

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

EASTERN DISTRICT OF WASHINGTON

Case number (if known) \_\_\_\_\_ Chapter 11

☐ Check if this an amended filing

Official Form 201

**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

04/20

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name King Mountain Tobacco Company, Inc.

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN) 20-3874581

4. Debtor's address

Principal place of business	Mailing address, if different from principal place of business
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2000 Fort Simcoe Road  
White Swan, WA 98952  
Number, Street, City, State & ZIP Code

PO Box 422  
White Swan, WA 98952-0422  
P.O. Box, Number, Street, City, State & ZIP Code

Yakima  
County

Location of principal assets, if different from principal place of business  
\_\_\_\_\_  
Number, Street, City, State & ZIP Code

5. Debtor's website (URL) www.kingmountaintobacco.com

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify: \_\_\_\_\_

## 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

## 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. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.

See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.3122

## 8. Under which chapter of the Bankruptcy Code is the debtor filing?

## Check one:

- ☐ Chapter 7
- ☐ Chapter 9

☒ Chapter 11. Check **all** that apply:

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11**. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any 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 within the last 8 years?

☒ No.☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

## 10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

☒ No☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor	_____	Relationship	_____
District	_____	When	_____
		Case number, if known	_____

**11. Why is the case filed in this district?**

Check all that apply:

- ☒ 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 concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

**Why does the property need immediate attention?** (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other

**Where is the property?**

Number, Street, City, State & ZIP Code

**Is the property insured?**

☐ No

☐ Yes. Insurance agency

Contact name

Phone

**Statistical and administrative information**

**13. Debtor's estimation of available funds**

Check one:

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

**14. Estimated number of creditors**

☐ 1-49

☒ 50-99

☐ 100-199

☐ 200-999

☐ 1,000-5,000

☐ 5,001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

**15. Estimated Assets**

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$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

**16. Estimated liabilities**

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$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

Debtor **King Mountain Tobacco Company, Inc.**  
Name

Case number (if known)

**Request for Relief, Declaration, and Signatures**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature  
of authorized  
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

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

Executed on **September 25, 2020**  
MM / DD / YYYY

**X /s/ Truman J. Thompson**  
Signature of authorized representative of debtor  
  
**Vice President and Chief Executive  
Officer**  
Title

**Truman J. Thompson**  
Printed name

**18. Signature of attorney** **X /s/ James L. Day**  
Signature of attorney for debtor

Date **September 25, 2020**  
MM / DD / YYYY

**James L. Day**  
Printed name

**Bush Kornfeld LLP**  
Firm name

**601 Union St., Suite 5000  
Seattle, WA 98101-2373**  
Number, Street, City, State & ZIP Code

Contact phone **(206) 292-2110** Email address **jday@bskd.com**

**WSBA 20474 WA**  
Bar number and State

**Fill in this information to identify the case:**

Debtor name King Mountain Tobacco Company, Inc.

United States Bankruptcy Court for the: EASTERN DISTRICT OF WASHINGTON

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☐ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☐ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

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

Executed on September 25, 2020

X /s/ Truman J. Thompson

Signature of individual signing on behalf of debtor

Truman J. Thompson

Printed name

Vice President and Chief Executive Officer

Position or relationship to debtor

**Fill in this information to identify the case:**Debtor name **King Mountain Tobacco Company, Inc.**United States Bankruptcy Court for the: **EASTERN DISTRICT OF WASHINGTON**

Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 204****Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders****12/15**

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

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
BIA/NIIMS 13922 Denver West Pkwy Lakewood, CO 80401	Lance  Fax: 509-877-3478 509-877-3155	Lease Expense				\$5,571.66
Cascade Valley Lube 2506 Main Street Union Gap, WA 98903	Uniongap.cascadevalleylube@hotmail.com 509-453-4343	Automotive Services				\$78.69
Cintas Corp. PO Box 650838 Dallas, TX 75265-0838	Cintas_services@cintas.com	Professional Services				\$239.95
Department of the Treasury Tobacco Tax & Trade Bureau 550 Main Street, Suite 8002 Cincinnati, OH 45202-5215	Julie Ohradzansky julie.ohradzansky@ttb.gov (513) 684-2373	Federal Excise Taxes - Alcohol and Tobacco Tax and Trade Bureau	Disputed			\$75,467,193.24
Grease Heads Lube and Oil 310 South Elm Street Toppenish, WA 98948	Greaseheadsllc@outlook.com 509-865-7001	Automotive Services				\$189.10
Guardian Security 1743 First Avenue South Seattle, WA 98134	Josh Anderson janderson@securitysecurity.com 509-453-4204	Monitoring Fees				\$21,225.50
H.B. Fuller PO Box 842401 Boston, MA 02284-2401	Ana Pinto  Fax: 651-355-9135 651-236-5948	Raw Materials				\$5,972.79

Debtor **King Mountain Tobacco Company, Inc.**  
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Heritage Bank PO Box 1578 Olympia, WA 98507	Terry Osman  Terry.Osman@HeritageBankNW.com 509-834-2704	SBA Paycheck Protection Program loan	Contingent			\$814,447.00
Internal Revenue Service P.O. Box 9941, Stop 6552 Ogden, UT 84409-0941	(800) 829-0115	Federal Income Taxes, Federal Unemployment Taxes, FICA and Federal Withholdings, and Civil Penalties				\$483,527.08
ITC Services 4172 N. Frontage Road E. Moses Lake, WA 98837	509-770-5039	Alfalfa Supplies				\$6,609.60
NC Filter Corporation Attn: Bobby Johnson P.O. Box 498 Black Creek, NC 27813	Attn: Bobby Johnson  bjohnson@tobacco rag.com 252-237-8180	Raw Materials-Filters				\$99,818.93
Oak Harbor Freight Lines, Inc. PO Box 1469 Auburn, WA 98071-1469	AR@oakh.com (800) 858-8815	Shipping				\$4,533.10
Office Solutions Northwest Inc. PO Box 125 Yakima, WA 98907	alexm@whobest.com 509-453-7181	Office Supplies				\$100.97
Rehn & Associates COBRA PO Box 5433 Spokane, WA 99205	Customer Service  rehn@rehnonline.com (509) 534-0600	Professional Services				\$25.00
State of Indiana Office of the Attorney General 302 W. Washington St., 5th Fl. Indianapolis, IN 46204	Fax: (317) 232-6201 Ph: (317) 232-7979	Settlement Agreement with State of Indiana re Case No. 49D10-1211-MI-04 4539, Marion County Superior Court				\$3,506,121.00

Debtor **King Mountain Tobacco Company, Inc.**  
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
State of South Carolina Office of the Attorney General P.O. Box 11549 Columbia, SC 29211-1549	Johnathan B. Williams  Fax: (803) 734-3677 Ph: (803) 734-3970	Settlement Agreement with State of South Carolina re Case No. 2011-CP-40-5065, Richland County Court of Common Pleas				\$2,520,567.98
U.S. Dep't of Agriculture 2323 E. Bannister Rd. Kansas City, MO 64131	(202) 720-2791	Interim Payment Plan Agreement re Judgment in U.S. District Court, E.D. Wash.				\$5,614,567.20
U.S. Food and Drug Administration P.O. Box 979107 Saint Louis, MO 63197-9000	ctpexecsec@fda.hhs.gov (877) 287-1373	Repayment Agreement re Tobacco User Fees				\$2,944,907.48
Yakama Nation PO Box 151 Toppenish, WA 98948	Lydia Bitsol  lydia_bitsoi@yakama.com 509-865-5121	Tax Stamps				\$67,500.00
Yakama Nation Land Enterprise 282 Buster Road Toppenish, WA 98948	Kristin Sampson  Kristin@ynle.com (509) 865-5121	Lease Expense				\$176,659.00



**Fill in this information to identify the case:**Debtor name King Mountain Tobacco Company, Inc.United States Bankruptcy Court for the: EASTERN DISTRICT OF WASHINGTON

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206Sum  
Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

<b>1a. Real property:</b> Copy line 88 from <i>Schedule A/B</i> .....	\$ <u>198,333.33</u>
<b>1b. Total personal property:</b> Copy line 91A from <i>Schedule A/B</i> .....	\$ <u>28,388,045.66</u>
<b>1c. Total of all property:</b> Copy line 92 from <i>Schedule A/B</i> .....	\$ <u>28,586,378.99</u>

**Part 2: Summary of Liabilities**

<b>2. Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i> .....	\$ <u>0.00</u>
<b>3. Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 206E/F)	
<b>3a. Total claim amounts of priority unsecured claims:</b> Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i> .....	\$ <u>69,329.21</u>
<b>3b. Total amount of claims of nonpriority amount of unsecured claims:</b> Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> .....	+\$ <u>92,356,000.30</u>
<b>4. Total liabilities</b> ..... Lines 2 + 3a + 3b	\$ <u>92,425,329.51</u>

**Fill in this information to identify the case:**Debtor name King Mountain Tobacco Company, Inc.United States Bankruptcy Court for the: EASTERN DISTRICT OF WASHINGTON

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**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****1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.  
☒ Yes Fill in the information below.

**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****2. Cash on hand****\$250.00****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**  
Name of institution (bank or brokerage firm) Type of account Last 4 digits of account number

3.1.	Heritage Bank Attn: Terry Osman 2205 S 1st Street Yakima, WA 98903	Checking Account	2367	\$561,872.48
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3.2.	Truist Bank (Was BB&T) Attn: Susan Fairhurst 223 West Nash Street Wilson, NC 27894	Checking Account	0010	\$1,017,560.94
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3.3.	Heritage Bank Attn: Terry Osman 2205 S 1st Street Yakima, WA 98903	EFT Account	2383	\$0.00
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3.4.	Heritage Bank Attn: Terry Osman 2205 S 1st Street Yakima, WA 98903	Wire Account	2408	\$0.00
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Debtor **King Mountain Tobacco Company, Inc.**  
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3.5.	<b>Truist Bank (Was BB&amp;T)</b> <b>Attn: Susan Fairhurst</b> <b>223 West Nash Street</b> <b>Wilson, NC 27894</b>	<b>Escrow Accounts for</b> <b>Qualified Settlement</b> <b>Funds 26 CFR §</b> <b>1.468B-1: See Attached</b>	<b>\$0.00</b>
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4. **Other cash equivalents** (Identify all)

5. **Total of Part 1.**

**\$1,579,683.42**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**Part 2: Deposits and Prepayments**

6. **Does the debtor have any deposits or prepayments?**

☐ No. Go to Part 3.

