Fill in this information to identify the case:						
Debtor 1 MURRAY BOILER LLC						
Debtor 2 (Spouse, if filing)						
United States Bankruptcy Court for the: WESTERN	District of NORTH CAROLINA (State)					
Case number 20-30609	, ,					

## Official Form 410

Proof of Claim 04/19

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

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

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

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

acquired from someone else?    Yes.   From whom?	. Who is the current creditor?	Department of the Treasury - Internal Revenue Service  Name of the current creditor (the person or entity to be paid for this claim)  Other names the creditor used with the debtor				
acquired from someone else?    Yes.   From whom?						
Where should notices and payments to the creditor be sent?    Where should notices and payments to the creditor be sent?	. Has this claim been	■ No				
and payments to the creditor be sent?  Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)  Rame  P.O. Box 7346  Number Street  Philadelphia PA 19101-7346 City State ZIP Code  Contact phone 1-800-973-0424  Contact email Contact email  Creditor Number: 6135121  Uniform claim identifier for electronic payments in chapter 13 (if you use one)  Poses this claim amend one already filed?  Internal Revenue Service  Name  Internal Revenue Service  Internal Revenue Service  Internal Revenue Service  Name  Internal Revenue Service  Name  Internal Revenue Service  Internal R	•	☐ Yes. From whom?				
Internal Revenue Service   Internal Revenue Service   Name   Name   Name	and payments to the	Where should notices to the				
P.O. Box 7346 Number Street  Philadelphia PA 19101-7346 City State ZIP Code  Contact phone 1-800-973-0424  Contact email  Creditor Number: 6135121  Uniform claim identifier for electronic payments in chapter 13 (if you use one)  P.O. Box 7346 Number Street    No   INSOLVENCY 4905 KOGER BOULEVARD SUITE 102, M/S 9     Number Street   INSOLVENCY 4905 KOGER BOULEVARD SUITE 102, M/S 9     Number Street   INSOLVENCY 4905 KOGER BOULEVARD SUITE 102, M/S 9     Number Street   INSOLVENCY 4905 KOGER BOULEVARD SUITE 102, M/S 9     Number Street   INSOLVENCY 4905 KOGER BOULEVARD SUITE 102, M/S 9     Number Street   INSOLVENCY 4905 KOGER BOULEVARD SUITE 102, M/S 9     Number Street   INSOLVENCY 4905 KOGER BOULEVARD SUITE 102, M/S 9     Number Street   INSOLVENCY 4905 KOGER BOULEVARD SUITE 102, M/S 9     Number Street   INSOLVENCY 4905 KOGER BOULEVARD SUITE 102, M/S 9     Number Street   INSOLVENCY 4905 KOGER BOULEVARD SUITE 102, M/S 9     Number Street   INSOLVENCY 4905 KOGER BOULEVARD SUITE 102, M/S 9     Number Street   INSOLVENCY 4905 KOGER BOULEVARD SUITE 102, M/S 9     Number Street   INSOLVENCY 4905 KOGER BOULEVARD SUITE 102, M/S 9     Number Street   INSOLVENCY 4905 KOGER BOULEVARD SUITE 102, M/S 9     OR	creditor be sent?	Internal Revenue Service		Internal Revenue Ser	vice	
P.O. Box 7346   Number   Street   Philadelphia   PA   19101-7346   GREENSBORO   NC   27407-2734   City   State   ZIP Code   City   State   ZIP Code   Contact phone   1-800-973-0424   Contact phone   (336) 690-6413   Contact email   Contact email   Contact email   Contact email   Contact email   Street   Contact email   Street   Str		Name		Name		
Number Street    Number   Street   Number   Street		P.O. Box 7346		INSOLVENCY 4905	KOGER BOLLLEVA	ARD SHITE 102 M/S 9
City State ZIP Code City State ZIP Code  Contact phone 1-800-973-0424	(111B1 ) 2002(g)	Number Street				112 00112 102, 1470 0
City State ZIP Code City State ZIP Code  Contact phone 1-800-973-0424		Philadolphia PA	10101 7246	CREENSBORO	NC	27407-2734
Contact email  Creditor Number: 6135121  Uniform claim identifier for electronic payments in chapter 13 (if you use one)  Does this claim amend one already filed?  Yes. Claim number on court claims registry (if known)  1 Filed on: 07/21/2020						
Contact email  Creditor Number: 6135121  Uniform claim identifier for electronic payments in chapter 13 (if you use one)  Does this claim amend one already filed?  Yes. Claim number on court claims registry (if known)  1 Filed on: 07/21/2020						
Creditor Number: 6135121  Uniform claim identifier for electronic payments in chapter 13 (if you use one)  Does this claim amend one already filed?  No  Yes. Claim number on court claims registry (if known)  1 Filed on: 07/21/2020		Contact phone <u>1-800-973-0424</u>		Contact phone (336	6) 690-6413	-
Uniform claim identifier for electronic payments in chapter 13 (if you use one)  ———————————————————————————————————		Contact email		Contact email		_
Uniform claim identifier for electronic payments in chapter 13 (if you use one)  ———————————————————————————————————		Creditor Number: 6135121				
Does this claim amend one already filed?  No  Yes. Claim number on court claims registry (if known)1 Filed on:07/21/2020_		<u> </u>				
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one already filed?  Yes. Claim number on court claims registry (if known)  1 Filed on: 07/21/2020						
Tes. Claim number on court claims registry (ii known)					Filad	07/01/0000
MINI / DD / TTTT	,	MM / DD / YYYY				
	i. Do you know if anyone else has filed a proof	■ No				

