

Fill in this information to identify the case:

Debtor name **Northwest Senior Housing Corporation, et al.**¹
 United States Bankruptcy Court for the: **Northern District of Texas**
 Case number (if known):

Check if this is an amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: Consolidated List of Creditors Who Have the 30 Largest Unsecured Claims and Are Not Insiders

12/15

A consolidated list of creditors holding the 30 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.

| | Names 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 |
| 1 | Resident 365 Address Redacted | | Entrance Fee Refund | C U | | | \$1,339,173.00 |
| 2 | Resident 349 Address Redacted | | Entrance Fee Refund | C U | | | \$1,249,173.00 |
| 3 | Resident 1492 Address Redacted | | Entrance Fee Refund | C U | | | \$977,400.00 |
| 4 | Resident 374 Address Redacted | | Entrance Fee Refund | C U | | | \$969,219.00 |

¹ The Debtors in these chapter 11 cases, along with the last four digits of each Debtor's federal tax identification number, are Northwest Senior Housing Corporation (1278) and Senior Quality Lifestyles Corporation (2669). The Debtors' mailing address is 8523 Thackery Street, Dallas, Texas 75225.



| | Names 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 |
| 5 | Resident 336 Address Redacted | | Entrance Fee Refund | C U | | | \$969,219.00 |
| 6 | Resident 329 Address Redacted | | Entrance Fee Refund | C U | | | \$900,000.00 |
| 7 | Resident 298 Address Redacted | | Entrance Fee Refund | C U | | | \$894,446.70 |
| 8 | Resident 1438 Address Redacted | | Entrance Fee Refund | C | | | \$875,601.90 |
| 9 | Resident 114 Address Redacted | | Entrance Fee Refund | C U | | | \$869,103.00 |
| 10 | Resident 1480 Address Redacted | | Entrance Fee Refund | C U | | | \$855,000.00 |
| 11 | Resident 1522 Address Redacted | | Entrance Fee Refund | C | | | \$837,810.00 |
| 12 | Resident 342 Address Redacted | | Entrance Fee Refund | C U | | | \$837,810.00 |
| 13 | Resident 360 Address Redacted | | Entrance Fee Refund | C U | | | \$837,810.00 |
| 14 | Resident 334 Address Redacted | | Entrance Fee Refund | C U | | | \$826,067.70 |

| | Names 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 |
| 15 | Resident 354 Address Redacted | | Entrance Fee Refund | C U | | | \$818,100.00 |
| 16 | Resident 1436 Address Redacted | | Entrance Fee Refund | C | | | \$808,430.40 |
| 17 | Resident 343 Address Redacted | | Entrance Fee Refund | C U | | | \$808,430.00 |
| 18 | Resident 368 Address Redacted | | Entrance Fee Refund | C U | | | \$785,673.00 |
| 19 | Resident 371 Address Redacted | | Entrance Fee Refund | C U | | | \$785,673.00 |
| 20 | Resident 1488 Address Redacted | | Entrance Fee Refund | C U | | | \$770,004.00 |
| 21 | Resident 347 Address Redacted | | Entrance Fee Refund | C U | | | \$768,456.00 |
| 22 | Resident 372 Address Redacted | | Entrance Fee Refund | C U | | | \$768,009.00 |
| 23 | Resident 370 Address Redacted | | Entrance Fee Refund | C U | | | \$768,009.00 |
| 24 | Resident 1434 Address Redacted | | Entrance Fee Refund | C | | | \$763,173.00 |

| | Names 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 |
| 25 | Resident 1410 Address Redacted | | Entrance Fee Refund | C | | | \$756,675.00 |
| 26 | Resident 214 Address Redacted | | Entrance Fee Refund | C U | | | \$756,545.00 |
| 27 | Resident 339 Address Redacted | | Entrance Fee Refund | C U | | | \$742,500.00 |
| 28 | Resident 337 Address Redacted | | Entrance Fee Refund | C U | | | \$740,673.00 |
| 29 | Resident 151 Address Redacted | | Entrance Fee Refund | C U | | | \$738,000.00 |
| 30 | Resident 1484 Address Redacted | | Entrance Fee Refund | C U | | | \$728,676.00 |