☒ Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1.	<b>James River Insurance Company</b> <b>6641 West Broad Street, Suite 300</b> <b>Richmond, VA 23230</b> <b>Policy Nos. 00039025-10 &amp; 00039026-10</b>	<b>\$7,350.52</b>
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8.2.	<b>IronShore Indemnity Inc.</b> <b>175 Berkeley Street</b> <b>Boston, MA 02116</b> <b>Policy No. 004253300</b>	<b>\$5,278.00</b>
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8.3.	<b>RSUI Group, Inc.</b> <b>945 East Paces Ferry Rd.</b> <b>Suite 1800</b> <b>Atlanta, GA 30326-1160</b> <b>Policy Nos. PP684340 &amp; HS684355</b>	<b>\$10,122.51</b>
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8.4.	<b>Lloyd's America, Inc.</b> <b>280 Park Avenue</b> <b>East Tower, 25th Floor</b> <b>New York, NY 10017</b> <b>UMR No. B1230AP06454A19</b>	<b>\$80,588.00</b>
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8.5.	<b>Arch Specialty Insurance Co.</b> <b>2345 Grand Blvd., Suite 900</b> <b>Kansas City, MO 64108</b> <b>Policy No. ESP1001308-00</b>	<b>\$25,950.42</b>
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8.6.	<b>Homeland Insurance Company of New York</b> <b>1000 Woodbury Road, Suite 403</b> <b>Woodbury, NY 11797</b> <b>Policy No. 795-01-10-88-0000</b>	<b>\$14,464.17</b>
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8.7.	<b>Bush Kornfeld LLP</b> <b>601 Union Street, Suite 5000</b>	<b>\$163,427.56</b>
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Debtor King Mountain Tobacco Company, Inc.  
Name

Case number (If known) \_\_\_\_\_

Seattle, WA 98101-2373

8.8. **Northern Blue LLP**  
**1414 Raleigh Road, Suite 435**  
**Chapel Hill, NC 27517** **\$50,000.00**

8.9. **Troutman Pepper LLP**  
**Troutman Sanders Building**  
**1001 Haxall Point**  
**Richmond, VA 23219** **\$100,000.00**

8.10 **Baker & Hostetler LLP**  
**1005 Connecticut Avenue NW**  
**Suite 100**  
**Washington, DC 20036** **\$300,000.00**

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

**\$757,181.18**

**Part 3: Accounts receivable**

**10. Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.  
☒ Yes Fill in the information below.

**11. Accounts receivable**

11a. 90 days old or less: 1,665,367.62 - 0.00 = .... **\$1,665,367.62**  
face amount doubtful or uncollectible accounts

11a. 90 days old or less: 1,150.00 - 0.00 = .... **\$1,150.00**  
face amount doubtful or uncollectible accounts

11b. Over 90 days old: 4,245,580.95 - 0.00 = .... **\$4,245,580.95**  
face amount doubtful or uncollectible accounts

11b. Over 90 days old: 1,521,198.38 - 0.00 = .... **\$1,521,198.38**  
face amount doubtful or uncollectible accounts

11b. Over 90 days old: 249,999.72 - 0.00 = .... **\$249,999.72**  
face amount doubtful or uncollectible accounts

11b. Over 90 days old: 282,993.20 - 0.00 = .... **\$282,993.20**  
face amount doubtful or uncollectible accounts

Debtor King Mountain Tobacco Company, Inc.  
Name

Case number (If known) \_\_\_\_\_

11b. Over 90 days old:	<u>116,705.10</u>	-	<u>116,705.10</u>	=....	<u>\$0.00</u>
	face amount		doubtful or uncollectible accounts		

11b. Over 90 days old:	<u>66,917.77</u>	-	<u>0.00</u>	=....	<u>\$66,917.77</u>
	face amount		doubtful or uncollectible accounts		

11b. Over 90 days old:	<u>1,968,337.14</u>	-	<u>0.00</u>	=....	<u>\$1,968,337.14</u>
	face amount		doubtful or uncollectible accounts		

11b. Over 90 days old:	<u>4,760,351.18</u>	-	<u>0.00</u>	=....	<u>\$4,760,351.18</u>
	face amount		doubtful or uncollectible accounts		

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$14,761,895.96

**Part 4: Investments**

13. **Does the debtor own any investments?**

- ☐ No. Go to Part 5.  
☒ Yes Fill in the information below.

Valuation method used  
for current value

Current value of  
debtor's interest

14. **Mutual funds or publicly traded stocks not included in Part 1**  
Name of fund or stock:

15. **Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**  
Name of entity: % of ownership

16. **Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**  
Describe:

**Tobacco Bond, Dep't of the Treasury, Alcohol and Tobacco Tax and Trade Bureau; United States Fire Insurance Company, Bond No. 615989183**

16.1.	<u>Tobacco Bond, Dep't of the Treasury, Alcohol and Tobacco Tax and Trade Bureau; United States Fire Insurance Company, Bond No. 615989183</u>	<u>Bond Amount</u>	<u>\$250,000.00</u>
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16.2.	<u>WA Deferred Wholesale Cigarette Bond; United States Fire Insurance Company, Bond No. 615989184</u>	<u>Bond Amount</u>	<u>\$100,000.00</u>
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16.3.	<u>WA Deferred Wholesale Cigarette Bond; United States Fire Insurance Company, Bond No. 615989185</u>	<u>Bond Amount</u>	<u>\$5,000.00</u>
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16.4.	<u>North Dakota Tobacco Distributor; United States Fire Insurance Company, Bond No. 615989366</u>	<u>Bond Amount</u>	<u>\$1,000.00</u>
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16.5.	<u>Kentucky Non-Participating MFG Bond; United States Fire Insurance Company, Bond No. 615989073</u>	<u>Bond Amount</u>	<u>\$170,000.00</u>
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Debtor King Mountain Tobacco Company, Inc.  
Name

Case number (If known) \_\_\_\_\_

16.6. Nonparticipating Manufacturer Surety Bond (NV); United States Fire Insurance Company, Bond No. 615989278 Bond Amount \$50,000.00

16.7. Non-Participating Tobacco MFS Corporate Surety Bond (NM); United States Fire Insurance Company, Bond No. 615988958 Bond Amount \$78,000.00

16.8. Oregon Non-Participating MFG Bond; United States Fire Insurance Company, Bond No. 615245175 Bond Amount \$75,000.00

16.9. Non-Participating Tobacco Manufacturer Surety Bond (VA); United States Fire Insurance Company, Bond No. 615988959 Bond Amount \$50,000.00

17. **Total of Part 4.**

Add lines 14 through 16. Copy the total to line 83.

\$779,000.00

**Part 5: Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.  
☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	<u>Raw materials Tobacco Inventory</u>	<u>8/31/2020</u>	<u>\$1,757,593.97</u>	<u>Actual Cost</u>	<u>\$1,757,593.97</u>
20.	<u>Work in progress Processed Tobacco Inventory</u>	<u>8/31/2020</u>	<u>\$111,107.18</u>	<u>Actual Cost</u>	<u>\$111,107.18</u>
21.	<u>Finished goods, including goods held for resale Cigarette Inventory</u>	<u>8/31/2020</u>	<u>\$1,423,046.88</u>	<u>Actual Cost</u>	<u>\$1,423,046.88</u>
	<u>Roll-Your-Own (RYO) Inventory</u>	<u>8/31/2020</u>	<u>\$2,021.75</u>	<u>Actual Cost</u>	<u>\$2,021.75</u>
22.	<u>Other inventory or supplies Packing/Supplies Inventory</u>	<u>8/31/2020</u>	<u>\$463,361.62</u>	<u>Actual Cost</u>	<u>\$463,361.62</u>

23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

\$3,757,131.40

24. **Is any of the property listed in Part 5 perishable?**

Debtor King Mountain Tobacco Company, Inc.  
Name

Case number (If known) \_\_\_\_\_

- ☐ No  
☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☐ No  
☐ Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current Value \_\_\_\_\_

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☐ No  
☐ Yes

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☐ No. Go to Part 7.  
☒ 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
28.	Crops-either planted or harvested			
29.	Farm animals <i>Examples: Livestock, poultry, farm-raised fish</i>			
30.	Farm machinery and equipment (Other than titled motor vehicles) Equipment (farming): See Attached List	\$105,407.92	Debtor Estimate	\$1,210,101.38
31.	Farm and fishing supplies, chemicals, and feed			
32.	Other farming and fishing-related property not already listed in Part 6 Greenhouses	\$328,743.88	Debtor Estimate	\$548,278.58
	Burley Barns	\$434,008.39	Debtor Estimate	\$463,817.60
	Kilns	\$747,111.17	Debtor Estimate	\$872,029.16
	Other Improvements (farming): See Attached List	\$254,175.15	Debtor Estimate	\$369,081.49
	Irrigation Systems	\$720,824.71	Debtor Estimate	\$1,240,397.08

33. Total of Part 6.

Add lines 28 through 32. Copy the total to line 85.

**\$4,703,705.29**

34. Is the debtor a member of an agricultural cooperative?

- ☒ No  
☐ 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 \_\_\_\_\_

Debtor King Mountain Tobacco Company, Inc.  
Name

Case number (If known) \_\_\_\_\_

36. Is a depreciation schedule available for any of the property listed in Part 6?

☐ No

☒ Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

☒ No

☐ Yes

**Part 7: 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.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture Office Furniture and Fixtures	\$0.00	Debtor Estimate	\$19,733.10
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software Computers and Software	\$0.00	Debtor Estimate	\$6,650.00

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

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

**\$26,383.10**

44. Is a depreciation schedule available for any of the property listed in Part 7?

☐ No

☒ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

☒ No

☐ Yes

**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, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1.	2007 Dodge Ram 3500	\$0.00	Blue Book	\$8,867.00
47.2.	2008 Dodge Ram 3500	\$0.00	Blue Book	\$11,161.00



Debtor King Mountain Tobacco Company, Inc. Case number (If known) \_\_\_\_\_  
 Name

47.3.	<u>2012 Dodge 4500</u>	<u>\$0.00</u>	<u>Blue Book</u>	<u>\$12,955.00</u>
47.4.	<u>2018 Dodge Ram 1500</u>	<u>\$25,902.70</u>	<u>Blue Book</u>	<u>\$27,656.00</u>
47.5.	<u>2020 Dodge Ram, VIN xxx4336</u>	<u>\$54,133.33</u>	<u>Blue Book</u>	<u>\$44,114.00</u>
47.6.	<u>2020 Dodge Ram, VIN xxx9873</u>	<u>\$47,154.80</u>	<u>Blue Book</u>	<u>\$40,027.00</u>
48.	<b>Watercraft, trailers, motors, and related accessories</b> <i>Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels</i>			
49.	<b>Aircraft and accessories</b>			
50.	<b>Other machinery, fixtures, and equipment (excluding farm machinery and equipment)</b>			
	<u>Duel Fuel Steam Boiler System</u>	<u>\$277,296.81</u>	<u>Debtor Estimate</u>	<u>\$280,412.50</u>
	<u>Equipment (non-farming): See Attached List</u>	<u>\$157,930.86</u>	<u>Debtor Estimate</u>	<u>\$519,842.92</u>
	<u>Construction in Progress: Filter machine for manufacture of cigarette filters (pending FDA approval).</u>	<u>\$264,436.88</u>	<u>Actual Cost</u>	<u>\$264,436.88</u>
	<u>Cigarette Maker &amp; Packer Nano-S</u>	<u>\$813,593.01</u>	<u>Net Book</u>	<u>\$813,593.01</u>

51. **Total of Part 8.** \$2,023,065.31  
 Add lines 47 through 50. Copy the total to line 87.