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Give Information About the Claim as of the Date the Case Was Filed

Part 2:

6. Do you have any number you use to identify the debtor?	□ No ■ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:  See Attachment					
7. How much is the claim?	\$ 0.00 Does this amount include interest or other charges? ■ No					
	☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).					
8. What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.					
	Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).					
	Limit disclosing information that is entitled to privacy, such as health care information.					
	Taxes					
9. Is all or part of the claim	■ No					
secured?	$\square$ Yes. The claim is secured by a lien on property.					
	Nature of property:					
	<ul> <li>Real Estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim         Attachment (Official Form 410-A) with this Proof of Claim.     </li> </ul>					
	☐ Motor Vehicle					
	□ Other. Describe:					
	Basis for perfection: Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)					
	Value of Property: \$					
	Amount of the claim that is secured: \$					
	Amount of the claim that is unsecured:   (The sum of the secured and unsecured amounts should match the amount in line 7.					
	Amount necessary to cure any default as of the date of the petition:					
	Annual Interest Rate (when case was filed)					
	□ Fixed □ Variable					
10. Is this claim based on a	■ No					
lease?	☐ Yes. Amount necessary to cure any default as of the date of the petition. \$					
11. Is this claim subject to a	□ No					
right of setoff?	■ Yes. Identify the property See Attachment					

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12. Is all or part of the clain entitled to priority unde		eck all that apply:			
11 U.S.C. §507(a)?		Amount entitled to priority			
A claim may be partly priority and partly	□ Dome 11 U.	\$			
nonpriority. For example in some categories, the law limits the amount entitled to priority.	□ Up to	\$3,025* of deposits toward purchase, lease, or rental of proper onal, family, or household use. 11 U.S.C. § 507(a)(7).	erty or services for	\$	
	bankı	es, salaries, or commissions (up to $13,650$ ) earned within 180 ruptcy petition is filed or the debtor's business ends, whichever S.C. § $507(a)(4)$ .	) days before the is earlier.	\$	
	□ Taxe	s or penalties owed to governmental units. 11 U.S.C. § 507(a)(	8).	\$	
	□ Cont	ributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).		\$	
	□ Othe	r. Specify subsection of 11 U.S.C. § 507(a)() that applies.		\$	
	*Amoun	ts are subject to adjustment on 4/01/22 and every 3 years after that for o	cases begun on or afte	r the date of adjustment.	
Part 3: Sign Below					
The person completing this	Check the ar	poropriate box:			
proof of claim must sign	■ I am the c	' '			
and date it. FRBP 9011(b).		reditor's attorney or authorized agent.			
If you file this claim		ustee, or the debtor, or their authorized agent. Bankruptcy Rule	e 3004.		
electronically, FRBP					
5005(a)(2) authorizes courts to establish local rules	□ I alli a gua	rantor, surety, endorser, or other codebtor. Bankruptcy Rule 30	105.		
specifying what a signature is.		that an authorized signature on this Proof of Claim serves as an e claim, the creditor gave the debtor credit for any payments re			
A person who files a fraudulent claim could be	I have exami and correct.	ned the information in this Proof of Claim and have a reasonab	le belief that the info	ormation is true	
fined up to \$500,000, imprisoned for up to 5 years, or both.	I declare und	ler penalty of perjury that the foregoing is true and correct.			
18 U.S.C. §§ 152, 157, and 3571.	Executed on date 08/10/2020 MM / DD / YYYY				
	/s/ DEBRA L (Signature)	. HARRIS			
	Print the nar	me of the person who is completing and signing this claim	:		
	Name	DEBRA L.		ARRIS	
		First name Middle name	Las	st name	
	Title	Revenue Officer Advisor			
	Company	Internal Revenue Service			
		Identify the corporate servicer as the company if the authorized agent is	s a servicer.		
	Address	INSOLVENCY 4905 KOGER BOULEVARD SUITE 102, M/S 9 Number Street	)		
		GREENSBORO 1	NC	27407-2734	
		City	State	ZIP Code	
	Contact Phone	(336) 690-6413	Email:		

Case 20-30609 Claim 1-2 Filed 08/11/20 Desc Main Document Page 4 of 4

## Proof of Claim for Internal Revenue Taxes



Form 410 Attachment

Department of the Treasury/Internal Revenue Service

In the Matter of: MURRAY BOILER LLC

800-E BEATTY STREET DAVIDSON, NC 28036

Case Number 20-30609

Type of Bankruptcy Case CHAPTER 11

Date of Petition 06/18/2020

Amendment No. 1 to Proof of Claim dated 07/21/2020.

The United States has not identified a right of setoff or counterclaim. However, this determination is based on available data and is not intended to waive any right to setoff against this claim debts owed to this debtor by this or any other federal agency. All rights of setoff are preserved and will be asserted to the extent lawful.

This Claim Is Being Withdrawn.

Unsecured Priority Claims under section 507(a)(8) of the Bankruptcy Code						
Taxpayer						Interest to
ID Number	Kind of Tax	Tax Period		Date Tax Assessed	Tax Due	Petition Date
XX-XXX0679	CORP-INC	12/31/2020	1	Estimated- SEE NOTE	\$0.00	\$0.00

Total Amount of Unsecured Priority Claims: \$0.00