Docket #2643 Date Filed: 08/25/2021

UNITED STATES BANKRUPTCY COURT

	Eastern DISTRICT OF	Washington
In re: Sunnyside Home Health	\$ \$ \$	Case No. 19-01198 Lead Case No. 19-01189
Debtor(s)	§	
Post-confirmation Report		Chapter 11
Quarter Ending Date: 06/30/2021		Petition Date: <u>05/07/2019</u>
Plan Confirmed Date: 12/23/2020		Plan Effective Date: 01/15/2021
This Post-confirmation Report relates to:	Reorganized Debtor Other Authorized Party or En	tity:Name of Authorized Party or Entity
Maxwell Owens Signature of Responsible Party 08/25/2021	Prir	xwell Owens Ited Name of Responsible Party
Date	180 Suit	6 Yakima Valley Hwy se B

STATEMENT: This Periodic Report is associated with an open bankruptcy case; therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.



Sunnyside, WA 98944

Address

Part 1: Summary of Post-confirmation Transfers

	Current Quarter	Total Since Effective Date
a. Total cash disbursements	\$0	\$0
b. Non-cash securities transferred	\$0	\$0
c. Other non-cash property transferred	\$0	\$0
d. Total transferred (a+b+c)	\$0	\$0

Part 2:	Preco	onfirmation Professional Fee	s and Expenses				
				Approved	Approved	Paid Current	Paid
				Current Quarter	Cumulative	Quarter	Cumulative
a.		ssional fees & expenses (bankrupto red by or on behalf of the debtor	ey) Aggregate Total				
	Itemized Breakdown by Firm						
		Firm Name	Role				
	i						
	ii						

				Approved	Approved	Paid Current	Paid
				Current Quarter	Cumulative	Quarter	Cumulative
b.		ssional fees & expenses (nonbankrup red by or on behalf of the debtor	tcy) Aggregate Total				
	Itemized Breakdown by Firm						
		Firm Name	Role				
	i						
	ii						
c.	All professional fees and expenses (debtor & committees)						

Part 3: Recoveries of the Holders of Claims and Interests under Confirmed Plan

	Total Anticipated Payments Under Plan	Paid Current Quarter	Paid Cumulative	Allowed Claims	% Paid of Allowed Claims
a. Administrative claims	\$0	\$0	\$0	\$0	0%
b. Secured claims	\$0	\$0	\$0	\$0	0%
c. Priority claims	\$0	\$0	\$0	\$0	0%
d. General unsecured claims	\$0	\$0	\$0	\$0	0%
e. Equity interests	\$0	\$0	\$0		

Part 4: Questionnaire

a. Is this a final report?		Yes 💿	No 🔘
If yes, give date Final Decree was entered:	06/30/2021		
If no, give date when the application for Final Decree is anticipated:			
b. Are you current with quarterly U.S. Trustee fees as set forth under 28 U.S.C. $\S~19$	30?	Yes 💿	No 🔘

Privacy Act Statement

28 U.S.C. § 589b authorizes the collection of this information and provision of this information is mandatory. The United States Trustee will use this information to calculate statutory fee assessments under 28 U.S.C. § 1930(a)(6) and to otherwise evaluate whether a reorganized chapter 11 debtor is performing as anticipated under a confirmed plan. Disclosure of this information may be to a bankruptcy trustee when the information is needed to perform the trustee's duties, or to the appropriate federal, state, local, regulatory, tribal, or foreign law enforcement agency when the information indicates a violation or potential violation of law. Other disclosures may be made for routine purposes. For a discussion of the types of routine disclosures that may be made, you may consult the Executive Office for United States Trustee's systems of records notice, UST-001, "Bankruptcy Case Files and Associated Records." *See* 71 Fed. Reg. 59,818 et seq. (Oct. 11, 2006). A copy of the notice may be obtained at the following link: http://www.justice.gov/ust/eo/rules_regulations/index.htm. Failure to provide this information could result in the dismissal or conversion of your bankruptcy case, or other action by the United States Trustee. 11 U.S.C. § 1112(b)(4)(F).

I declare under penalty of perjury that the foregoing Post-confirmation Report and its attachments, if any, are true and correct and that I have been authorized to sign this report.

Maxwell Owens	Maxwell Owens
Signature of Responsible Party	Printed Name of Responsible Party
Senior Vice President & CFO	08/25/2021
Title	Date

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