52. **Is a depreciation schedule available for any of the property listed in Part 8?**  
☐ No  
☒ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**  
☒ No  
☐ Yes

**Part 9: Real property**

54. **Does the debtor own or lease any real property?**

- ☐ No. Go to Part 10.  
☒ Yes Fill in the information below.

55. **Any building, other improved real estate, or land 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 of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest

Debtor King Mountain Tobacco Company, Inc.  
Name

Case number (If known) \_\_\_\_\_

55.1.	<b>Land Improvements: Asphalt Paving (Aug. 2020)</b>	<b>Leasehold Interest</b>	<b>\$198,333.33</b>	<b>Net Book</b>	<b>\$198,333.33</b>
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55.2.	<b>Real Property Leases: See Attached List</b>	<b>Leasehold Interest</b>	<b>\$0.00</b>		<b>Unknown</b>
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56. **Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.  
Copy the total to line 88.

**\$198,333.33**

57. **Is a depreciation schedule available for any of the property listed in Part 9?**

☐ No

☒ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

☒ No

☐ Yes

**Part 10: Intangibles and intellectual property**

59. **Does the debtor have any interests in intangibles or intellectual property?**

☐ 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
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60.	<b>Patents, copyrights, trademarks, and trade secrets Trademarks, Copyrights and Patents: See Attached List</b>	<b>\$0.00</b>	<b>Unknown</b>
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	<b>Brand Labels: See Attached List</b>	<b>\$0.00</b>	<b>Unknown</b>
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61.	<b>Internet domain names and websites Internet domain and website: www.kingmountaintobacco.com</b>	<b>\$0.00</b>	<b>Unknown</b>
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	<b>Internet domain and website: www.trykingmountaintobacco.com</b>	<b>\$0.00</b>	<b>Unknown</b>
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62. **Licenses, franchises, and royalties**

63.	<b>Customer lists, mailing lists, or other compilations Customer List</b>	<b>\$0.00</b>	<b>Unknown</b>
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64. **Other intangibles, or intellectual property**

65. **Goodwill**

Debtor King Mountain Tobacco Company, Inc.  
Name

Case number (If known) \_\_\_\_\_

66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?)

- ☒ No  
☐ Yes

68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**

- ☒ No  
☐ Yes

69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**

- ☒ No  
☐ Yes

**Part 11: All other assets**

70. **Does the debtor own any other assets that have not yet been reported on this form?**

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.

Current value of  
debtor's interest

71. **Notes receivable**

Description (include name of obligor)

72. **Tax refunds and unused net operating losses (NOLs)**

Description (for example, federal, state, local)

73. **Interests in insurance policies or annuities**

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**

King Mountain Tobacco Company, Inc. v. Kamiakin  
Wheeler, Kanim James, and Lone Warrior Holdings, Inc.  
Yakima County Superior Court, Case No. 19-2-04309-39

Unknown

Nature of claim

Complaint for damages,  
injunctive relief, return of  
property, and restitution

Amount requested

\$0.00

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** Examples: Season tickets, country club membership

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$0.00

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

- ☒ No  
☐ Yes

Debtor King Mountain Tobacco Company, Inc.  
Name

Case number (If known) \_\_\_\_\_

**Part 12: 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
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<u>\$1,579,683.42</u>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<u>\$757,181.18</u>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<u>\$14,761,895.96</u>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<u>\$779,000.00</u>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<u>\$3,757,131.40</u>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<u>\$4,703,705.29</u>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<u>\$26,383.10</u>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<u>\$2,023,065.31</u>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<u>\$198,333.33</u>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	+ <u>\$0.00</u>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<u>\$28,388,045.66</u>	+ 91b. <u>\$198,333.33</u>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<u>\$28,586,378.99</u>

**In re: King Mountain Tobacco Company, Inc.**

**Attachment to Schedule A/B: Question #3**

**Truist Bank (formerly BB&T) Escrow Accounts for Tobacco Settlement**

<b>State</b>	<b>Account No. (last 4 digits)</b>	<b>Balance</b>
Alabama	0029	\$742.89
California	0047	\$215.47
Colorado	0056	\$126.20
Connecticut	0261	\$5,248.44
Georgia	0065	\$1,004,886.14
Idaho	0074	\$2,035,077.92
Indiana	0083	\$4,217,901.84
Kansas	0092	\$279,642.10
Kentucky	0109	\$14,379,787.98
Montana	0118	\$3,447,752.26
North Carolina	0154	\$14,541,058.45
North Dakota	0243	\$8,051.89
New Hampshire	0136	\$31.81
New Mexico	0145	\$255,492.10
Nevada	0127	\$201,501.09
Oregon	0163	\$870,141.73
Pennsylvania	0172	\$109.74
South Carolina	0181	\$5,191,185.60
Commonwealth of Virginia	0234	\$35,870.30
Washington	0190	\$5,295,992.31
Wyoming	0207	\$610.45
<b>Total</b>		<b>\$51,771,426.71</b>

**In re: King Mountain Tobacco Company, Inc.**

**Attachment to Schedule A/B: Question #30-Farm Machinery and  
Equipment**

Schedule A/B, Question # 30-Farm Machinery & Equipment

2 FORKLIFTS - #2 WHSE

Seeder Line

4 row soil conditioner and drip layer

364 plastic bins

4 row finger transplanter

4 bale box

Float Trays

Propane Tanks

256 Macro Bins

4 row transplanter

Harvester Model 50 RL

Harvester Model 50 RL

2 leaf removers

6 trailers

Swather (BJ Heintzman)

Komatsu Forklift

2 Disc Header

Case IH 315 Cab MFD Tractor

Auto Seeder Line

Equipment (BJ Heintzman

Seeder Line

Tobacco Transplanter

3 Odering Carts-Standard No Timer

14 ft Northwest Tiller

2013 Miller Nitro Sprayer

Krone 1290 Baler

Farming Equipment (BJ Heintzman

Pelletizer

Mower

Rock Rake

RTK Base and Cable

Case Tractor

John Deer 6140D

30' Hay Rake

Krone 1290 HS STD Baler

Hay Rake

Case 2303 Windrow Tracto

IH 110 A Tractor

IH 110 A Tractor

Fork & FM 1000

Snow Plow

Greenhouse Trays

2 Trailers

Equipment for farm

Dammerdiker

Twin Star Rake #157175

Roller - RDO Equip

2017 Lemken Ruben 12

2017 Harvest Tek Hay Sensor

2017 Harvest Tek Hay Sensor

Trailer Station

Trailer Station



**In re: King Mountain Tobacco Company, Inc.**

**Attachment to Schedule A/B: Question #32-Other Farm Related  
Property**

Sch A/B, Question #32-Other Farm Related Property

Fencing at Farm Shop

Level Ground for Barns

Power Setup-W Wapato & Shields

Power Setup Shields & W Wapato

Power Setup-NS W Wapato W/O Shields Rd

Concrete Pads

Power set up for 16 Kilns & 20 Burley Barns

Wiring 16 kilns & 16 greenhouses

Leaf Loading/Bailing System

Barns for Farming

Pump & Electrical for Linear

**In re: King Mountain Tobacco Company, Inc.**

**Attachment to Schedule A/B: Question #50-Equipment Non-Farming**

Schedule A/B, Question 50- Equipment-Non Farming

SECURITY SYSTEM  
TOYOTA FORKLIFT-USED  
W/MONITORS (3) PC-151  
W/MONITORS  
COMPUTER NETWORK  
HYTROL CONVEYOR  
NORTHFACE TOBACCO M  
FLOOR SCRUBBER  
POWER LIFT STOCKER  
TROLLEYS  
PRODUCTION TRAYS  
DUST COLLECTION SYS #2  
USED FORK LIFT 7FGU25  
AIR COMPRESSOR  
DUST COLLECTION SYS #4  
DUST COLLECTION SYS #3  
DWN PYMT LARGE AIR CO  
R E D STAMP MACHINE  
SERVER & ADDTL COMP H  
BATTERY RECHARGER  
PHONE SYSTEM ADDTN  
LRG POSTER PRNTR  
BIND & LAMINATE MACH  
RECLAIMER  
2 Forklifts  
Toyota Forklift  
50 HP Compressor  
Komatsu Forklift  
Forklift  
Forklift  
Spare Parts-Maker&Packe  
Dust Collector  
QBSI Xerox Copy Machine  
Phone & Fax Install  
Barcodes Inc  
Building Security  
Sodim Korber Quality Con

**In re: King Mountain Tobacco Company, Inc.**

**Attachment to Schedule A/B: Question #55-Real Property Leases**

The Debtor is the lessee of the following real property plots. The Debtor leases the below-listed plots from Trina A. Wheeler, its 100% owner. The terms of the leases are year-to-year, and the leases automatically renew each January.

**Plot No.**

62B	2173	2783
63A	2174	2797
122	2358	2798
124	2516	2922A
128	2517	3104
129	2518	3165
506	2527B	3167
533	2528	3182
534	2530	3189A
539	2531	3240
540	2532	3459A
667	2533B	5016
674	2534	5031
715	2544A	5072
862	2576	5188
863	2578	5482
985	2580A	5499
986	2596A	Tribal
998.5	2597	535A
1073	2602A	1693A
1074	2617A	1917B
1419A	2619A	1929A
1477	2621	2750A
1478	2622	2762
1633	2640	2763A
1634	2663	
1644	2684	
1645	2700	
1646	2703	
1759	2713	
1782	2714	
1783	2752	
1784	2756	
1832	2759A	
1854	2762	
1942	2763A	
2172	2782	

**In re: King Mountain Tobacco Company, Inc.**


**Attachment to Schedule A/B: Question #60-Brand Labels**



King Mountain Tobacco Company, Inc.	SE0002636	King Mountain Red RYO 6oz
King Mountain Tobacco Company, Inc.	SE0002637	King Mountain Red RYO, 16oz
King Mountain Tobacco Company, Inc.	SE0002638	King Mountain Gold RYO, 6oz
King Mountain Tobacco Company, Inc.	SE0002639	King Mountain Gold RYO, 16oz
King Mountain Tobacco Company, Inc.	SE0002640	King Mountain Menthol RYO, 6oz
King Mountain Tobacco Company, Inc.	SE0002641	King Mountain Menthol RYO, 16oz
King Mountain Tobacco Company, Inc.	SE0002642	King Mountain Red Kings
King Mountain Tobacco Company, Inc.	SE0003696	King Mountain Gold Kings
King Mountain Tobacco Company, Inc.	SE0003697	King Mountain Menthol Kings
King Mountain Tobacco Company, Inc.	SE0003698	King Mountain Blue Kings
King Mountain Tobacco Company, Inc.	SE0003699	King Mountain Menthol Gold Kings
King Mountain Tobacco Company, Inc.	SE0003700	King Mountain Red 100s
King Mountain Tobacco Company, Inc.	SE0003701	King Mountain Gold 100s
King Mountain Tobacco Company, Inc.	SE0003702	King Mountain Menthol 100s
King Mountain Tobacco Company, Inc.	SE0003703	King Mountain Blue 100s
King Mountain Tobacco Company, Inc.	SE0003704	King Mountain Menthol Gold 100s



