Interest or Charges:
Yes

Has Priority Claim:
Yes

Priority Under:
11 U.S.C. §507(a)(8): 4,559.92

Has Secured Claim:
No
Amount of 503(b)(9):
No
Based on Lease:
No
Subject to Right of Setoff:
Yes, Reserve right should it be determined any payment due Debtor.

Nature of Secured Amount:
Value of Property:
Annual Interest Rate:
Arrearage Amount:
Basis for Perfection:
Amount Unsecured:

Submitted By:
Taryn Wehling on 30-Oct-2026 7:51:11 a.m. Pacific Time
Title:
RTS II
Company:
Illinois Department of Revenue Bankruptcy Unit

VN: A378809B5FAD2550B5CC8CB6EBF982CF

Fill in this information to identify the case:

Debtor 1 Yardbird Chicago LLC

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: Delaware Bankruptcy Court Wilmington District of Delaware

Case number 26-11484

Official Form 410
Proof of Claim

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. §503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. **Do not send original documents**; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to $500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§152, 157, and 3571.

Fill in all information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) **that you received.**

Part 1: Identify the claim

1. Who is the current creditor?

ILLINOIS DEPARTMENT OF REVENUE
Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor _____

2. Has this claim been acquired from someone else?

[x] No
[ ] Yes. From whom? _____

3. Where should notices and payments to the creditor be sent?

Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

Where should notices to the creditor be sent?	**Where should payments to the creditor be sent? (if different)**
Illinois Department of Revenue Bankruptcy Section Name	(same) Name
P.O. Box 19035 Number Street	_____ Number Street
Springfield, Illinois 62794-9035 City State ZIP Code	_____ City State ZIP Code
Contact Phone 217-557-9474	Contact Phone _____
Contact email REV.Bankruptcy@Illinois.gov	Contact email _____

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

_____

4. Does this claim amend one already filed?

[x] No
[ ] Yes Claim number on court claims registry (if known) _____ Filed on _____
MM / DD / YYYY

5. Do you know if anyone else has filed a proof of claim for this claim?

[x] No
[ ] Yes Who made the earlier filing? _____

Part 2: Give information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?

[ ] No.

[x] Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 6273

7. How much is the claim?

$ $4,998.02

Does this amount include interest or other charges?

[ ] No

[x] Yes Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim?

Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).
Limit disclosing information that is entitled to privacy, such as health care information.

Taxes

9. Is all or a part of the claim secured?

[x] No

[ ] Yes * The claim is secured by a lien on property

* - The amount of all payments on this claim has been credited for the purpose of making this proof of claim.

Nature of property:

[ ] Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim.

[ ] Motor vehicle.

[ ] Other. Describe: The Illinois Department of Revenue claims a lien on all real and personal property of the debtor for all assessments marked as liened.

Basis for perfection: See attached

Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)

Value of property: $

Amount of the claim that is secured: $

Amount of the claim that is unsecured: $ (The sum of the secured and unsecured amounts should match the amount in line 7.)

Amount necessary to cure any default as of the date of the petition: $

Annual Interest Rate (when case was filed) %

[ ] Fixed

[x] Variable

10. Is this claim based on a lease?

[x] No

[ ] Yes. **Amount necessary to cure any default as of the date of the petition.** $

11. Is this claim subject to a right of setoff?

[ ] No

[x] Yes. Identify the property: The Department claims a right to setoff against any refunds that are or may be determined to be due to the debtor and any payments due to the debtor by the State of Illinois.

12. Is all or a part of the claim entitled to priority under 11 U.S.C. §507(a)?

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

☐ No

☒ Yes *Check one:*

	Amount entitled to priority
☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).	$
☐ Up to $2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. §507(a)(7).	$
☐ Wages, salaries, or commissions (up to $12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. §507(a)(4).	$
☒ Taxes or penalties owed to governmental units. 11 U.S.C. §507(a)(8).	$ $4,559.92
☐ Contributions to an employee benefit plan. 11 U.S.C. §507(a)(5).	$
☐ Other. Specify subsection of 11 U.S.C. §507(a)(__) that applies.	$

* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to $500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§152, 157, and 3571.

Check the appropriate box:

☒ I am the creditor.
☐ I am the creditor's attorney or authorized agent.
☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgement that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 10/30/2026
MM / DD / YYYY

/s/ Taryn Wehling
Signature

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

Name: Taryn Wehling
First name Middle Name Last Name

Title: Revenue Tax Specialist

Company: Illinois Department of Revenue
Identify the corporate servicer as the company if the authorized agent is the servicer.

Address: Bankruptcy Section
P.O. Box 19035
Number Street

Springfield, Illinois 62794-9035
City State ZIP Code

Contact Phone 217-557-9474 Email REV.Bankruptcy@Illinois.gov

Illinois Department of Revenue
Attachment to Proof of Claim
Bankruptcy 26-11484 filed 21-Sep-2026 by
Yardbird Chicago LLC

Period	Assessed*	Tax Type	Tax ID	Calculated To Bankruptcy Petition Date			Lien	
				Tax	Penalty	Interest	Date	County
01/31/2026		ROT/UT	0536	$4,381.00	$438.10	$178.92		

** If "Assessed" = "Priority" then equitable tolling applies*

IDOR-7-BC (R-11/15) - 410 Attachment