**In re: King Mountain Tobacco Company, Inc.**

**Attachment to Schedule A/B: Question #60-Trademarks,  
Copyrights and Patents**

TM Record	Mark/Name	Status/Status Date	App. No./Reg. No.	Full Goods/Services	Owner Information
US Federal Q4 uf 1	<a href="#">8 and Design</a> 	Pending - Initialized June 26, 2020	SN: 90015670	(Int'l Class: 34) Tobacco; pipe tobacco; tobacco pouches; smoking tobacco; smokeless tobacco; chewing tobacco; leaf tobacco; flavored tobacco; cigarettes	King Mountain Tobacco Company, Inc. (United States Federally- Recognized Indian Tribe) 2000 Fort Simcoe Road White Swan Washington 98952
US Federal Q4 uf 2	<a href="#">81</a>	Pending - Initialized June 26, 2020	SN: 90015675	(Int'l Class: 34) Tobacco; pipe tobacco; tobacco pouches; smoking tobacco; smokeless tobacco; chewing tobacco; leaf tobacco; flavored tobacco; cigarettes	King Mountain Tobacco Company, Inc. (United States Federally- Recognized Indian Tribe) 2000 Fort Simcoe Road White Swan Washington 98952
US Federal Q4 uf 3	<a href="#">EIGHTY-ONE</a>	Pending - Initialized June 26, 2020	SN: 90015677	(Int'l Class: 34) Tobacco; pipe tobacco; tobacco pouches; smoking tobacco; smokeless tobacco; chewing tobacco; leaf tobacco; flavored tobacco; cigarettes	King Mountain Tobacco Company, Inc. (United States Federally- Recognized Indian Tribe) 2000 Fort Simcoe Road White Swan Washington 98952
US Federal Q4 uf 4	<a href="#">KING MOUNTAIN</a>	Registered September 1, 2015	RN: 4802785 SN: 86476073	(Int'l Class: 34) cigarettes	King Mountain Tobacco Company, Inc. (United States a Tribal Corporation Organized Under the Laws of the Yakama Nation, a Federally Recognized Indian Tribe Organized Under the Laws and Treaties of the United States.)

TM Record	Mark/Name	Status/Status Date	App. No./Reg. No.	Full Goods/Services	Owner Information
					2000 Fort Simcoe Road White Swan Washington 98952
US Federal Q4 uf 5	<a href="#">KING MOUNTAIN</a>	Cancelled - Sec. 8 July 18, 2014	RN: 3352436 SN: 78956731	(Int'l Class: 34) cigarettes	King Mountain Tobacco Company, Inc. (United States Tribal Corporation of the Yakama Nation) 2000 Fort Simcoe Road White Swan Washington 98952
US Federal Q4 uf 6	<a href="#">KING MOUNTAIN PREMIUM BLEND FULL FLAVOR- WHERE QUALITY REACHES ROYAL STANDARDS and Design</a> 	Renewed December 9, 2018	RN: 3544264 SN: 77137007	(Int'l Class: 34) cigarettes	King Mountain Tobacco Company, Inc. (United States Tribal Corporation Organized Under the Laws of the Yakama Nation, a Federally Recognized Indian Tribe Organized Under the Laws and Treaties of the United States) 2000 Fort Simcoe Road White Swan Washington 98952
US Federal Q4 uf 7	<a href="#">MOUNTAIN and Design</a> 	Abandoned - Failure to Respond April 13, 2005	SN: 78373524	(Int'l Class: 34) cigarettes	<b>Wheeler, Delbert L., Sr.</b> (United States Citizen) 1200 North White Swan Road White Swan Washington 989520237

## PATENTS

**Blend ID#**

**Type of Blend**

WF-1	Cigarette Blend
WF1KMT	Cigarette Blend
WF1AOI	Cigarette Blend

**Blend ID#**

**Type of Blend**

WF-2F	Roll Your Own (Red 6 & 16oz. Bags)
WF-2FM	Roll Your Own (Menthol 6 & 16oz. Bags)
WF-2L	Roll Your Own (Gold 6 & 16oz. Bags)
WF-2UL	Roll Your Own (Blue 6 & 16oz. Bags)

**Fill in this information to identify the case:**

Debtor name King Mountain Tobacco Company, Inc.

United States Bankruptcy Court for the: EASTERN DISTRICT OF WASHINGTON

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 206D**

**Schedule D: Creditors Who Have Claims Secured by Property**

**12/15**

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

- ☒ 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.
- ☐ Yes. Fill in all of the information below.

**Fill in this information to identify the case:**Debtor name **King Mountain Tobacco Company, Inc.**United States Bankruptcy Court for the: **EASTERN DISTRICT OF WASHINGTON**

Case number (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.

**Part 1: 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.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address <b>Internal Revenue Service P.O. Box 9941, Stop 6552 Ogden, UT 84409-0941</b>	<b>\$69,329.21</b>	<b>\$69,329.21</b>
	Date or dates debt was incurred <b>2017-2018</b>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		
	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Basis for the claim: <b>Federal Income Taxes and Federal Unemployment Taxes</b>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims****3. List in alphabetical order all of the creditors with nonpriority unsecured claims.** If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address <b>Advanced Auto Parts 717 W 1st Street Wapato, WA 98951</b>	<b>\$0.00</b>
	Date(s) debt was incurred _____	
	Last 4 digits of account number <b>0087</b>	
	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Basis for the claim: <b>Automotive Parts</b>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2	Nonpriority creditor's name and mailing address <b>Alliance One Specialty Prods., LLC PO Box 1929 Wilson, NC 27894-1929</b>	<b>\$0.00</b>
	Date(s) debt was incurred _____	
	Last 4 digits of account number <b>9419</b>	
	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Basis for the claim: <b>Processed Tobacco</b>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.3	<b>Nonpriority creditor's name and mailing address</b> <b>Aramark Uniform Services</b> <b>PO Box 101179</b> <b>Aus West Lockbox</b> <b>Pasadena, CA 91189-0005</b> Date(s) debt was incurred _____ Last 4 digits of account number <b>3368</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Professional Services</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.4	<b>Nonpriority creditor's name and mailing address</b> <b>BIA/NIIMS</b> <b>13922 Denver West Pkwy</b> <b>Lakewood, CO 80401</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Lease Expense</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,571.66</b>
3.5	<b>Nonpriority creditor's name and mailing address</b> <b>Burrows Tractor, Inc.</b> <b>Attn: Angie Deaton</b> <b>1308 E. Mead Avenue</b> <b>Union Gap, WA 98903-3709</b> Date(s) debt was incurred _____ Last 4 digits of account number <b>1893</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Equipment Parts</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.6	<b>Nonpriority creditor's name and mailing address</b> <b>Cascade Valley Lube</b> <b>2506 Main Street</b> <b>Union Gap, WA 98903</b> Date(s) debt was incurred _____ Last 4 digits of account number <b>5487</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Automotive Services</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$78.69</b>
3.7	<b>Nonpriority creditor's name and mailing address</b> <b>CBIT</b> <b>Attn: Justin Benoit</b> <b>PO Box 5277</b> <b>Pasco, WA 99302-5201</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>IT Services</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.8	<b>Nonpriority creditor's name and mailing address</b> <b>Central Machinery Sales Inc.</b> <b>PO Box 1217</b> <b>Moses Lake, WA 98837</b> Date(s) debt was incurred _____ Last 4 digits of account number <b>WHEFAR</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Equipment Parts</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.9	<b>Nonpriority creditor's name and mailing address</b> <b>Cintas Corp.</b> <b>PO Box 650838</b> <b>Dallas, TX 75265-0838</b> Date(s) debt was incurred _____ Last 4 digits of account number <b>4857</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>Professional Services</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$239.95</b>

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3.10	Nonpriority creditor's name and mailing address <b>City of New York</b> <b>Attn: Michael A. Cardozo</b> <b>100 Church St., Room 20-99</b> <b>New York, NY 10007</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>3LDW</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Case No. 12-cv-06276-JS-SIL, U.S. District Court, E.D.N.Y.:pending civil action for injunctive relief, civil penalties, damages and attorney's fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.11	Nonpriority creditor's name and mailing address <b>Coastal Farm &amp; Home Supply</b> <b>PO Box 99</b> <b>Albany, OR 97321</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>6997</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Equipment Parts</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.12	Nonpriority creditor's name and mailing address <b>Colorado Attorney General Office</b> <b>1300 Broadway, 8th Floor</b> <b>Denver, CO 80202</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.13	Nonpriority creditor's name and mailing address <b>Commercial Tire, Inc.</b> <b>PO Box 970</b> <b>Meridian, ID 83680</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>5102</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Automotive Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.14	Nonpriority creditor's name and mailing address <b>Department of the Treasury</b> <b>Tobacco Tax &amp; Trade Bureau</b> <b>550 Main Street, Suite 8002</b> <b>Cincinnati, OH 45202-5215</b> Date(s) debt was incurred <u>9/01/2009 - 3/31/2013</u> Last 4 digits of account number <u>0300</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Federal Excise Taxes - Alcohol and Tobacco Tax and Trade Bureau</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$75,467,193.24</b>
3.15	Nonpriority creditor's name and mailing address <b>Fastenal</b> <b>PO Box 978</b> <b>Winona, MN 55987</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>1089</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Warehouse Parts</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.16	Nonpriority creditor's name and mailing address <b>Grainger Inc.</b> <b>PO Box 419267</b> <b>Kansas City, MO 64141-6267</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>3712</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Equipment Parts</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>



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3.17	Nonpriority creditor's name and mailing address <b>Grease Heads Lube and Oil</b> <b>310 South Elm Street</b> <b>Toppenish, WA 98948</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Automotive Services</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$189.10</b>
3.18	Nonpriority creditor's name and mailing address <b>Guardian Security</b> <b>1743 First Avenue South</b> <b>Seattle, WA 98134</b> Date(s) debt was incurred ____ Last 4 digits of account number <b>0569</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Monitoring Fees</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$21,225.50</b>
3.19	Nonpriority creditor's name and mailing address <b>H.B. Fuller</b> <b>PO Box 842401</b> <b>Boston, MA 02284-2401</b> Date(s) debt was incurred ____ Last 4 digits of account number <b>1831</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Raw Materials</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,972.79</b>
3.20	Nonpriority creditor's name and mailing address <b>Heritage Bank</b> <b>PO Box 1578</b> <b>Olympia, WA 98507</b> Date(s) debt was incurred <b>4/20/2020</b> Last 4 digits of account number <b>2367</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>SBA Paycheck Protection Program loan</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$814,447.00</b>
3.21	Nonpriority creditor's name and mailing address <b>Husch &amp; Husch, Inc.</b> <b>PO Box 160</b> <b>Harrah, WA 98933</b> Date(s) debt was incurred ____ Last 4 digits of account number <b>2025</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Agriculture Spray</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.22	Nonpriority creditor's name and mailing address <b>Idaho Attorney General's Office</b> <b>Consumer Protection Unit</b> <b>P.O. Box 83720</b> <b>Boise, ID 83720-0010</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Notice Only</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.23	Nonpriority creditor's name and mailing address <b>Ideal Lumber &amp; Hardware Inc</b> <b>PO Box 249</b> <b>Toppenish, WA 98948</b> Date(s) debt was incurred ____ Last 4 digits of account number <b>5921</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Warehouse Parts</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

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3.24	<b>Nonpriority creditor's name and mailing address</b> <b>Internal Revenue Service</b> <b>P.O. Box 9941, Stop 6552</b> <b>Ogden, UT 84409-0941</b> Date(s) debt was incurred <u>2011-2016</u> Last 4 digits of account number <u>          </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Federal Income Taxes, Federal Unemployment Taxes, FICA and Federal Withholdings, and Civil Penalties</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$483,527.08</b>
3.25	<b>Nonpriority creditor's name and mailing address</b> <b>ITC Services</b> <b>4172 N. Frontage Road E.</b> <b>Moses Lake, WA 98837</b> Date(s) debt was incurred <u>          </u> Last 4 digits of account number <u>          </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Alfalfa Supplies</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,609.60</b>
3.26	<b>Nonpriority creditor's name and mailing address</b> <b>John Deere Financial</b> <b>PO Box 4450</b> <b>Carol Stream, IL 60197-4450</b> Date(s) debt was incurred <u>          </u> Last 4 digits of account number <u>0000</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Tractor Lease</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.27	<b>Nonpriority creditor's name and mailing address</b> <b>Kentucky Attorney General's Office</b> <b>Tobacco Litigation</b> <b>State Capitol Room 116</b> <b>Frankfort, KY 40601</b> Date(s) debt was incurred <u>          </u> Last 4 digits of account number <u>          </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.28	<b>Nonpriority creditor's name and mailing address</b> <b>Lad Irrigation Company</b> <b>P.O. Box 880</b> <b>Moses Lake, WA 98837</b> Date(s) debt was incurred <u>          </u> Last 4 digits of account number <u>3365</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Irrigation Parts</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.29	<b>Nonpriority creditor's name and mailing address</b> <b>Les Schwab Tire Center</b> <b>PO Box 9277</b> <b>Yakima, WA 98909</b> Date(s) debt was incurred <u>          </u> Last 4 digits of account number <u>0932</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Automotive Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.30	<b>Nonpriority creditor's name and mailing address</b> <b>Lincoln Financial Group</b> <b>Box 0821</b> <b>Carol Stream, IL 60132-0821</b> Date(s) debt was incurred <u>          </u> Last 4 digits of account number <u>2418</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Dental Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

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3.31	<b>Nonpriority creditor's name and mailing address</b> <b>Montana Attorney General's Office</b> <b>Dept. of Justice Tobacco Program</b> <b>P.O. Box 200151</b> <b>Helena, MT 59620-0151</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.32	<b>Nonpriority creditor's name and mailing address</b> <b>Mortons Supply Inc.</b> <b>1724 S First St</b> <b>Yakima, WA 98901</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>4032</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Farm Spray</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.33	<b>Nonpriority creditor's name and mailing address</b> <b>Mutual of Omaha Inc.</b> <b>Attn: Elissa Stark</b> <b>PO Box 2147</b> <b>Omaha, NE 68103-2147</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>AB9X</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Life Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.34	<b>Nonpriority creditor's name and mailing address</b> <b>NC Filter Corporation</b> <b>Attn: Bobby Johnson</b> <b>P.O. Box 498</b> <b>Black Creek, NC 27813</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Raw Materials-Filters</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$99,818.93</b>
3.35	<b>Nonpriority creditor's name and mailing address</b> <b>NC Machinery Inc.</b> <b>PO Box 58201</b> <b>Tukwila, WA 98138-1201</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>5500</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Equipment Parts</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.36	<b>Nonpriority creditor's name and mailing address</b> <b>Nevada Attorney General's Office</b> <b>Attn: Tobacco Enforcement Unit</b> <b>5420 Kietzke Lane, Suite 2020</b> <b>Reno, NV 89511</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.37	<b>Nonpriority creditor's name and mailing address</b> <b>New Mexico Atty General's Office</b> <b>P.O. Drawer 1508</b> <b>Santa Fe, NM 87504-1508</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

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3.38	Nonpriority creditor's name and mailing address <b>North Carolina Atty Gen's Office Special Lit. Section-Tobacco Unit P.O. Box 629 Raleigh, NC 27602</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.39	Nonpriority creditor's name and mailing address <b>North Dakota Atty General's Office 500 N. 9th Street Bismarck, ND 58501-4509</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.40	Nonpriority creditor's name and mailing address <b>Oak Harbor Freight Lines, Inc. PO Box 1469 Auburn, WA 98071-1469</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>9445</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Shipping</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,533.10</b>
3.41	Nonpriority creditor's name and mailing address <b>Office Solutions Northwest Inc. PO Box 125 Yakima, WA 98907</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>1492</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Office Supplies</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$100.97</b>
3.42	Nonpriority creditor's name and mailing address <b>Oregon Attorney General's Office Dept. of Justice-Tobacco Enforcemen 1162 Court Street NE Salem, OR 97301-4096</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.43	Nonpriority creditor's name and mailing address <b>Pacific Power PO Box 26000 Portland, OR 97256-0001</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>0014</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Electricity</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.44	Nonpriority creditor's name and mailing address <b>Pepsi PO Box 111 Yakima, WA 98907</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>5385</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Office Supplies</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

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3.45	Nonpriority creditor's name and mailing address <b>Pitney Bowes Monthly Fee</b> <b>PO Box 371887</b> <b>Pittsburgh, PA 15250-7887</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>8826</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Postage</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.46	Nonpriority creditor's name and mailing address <b>Premiera Blue Cross</b> <b>PO. Box 6</b> <b>Mukilteo, WA 09827-5006</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>0001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Health Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.47	Nonpriority creditor's name and mailing address <b>QBSI-Xerox</b> <b>PO BOX 936793</b> <b>Atlanta, GA 31193-6793</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>2882</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Office Supplies</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.48	Nonpriority creditor's name and mailing address <b>Rehn &amp; Associates COBRA</b> <b>PO Box 5433</b> <b>Spokane, WA 99205</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>9902</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Professional Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$25.00</u>
3.49	Nonpriority creditor's name and mailing address <b>Smoke-N-Gas</b> <b>7453 Sunnyside Mabton Road</b> <b>Mabton, WA 98935</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Overpayment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$18,206.34</u>
3.50	Nonpriority creditor's name and mailing address <b>Stach Steel Supply</b> <b>3070 Harrah Rd</b> <b>Harrah, WA 98933</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Equipment Parts</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.51	Nonpriority creditor's name and mailing address <b>State of California</b> <b>Office of the Attorney General</b> <b>1300 "I" Street</b> <b>Sacramento, CA 95814-2919</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>

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3.52	<b>Nonpriority creditor's name and mailing address</b> <b>State of Indiana</b> <b>Office of the Attorney General</b> <b>302 W. Washington St., 5th Fl.</b> <b>Indianapolis, IN 46204</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Settlement Agreement with State of Indiana re Case No. 49D10-1211-MI-044539, Marion County Superior Court</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,506,121.00</b>
3.53	<b>Nonpriority creditor's name and mailing address</b> <b>State of South Carolina</b> <b>Office of the Attorney General</b> <b>P.O. Box 11549</b> <b>Columbia, SC 29211-1549</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Settlement Agreement with State of South Carolina re Case No. 2011-CP-40-5065, Richland County Court of Common Pleas</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,520,567.98</b>
3.54	<b>Nonpriority creditor's name and mailing address</b> <b>Sunnyside New Holland</b> <b>PO Box 1580</b> <b>Sunnyside, WA 98944</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>9785</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Tractor Parts</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.55	<b>Nonpriority creditor's name and mailing address</b> <b>Tacoma Screw Product, Inc.</b> <b>PO Box 35165</b> <b>Seattle, WA 98124-5165</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>3659</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Equipment Parts</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.56	<b>Nonpriority creditor's name and mailing address</b> <b>U.S. Dep't of Agriculture</b> <b>2323 E. Bannister Rd.</b> <b>Kansas City, MO 64131</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>6374</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Interim Payment Plan Agreement re Judgment in U.S. District Court, E.D. Wash.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,614,567.20</b>
3.57	<b>Nonpriority creditor's name and mailing address</b> <b>U.S. Food and Drug Administration</b> <b>P.O. Box 979107</b> <b>Saint Louis, MO 63197-9000</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Repayment Agreement re Tobacco User Fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,944,907.48</b>
3.58	<b>Nonpriority creditor's name and mailing address</b> <b>Valley Septic Service</b> <b>PO Box 10115</b> <b>Yakima, WA 98909-1115</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Professional Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

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3.59	Nonpriority creditor's name and mailing address <b>Verizon Wireless</b> <b>PO Box 660108</b> <b>Dallas, TX 75266-0108</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>0001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Wireless Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.60	Nonpriority creditor's name and mailing address <b>Virginia Attorney General's Office</b> <b>2020 North 9th Street</b> <b>Richmond, VA 23219</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.61	Nonpriority creditor's name and mailing address <b>Vision Service Plan-(WA)</b> <b>Box 742430</b> <b>Los Angeles, CA 90074-2430</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>2746</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vision Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.62	Nonpriority creditor's name and mailing address <b>WA Attorney General's Office</b> <b>P.O. Box 40123</b> <b>Olympia, WA 98504-0123</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.63	Nonpriority creditor's name and mailing address <b>Washington Tractor</b> <b>2700 136th Ave. Ct E</b> <b>Sumner, WA 98390</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>7723</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Tractor Parts</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.64	Nonpriority creditor's name and mailing address <b>Wheeler Kountry Korner</b> <b>2421 W. Wapato Rd.</b> <b>Wapato, WA 98951</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>44</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Fuel</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$584,136.57</u>
3.65	Nonpriority creditor's name and mailing address <b>Wheeler Rock Products</b> <b>Attn: Missy Bergevin</b> <b>PO Box 99</b> <b>Wapato, WA 98951</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Concrete Expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$13,802.12</u>



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3.66	Nonpriority creditor's name and mailing address <b>Yakama Nation</b> <b>PO Box 151</b> <b>Toppenish, WA 98948</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Tax Stamps</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$67,500.00</b>
3.67	Nonpriority creditor's name and mailing address <b>Yakama Nation Land Enterprise</b> <b>282 Buster Road</b> <b>Toppenish, WA 98948</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Lease Expense</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$176,659.00</b>
3.68	Nonpriority creditor's name and mailing address <b>Yakama Power</b> <b>PO Box 1610</b> <b>Toppenish, WA 98948</b> Date(s) debt was incurred ____ Last 4 digits of account number <b>2153</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Electricity</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.69	Nonpriority creditor's name and mailing address <b>Yakima CDJR</b> <b>2300 Goodman Rd</b> <b>Union Gap, WA 98903</b> Date(s) debt was incurred ____ Last 4 digits of account number <b>KINGMNT</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Automotive Services</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.70	Nonpriority creditor's name and mailing address <b>Yakima Cooperative Inc.</b> <b>501 S Front St</b> <b>Yakima, WA 98901</b> Date(s) debt was incurred ____ Last 4 digits of account number <b>1433</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Warehouse Parts</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.71	Nonpriority creditor's name and mailing address <b>Yakima Implement &amp; Irrigation, Inc.</b> <b>1922 So. 1st Street</b> <b>Yakima, WA 98903</b> Date(s) debt was incurred ____ Last 4 digits of account number <b>9935</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Equipment Parts</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.72	Nonpriority creditor's name and mailing address <b>Yakima Steel Fabricators</b> <b>6 E Washington Ave</b> <b>Yakima, WA 98903</b> Date(s) debt was incurred ____ Last 4 digits of account number <b>NG01</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Warehouse Parts</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>



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3.73 Nonpriority creditor's name and mailing address **Yakima Valley Transportation LLC**  
**301 South 12th Avenue**  
**Yakima, WA 98902**  
Date(s) debt was incurred \_\_\_\_\_  
Last 4 digits of account number \_\_\_\_\_  
As of the petition filing date, the claim is: Check all that apply. **\$0.00**  
☐ Contingent  
☐ Unliquidated  
☐ Disputed  
Basis for the claim: **Shipping**  
Is the claim subject to offset? ☒ No ☐ Yes

3.74 Nonpriority creditor's name and mailing address **Yakima Waste Systems Inc.**  
**PO Box 7428**  
**Pasadena, CA 91109-7428**  
Date(s) debt was incurred \_\_\_\_\_  
Last 4 digits of account number **7816**  
As of the petition filing date, the claim is: Check all that apply. **\$0.00**  
☐ Contingent  
☐ Unliquidated  
☐ Disputed  
Basis for the claim: **Garbage Fees**  
Is the claim subject to offset? ☒ No ☐ Yes

**Part 3: List Others to Be Notified About Unsecured Claims**

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 related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<b>Alliance One Specialty Prods., LLC</b> <b>2305 Baldree Road</b> <b>Wilson, NC 27893-9518</b>	Line <b>3.2</b> <input type="checkbox"/> Not listed. Explain _____	<b>9419</b>
4.2	<b>Aramark Uniform Services</b> <b>1101 Market Street</b> <b>Philadelphia, PA 19107</b>	Line <b>3.3</b> <input type="checkbox"/> Not listed. Explain _____	<b>3368</b>
4.3	<b>Central Machinery Sales Inc.</b> <b>1201 Yonezawa Blvd.</b> <b>Moses Lake, WA 98837</b>	Line <b>3.8</b> <input type="checkbox"/> Not listed. Explain _____	<b>WHEFAR</b>
4.4	<b>Cintas Corp.</b> <b>6707 W. Sam Houston Pkwy. N.</b> <b>Houston, TX 77041</b>	Line <b>3.9</b> <input type="checkbox"/> Not listed. Explain _____	<b>4857</b>
4.5	<b>Commercial Tire, Inc.</b> <b>2095 E. Commercial Street</b> <b>Meridian, ID 83642</b>	Line <b>3.13</b> <input type="checkbox"/> Not listed. Explain _____	<b>5102</b>
4.6	<b>Fastenal</b> <b>2001 Theurer Blvd.</b> <b>Winona, MN 55987</b>	Line <b>3.15</b> <input type="checkbox"/> Not listed. Explain _____	<b>1089</b>
4.7	<b>H.B. Fuller</b> <b>1200 Willow Lake Blvd.</b> <b>Saint Paul, MN 55164-0683</b>	Line <b>3.19</b> <input type="checkbox"/> Not listed. Explain _____	—
4.8	<b>Heritage Bank</b> <b>3615 Pacific Avenue</b> <b>Tacoma, WA 98418-7921</b>	Line <b>3.20</b> <input type="checkbox"/> Not listed. Explain _____	<b>2367</b>

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	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.9	<b>Oak Harbor Freight Lines, Inc.</b> <b>1339 West Valley Hwy. N.</b> <b>Auburn, WA 98071-1469</b>	Line <b>3.40</b> <input type="checkbox"/> Not listed. Explain _____	<b>9445</b>
4.10	<b>U.S. Food and Drug Administration</b> <b>645 S. Newstead Ave.</b> <b>Saint Louis, MO 63110</b>	Line <b>3.57</b> <input type="checkbox"/> Not listed. Explain _____	—
4.11	<b>W. W. Grainger, Inc.</b> <b>100 Grainger Parkway</b> <b>Lake Forest, IL 60045</b>	Line <b>3.16</b> <input type="checkbox"/> Not listed. Explain _____	—
4.12	<b>Yakama Nation Land Enterprise</b> <b>PO Box 151</b> <b>Toppenish, WA 98948</b>	Line <b>3.67</b> <input type="checkbox"/> Not listed. Explain _____	—

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ <b>69,329.21</b>
5b. +	\$ <b>92,356,000.30</b>
5c.	\$ <b>92,425,329.51</b>

**Fill in this information to identify the case:**Debtor name **King Mountain Tobacco Company, Inc.**United States Bankruptcy Court for the: **EASTERN DISTRICT OF WASHINGTON**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases****12/15****Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.****1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal**Property*

(Official Form 206A/B).

**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**2.1. State what the contract or lease is for and the nature of the debtor's interest **Equipment Lease of John Deere 9570RX 4 Track Tractor S/N:**

State the term remaining

List the contract number of any government contract

**804183  
11/27/2021****Deere Credit, Inc.  
6400 NW 86th Street  
Johnston, IA 50131**2.2. State what the contract or lease is for and the nature of the debtor's interest **Governmental securities consulting services**

State the term remaining

List the contract number of any government contract

**6/12/2021****Englishman and Pannill, LLC  
830 Oaklawn Drive  
Winston Salem, NC 27104**2.3. State what the contract or lease is for and the nature of the debtor's interest **Mechanical Technician employment contract**

State the term remaining

List the contract number of any government contract

**07/31/2025****Robert Reis  
2000 Fort Simcoe Road  
White Swan, WA 98952-0422**2.4. State what the contract or lease is for and the nature of the debtor's interest **All Escrow Agreements re Beneficiary States for whose funds are being escrowed pursuant to Non-Participating Manufacturer Statutes:**

State the term remaining

List the contract number of any government contract

**See Attached List  
perpetual****Truist Bank  
Attn: Susan Fairhurst  
223 West Nash Street  
Wilson, NC 27894**

Additional Page if You Have More Contracts or Leases

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

2.5. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

Chief Executive Officer & Chief Financial Officer employment contract  
07/31/2025

Truman J. Thompson  
2000 Fort Simcoe Road  
White Swan, WA 98952-0422

**In re: King Mountain Tobacco Company, Inc.**  
**Attachment to Schedule G-2.5-Truist Bank: MSA Beneficiary**  
**States**

California

Colorado

Idaho

Indiana

Kentucky

Montana

Nevada

New Mexico

North Carolina

North Dakota

Oregon

South Carolina

Virginia

Washington

**Fill in this information to identify the case:**Debtor name King Mountain Tobacco Company, Inc.United States Bankruptcy Court for the: EASTERN DISTRICT OF WASHINGTON

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206H  
Schedule H: Your Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Do you have any codebtors?**☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:*

2.1 **Trina A. Wheeler**  
**2000 Fort Simcoe Road**  
**White Swan, WA 98952-0422**

**Deere Credit, Inc.**☐ D \_\_\_\_\_☐ E/F \_\_\_\_\_☒ G 2.1

**Fill in this information to identify the case:**Debtor name King Mountain Tobacco Company, Inc.United States Bankruptcy Court for the: EASTERN DISTRICT OF WASHINGTON

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income****1. Gross revenue from business**☐ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****From the beginning of the fiscal year to filing date:**From **1/01/2020** to **Filing Date****Sources of revenue**

Check all that apply

☒ Operating a business☐ Other \_\_\_\_\_**Gross revenue**  
(before deductions and exclusions)\$20,905,531.00**For prior year:**From **1/01/2019** to **12/31/2019**☒ Operating a business☐ Other \_\_\_\_\_\$29,946,015.00**For year before that:**From **1/01/2018** to **12/31/2018**☒ Operating a business☐ Other \_\_\_\_\_\$31,401,787.00**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☐ None.**Description of sources of revenue****Gross revenue from each source**  
(before deductions and exclusions)**From the beginning of the fiscal year to filing date:**From **1/01/2020** to **Filing Date**Interest Income\$2,289,804.00**For prior year:**From **1/01/2019** to **12/31/2019**Interest Income\$1,647,954.00**For prior year:**From **1/01/2019** to **12/31/2019**Miscellaneous Income\$1,414,688.00

	Description of sources of revenue	Gross revenue from each source (before deductions and exclusions)
For year before that: From <b>1/01/2018</b> to <b>12/31/2018</b>	<b>Interest Income</b>	<b>\$838,812.00</b>
For year before that: From <b>1/01/2018</b> to <b>12/31/2018</b>	<b>Miscellaneous Income</b>	<b>\$15.00</b>

**Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. <b>Indiana BB&amp;T-Indiana Sub Account 223 W Nash Street Wilson, NC 27894</b>	<b>6/29/2020</b>	<b>\$35,000.00</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <b><u>Indiana Settlement</u></b>
3.2. <b>Indiana BB&amp;T-Indiana Sub Account 223 W Nash Street Wilson, NC 27894</b>	<b>7/30/2020</b>	<b>\$35,000.00</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <b><u>Indiana Settlement</u></b>
3.3. <b>Indiana BB&amp;T-Indiana Sub Account 223 W Nash Street Wilson, NC 27894</b>	<b>8/27/2020</b>	<b>\$35,000.00</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <b><u>Indiana Settlement</u></b>
3.4. <b>South Carolina BB&amp;T-SC Sub Account 223 W Nash Street Wilson, NC 27894</b>	<b>6/29/2020</b>	<b>\$10,000.00</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <b><u>South Carolina Settlement</u></b>
3.5. <b>South Carolina BB&amp;T-SC Sub Account 223 W Nash Street Wilson, NC 27894</b>	<b>7/30/2020</b>	<b>\$10,000.00</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <b><u>South Carolina Settlement</u></b>



Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.6. South Carolina BB&T-SC Sub Account 223 W Nash Street Wilson, NC 27894	8/27/2020	\$10,000.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>South Carolina Settlement</u>
3.7. USDA 2312 E, Bannister Road Kansas City, MO 64131	6/29/2020	\$45,000.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Interim Agreement</u>
3.8. USDA 2312 E, Bannister Road Kansas City, MO 64131	7/30/2020	\$45,000.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Interim Agreement</u>
3.9. USDA 2312 E, Bannister Road Kansas City, MO 64131	8/27/2020	\$45,000.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Interim Agreement</u>
3.10 FDA Dept. of Health & Human Services Sent via wire, no address on file	6/29/2020	\$45,000.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>FDA Settlement</u>
3.11 FDA Dept. of Health & Human Services Sent via wire, no address on file	7/30/2020	\$45,000.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>FDA Settlement</u>
3.12 FDA Dept. of Health & Human Services Sent via wire, no address on file	8/27/2020	\$45,000.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>FDA Settlement</u>

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. Wheeler Kountry Korner 2421 W. Wapato Rd. Wapato, WA 98951 Related Entity	1/7/2020	\$10,393.61	On Account - Fuel Purchases
4.2. Wheeler Kountry Korner 2421 W. Wapato Rd. Wapato, WA 98951 Related Entity	3/13/2020	\$7,009.24	On Account - Fuel Purchases
4.3. Wheeler Kountry Korner 2421 W. Wapato Rd. Wapato, WA 98951 Related Entity	5/19/2020	\$52,389.02	On Account - Fuel Purchases
4.4. Wheeler Kountry Korner 2421 W. Wapato Rd. Wapato, WA 98951 Related Entity	6/11/2020	\$35,345.84	On Account - Fuel Purchases
4.5. Wheeler Kountry Korner 2421 W. Wapato Rd. Wapato, WA 98951 Related Entity	7/16/2020	\$21,967.84	On Account - Fuel Purchases
4.6. Wheeler Kountry Korner 2421 W. Wapato Rd. Wapato, WA 98951 Related Entity	8/6/2020	\$25,682.62	On Account - Fuel Purchases
4.7. Wheeler Kountry Korner 2421 W. Wapato Rd. Wapato, WA 98951 Related Entity	8/26/2020	\$20,625.94	On Account - Fuel Purchases
4.8. Wheeler Kountry Korner 2421 W. Wapato Rd. Wapato, WA 98951 Related Entity	9/17/2020	\$17,889.07	On Account - Fuel Purchases
4.9. Wheeler Rock Products 250 Cowin Lane PO Box 99 Wapato, WA 98951 Related Entity	11/8/2019	\$16,248.90	Gravel
4.10. Wheeler Rock Products 250 Cowin Lane PO Box 99 Wapato, WA 98951 Related Entity	2/13/2020	\$636.16	Gravel

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.11 Wheeler Logging 1200 N White Swan Rd. PO Box 237 White Swan, WA 98952 Related Entity	10/4/2019	\$40,000.00	Monthly Management Fee
4.12 Wheeler Logging 1200 N White Swan Rd. PO Box 237 White Swan, WA 98952 Related Entity	10/31/2019	\$40,000.00	Monthly Management Fee
4.13 Wheeler Logging 1200 N White Swan Rd. PO Box 237 White Swan, WA 98952 Related Entity	11/20/2019	\$40,000.00	Monthly Management Fee
4.14 Wheeler Logging 1200 N White Swan Rd. PO Box 237 White Swan, WA 98952 Related Entity	12/17/2019	\$40,000.00	Monthly Management Fee
4.15 Wheeler Logging 1200 N White Swan Rd. PO Box 237 White Swan, WA 98952 Related Entity	1/23/2019	\$40,000.00	Monthly Management Fee
4.16 Wheeler Logging 1200 N White Swan Rd. PO Box 237 White Swan, WA 98952 Related Entity	2/27/2020	\$40,000.00	Monthly Management Fee
4.17 Wheeler Logging 1200 N White Swan Rd. PO Box 237 White Swan, WA 98952 Related Entity	3/26/2020	\$40,000.00	Monthly Management Fee

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

Creditor's name and address	Describe of the Property	Date	Value of property
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**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☐ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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**Part 3: Legal Actions or Assignments**

**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1.	<b>King Mountain Tobacco Company, Inc. v. Kamiakin Wheeler, Kanim James, and Lone Warrior Holdings, Inc.</b> 19-2-04309-39	<b>Civil action for damages, injunctive relief, return of property, and restitution.</b>	<b>Yakima County Superior Court</b> 128 N. 2nd Street Room 314 Yakima, WA 98901	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2.	<b>City of New York v. King Mountain Tobacco Company, Inc., et al.</b> 12-cv-06276-JS-SIL	<b>Civil action for injunctive relief, civil penalties, damages and attorney's fees.</b>	<b>U.S. District Court, E.D.N.Y.</b> 225 Cadman Plaza E. Brooklyn, NY 11201	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

☐ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss  If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	Dates of loss	Value of property lost
<b>Accidental damage to swather header caused by employee during use. Estimated replacement cost is \$43,000.</b>	<b>Claim filed with insurance; maximum policy limit is \$37,000, which is expected to be issued.</b>	<b>July 9, 2020</b>	<b>\$43,000.00</b>

**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	<b>Bush Kornfeld LLP 601 Union Street Suite 5000 Seattle, WA 98101-2373</b>		<b>September 25, 2020</b>	<b>\$25,534.20</b>
	Email or website address			
	Who made the payment, if not debtor?			

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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**13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
-----------------------------------	--	------------------------	-----------------------

**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy From-To
---------	-------------------------------

**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.  
☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	--	---

**Part 9: Personally Identifiable Information**

**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained.

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- ☒ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

- ☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

- ☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
---------------------------	-----------------------------------	-----------------------------	-----------------------

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

- ☒ None

**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.  
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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**Part 13: Details About the Debtor's Business or Connections to Any Business**

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.  Dates business existed
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26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Name and address	Date of service From-To
26a.1. <b>Truman J. Thompson 2000 Fort Simcoe Road White Swan, WA 98952</b>	<b>8/01/2018 - present</b>

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

- ☐ None

**Name and address****If any books of account and records are unavailable, explain why**

26c.1. **Truman J. Thompson**  
**2000 Fort Simcoe Road**  
**White Swan, WA 98952**

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

**Name and address**

26d.1. **PayneWest Insurance**  
**1430 N. 16th Avenue**  
**Bldg. H**  
**Yakima, WA 98902**

26d.2. **John Deere Financial**  
**8402 Excelsior Drive**  
**Madison, WI 53717**

26d.3. **Agri-Service/AGCO Finance**  
**1620 E. James Street**  
**Pasco, WA 99301**

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☐ No

☒ Yes. Give the details about the two most recent inventories.

	<b>Name of the person who supervised the taking of the inventory</b>	<b>Date of inventory</b>	<b>The dollar amount and basis (cost, market, or other basis) of each inventory</b>
27.1	<b>Truman J. Thompson</b>	<b>Monthly (product inventory)</b>	<b>Actual Cost</b>
	<b>Name and address of the person who has possession of inventory records</b> <b>Truman J. Thompson</b> <b>2000 Fort Simcoe Road</b> <b>White Swan, WA 98952</b>		
27.2	<b>Truman J. Thompson</b>	<b>October 2019 (fixed assets)</b>	<b>Depreciation Basis</b>
	<b>Name and address of the person who has possession of inventory records</b> <b>Truman J. Thompson</b> <b>2000 Fort Simcoe Road</b> <b>White Swan, WA 98952</b>		
27.3	<b>Truman J. Thompson</b>	<b>October 2018 (fixed assets)</b>	<b>Depreciation Basis</b>
	<b>Name and address of the person who has possession of inventory records</b> <b>Truman J. Thompson</b> <b>2000 Fort Simcoe Road</b> <b>White Swan, WA 98952</b>		



28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Trina A. Wheeler	PO Box 422 White Swan, WA 98952-0422	Owner/President	100%
Truman Jay Thompson	PO Box 422 White Swan, WA 98952-0422	CEO and Vice President	
Terryanna Blodgett	PO Box 422 White Swan, WA 98952-0422	Secretary	

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No  
☐ Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No  
☒ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1 Truman J. Thompson PO Box 422 White Swan, WA 98952-0422	\$165,000.00	July 28, 2020	Signing Bonuses
Relationship to debtor Vice President and CEO			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No  
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No  
☐ Yes. Identify below.

Name of the pension fund	Employer Identification number of the parent corporation
--------------------------	--

Debtor **King Mountain Tobacco Company, Inc.**

Case number (if known)

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments 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 **September 25, 2020**

**/s/ Truman J. Thompson**  
Signature of individual signing on behalf of the debtor

**Truman J. Thompson**  
Printed name

Position or relationship to debtor **Vice President and Chief Executive Officer**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No

☐ Yes

**United States Bankruptcy Court**  
**Eastern District of Washington**

In re **King Mountain Tobacco Company, Inc.**

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**11**

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$	<b>0.00</b>
Prior to the filing of this statement I have received .....	\$	<b>0.00</b>
Balance Due .....	\$	<b>0.00</b>

2. The source of the compensation paid to me was:

☒ Debtor      ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor      ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

**Preparation of a plan and disclosure statement and negotiations with creditors regarding the same.**

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

**September 25, 2020**

*Date*

**/s/ James L. Day**

**James L. Day**

*Signature of Attorney*

**Bush Kornfeld LLP**

**601 Union St., Suite 5000**

**Seattle, WA 98101-2373**

**(206) 292-2110 Fax: (206) 292-2104**

**jday@bskd.com**

*Name of law firm*

**United States Bankruptcy Court  
Eastern District of Washington**

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11

**LIST OF EQUITY SECURITY HOLDERS**

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Trina A. Wheeler 1200 N. White Swan Road White Swan, WA 98952-0237	sole shareholder	1,000	100%

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the **Vice President and Chief Executive Officer** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date September 25, 2020

Signature /s/ Truman J. Thompson  
Truman J. Thompson

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

**United States Bankruptcy Court  
Eastern District of Washington**

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**VERIFICATION OF CREDITOR MATRIX**

I, the Vice President and Chief Executive Officer of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **September 25, 2020**

**/s/ Truman J. Thompson**

**Truman J. Thompson/Vice President and Chief Executive Officer**  
Signer/Title

King Mountain Tobacco Company, Inc.  
PO Box 422  
White Swan, WA 98952-0422

James L. Day  
Bush Kornfeld LLP  
601 Union St., Suite 5000  
Seattle, WA 98101-2373

US Attorney  
Attn Bankruptcy Assistant  
700 Stewart Street  
Room 5220  
Seattle, WA 98101-4438

Internal Revenue Svc (Phil)  
Centralized Insol Operations  
PO Box 7346  
Philadelphia, PA 19101-7346

Commodity Futures Trading  
1155 21st St NW  
Washington, DC 20581

Securities & Exchange Comm  
Office of Reorganization  
444 S Flower St. #900  
Los Angeles, CA 90071

US Treasury  
Secretary of the Treasury  
1500 Pennsylvania Ave NW  
Washington, DC 20220

WA Dept of Rev-SEA  
Bankruptcy/Claims Unit  
2101 4th Ave #1400  
Seattle, WA 98121-2300

WA Dept of L&I-OLY  
Collections  
PO Box 44171  
Olympia, WA 98504-4171

WA Dept of Emp Sec-OLY  
UI Tax Admin  
PO Box 9046  
Olympia, WA 98507-9046

WA Attorney General  
Bankruptcy & Collections Unit  
800 5th Ave #2000  
Seattle, WA 98104

Advanced Auto Parts  
717 W 1st Street  
Wapato, WA 98951

Alliance One Specialty Prods., LLC  
PO Box 1929  
Wilson, NC 27894-1929

Alliance One Specialty Prods., LLC  
2305 Baldree Road  
Wilson, NC 27893-9518

Aramark Uniform Services  
PO Box 101179  
Aus West Lockbox  
Pasadena, CA 91189-0005

Aramark Uniform Services  
1101 Market Street  
Philadelphia, PA 19107

BIA/NIIMS  
13922 Denver West Pkwy  
Lakewood, CO 80401

Burrows Tractor, Inc.  
Attn: Angie Deaton  
1308 E. Mead Avenue  
Union Gap, WA 98903-3709

Cascade Valley Lube  
2506 Main Street  
Union Gap, WA 98903

CBIT  
Attn: Justin Benoit  
PO Box 5277  
Pasco, WA 99302-5201

Central Machinery Sales Inc.  
PO Box 1217  
Moses Lake, WA 98837

Central Machinery Sales Inc.  
1201 Yonezawa Blvd.  
Moses Lake, WA 98837

Cintas Corp.  
PO Box 650838  
Dallas, TX 75265-0838

Cintas Corp.  
6707 W. Sam Houston Pkwy. N.  
Houston, TX 77041

City of New York  
Attn: Michael A. Cardozo  
100 Church St., Room 20-99  
New York, NY 10007

Coastal Farm & Home Supply  
PO Box 99  
Albany, OR 97321



Colorado Attorney General Office  
1300 Broadway, 8th Floor  
Denver, CO 80202

Commercial Tire, Inc.  
PO Box 970  
Meridian, ID 83680

Commercial Tire, Inc.  
2095 E. Commercial Street  
Meridian, ID 83642

Deere Credit, Inc.  
6400 NW 86th Street  
Johnston, IA 50131

Department of the Treasury  
Tobacco Tax & Trade Bureau  
550 Main Street, Suite 8002  
Cincinnati, OH 45202-5215

Englishman and Pannill, LLC  
830 Oaklawn Drive  
Winston Salem, NC 27104

Fastenal  
PO Box 978  
Winona, MN 55987

Fastenal  
2001 Theurer Blvd.  
Winona, MN 55987

Grainger Inc.  
PO Box 419267  
Kansas City, MO 64141-6267

Grease Heads Lube and Oil  
310 South Elm Street  
Toppenish, WA 98948

Guardian Security  
1743 First Avenue South  
Seattle, WA 98134

H.B. Fuller  
PO Box 842401  
Boston, MA 02284-2401

H.B. Fuller  
1200 Willow Lake Blvd.  
Saint Paul, MN 55164-0683

Heritage Bank  
PO Box 1578  
Olympia, WA 98507

Heritage Bank  
3615 Pacific Avenue  
Tacoma, WA 98418-7921

Husch & Husch, Inc.  
PO Box 160  
Harrah, WA 98933

Idaho Attorney General's Office  
Consumer Protection Unit  
P.O. Box 83720  
Boise, ID 83720-0010

Ideal Lumber & Hardware Inc  
PO Box 249  
Toppenish, WA 98948

Internal Revenue Service  
P.O. Box 9941, Stop 6552  
Ogden, UT 84409-0941

ITC Services  
4172 N. Frontage Road E.  
Moses Lake, WA 98837

John Deere Financial  
PO Box 4450  
Carol Stream, IL 60197-4450

Kentucky Attorney General's Office  
Tobacco Litigation  
State Capitol Room 116  
Frankfort, KY 40601

Lad Irrigation Company  
P.O. Box 880  
Moses Lake, WA 98837

Les Schwab Tire Center  
PO Box 9277  
Yakima, WA 98909

Lincoln Financial Group  
Box 0821  
Carol Stream, IL 60132-0821

Montana Attorney General's Office  
Dept. of Justice Tobacco Program  
P.O. Box 200151  
Helena, MT 59620-0151

Mortons Supply Inc.  
1724 S First St  
Yakima, WA 98901

Mutual of Omaha Inc.  
Attn: Elissa Stark  
PO Box 2147  
Omaha, NE 68103-2147

NC Filter Corporation  
Attn: Bobby Johnson  
P.O. Box 498  
Black Creek, NC 27813

NC Machinery Inc.  
PO Box 58201  
Tukwila, WA 98138-1201

Nevada Attorney General's Office  
Attn: Tobacco Enforcement Unit  
5420 Kietzke Lane, Suite 2020  
Reno, NV 89511

New Mexico Atty General's Office  
P.O. Drawer 1508  
Santa Fe, NM 87504-1508

North Carolina Atty Gen's Office  
Special Lit. Section-Tobacco Unit  
P.O. Box 629  
Raleigh, NC 27602

North Dakota Atty General's Office  
500 N. 9th Street  
Bismarck, ND 58501-4509

Oak Harbor Freight Lines, Inc.  
PO Box 1469  
Auburn, WA 98071-1469

Oak Harbor Freight Lines, Inc.  
1339 West Valley Hwy. N.  
Auburn, WA 98071-1469

Office Solutions Northwest Inc.  
PO Box 125  
Yakima, WA 98907

Oregon Attorney General's Office  
Dept. of Justice-Tobacco Enforcemen  
1162 Court Street NE  
Salem, OR 97301-4096

Pacific Power  
PO Box 26000  
Portland, OR 97256-0001

Pepsi  
PO Box 111  
Yakima, WA 98907

Pitney Bowes Monthly Fee  
PO Box 371887  
Pittsburgh, PA 15250-7887

Premiera Blue Cross  
PO. Box 6  
Mukilteo, WA 09827-5006

QBSI-Xerox  
PO BOX 936793  
Atlanta, GA 31193-6793

Rehn & Associates COBRA  
PO Box 5433  
Spokane, WA 99205

Robert Reis  
2000 Fort Simcoe Road  
White Swan, WA 98952-0422

Smoke-N-Gas  
7453 Sunnyside Mabton Road  
Mabton, WA 98935

Stach Steel Supply  
3070 Harrah Rd  
Harrah, WA 98933

State of California  
Office of the Attorney General  
1300 "I" Street  
Sacramento, CA 95814-2919

State of Indiana  
Office of the Attorney General  
302 W. Washington St., 5th Fl.  
Indianapolis, IN 46204

State of South Carolina  
Office of the Attorney General  
P.O. Box 11549  
Columbia, SC 29211-1549

Sunnyside New Holland  
PO Box 1580  
Sunnyside, WA 98944

Tacoma Screw Product, Inc.  
PO Box 35165  
Seattle, WA 98124-5165

Trina A. Wheeler  
2000 Fort Simcoe Road  
White Swan, WA 98952-0422

Truist Bank  
Attn: Susan Fairhurst  
223 West Nash Street  
Wilson, NC 27894

Truman J. Thompson  
2000 Fort Simcoe Road  
White Swan, WA 98952-0422

U.S. Dep't of Agriculture  
2323 E. Bannister Rd.  
Kansas City, MO 64131

U.S. Food and Drug Administration  
P.O. Box 979107  
Saint Louis, MO 63197-9000

U.S. Food and Drug Administration  
645 S. Newstead Ave.  
Saint Louis, MO 63110

Valley Septic Service  
PO Box 10115  
Yakima, WA 98909-1115

Verizon Wireless  
PO Box 660108  
Dallas, TX 75266-0108

Virginia Attorney General's Office  
2020 North 9th Street  
Richmond, VA 23219

Vision Service Plan- (WA)  
Box 742430  
Los Angeles, CA 90074-2430

W. W. Grainger, Inc.  
100 Grainger Parkway  
Lake Forest, IL 60045

WA Attorney General's Office  
P.O. Box 40123  
Olympia, WA 98504-0123

Washington Tractor  
2700 136th Ave. Ct E  
Sumner, WA 98390

Wheeler Kountry Korner  
2421 W. Wapato Rd.  
Wapato, WA 98951

Wheeler Rock Products  
Attn: Missy Bergevin  
PO Box 99  
Wapato, WA 98951

Yakama Nation  
PO Box 151  
Toppenish, WA 98948

Yakama Nation Land Enterprise  
282 Buster Road  
Toppenish, WA 98948

Yakama Nation Land Enterprise  
PO Box 151  
Toppenish, WA 98948

Yakama Power  
PO Box 1610  
Toppenish, WA 98948

Yakima CDJR  
2300 Goodman Rd  
Union Gap, WA 98903



Yakima Cooperative Inc.  
501 S Front St  
Yakima, WA 98901

Yakima Implement & Irrigation, Inc.  
1922 So. 1st Street  
Yakima, WA 98903

Yakima Steel Fabricators  
6 E Washington Ave  
Yakima, WA 98903

Yakima Valley Transportation LLC  
301 South 12th Avenue  
Yakima, WA 98902

Yakima Waste Systems Inc.  
PO Box 7428  
Pasadena, CA 91109-7428

**United States Bankruptcy Court  
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**11**

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **King Mountain Tobacco Company, Inc.** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

**September 25, 2020**

Date

**/s/ James L. Day**

**James L. Day**

Signature of Attorney or Litigant

Counsel for **King Mountain Tobacco Company, Inc.**

**Bush Kornfeld LLP**

**601 Union St., Suite 5000**

**Seattle, WA 98101-2373**

**(206) 292-2110 Fax: (206) 292-2104**

**jday@bskd.com**