

Your claim can be filed electronically on KCC's website at <https://epoc.kccllc.net/TemplarEnergy>.

United States Bankruptcy Court for the District of Delaware

Indicate Debtor against which you assert a claim by checking the appropriate box below. **(Check only one Debtor per claim form.)**

- | | | |
|--|---|--|
| <input type="checkbox"/> Templar Energy LLC (Case No. 20-11441) | <input type="checkbox"/> TE Holdings Management LLC (Case No. 20-11457) | <input type="checkbox"/> Templar Midstream LLC (Case No. 20-11454) |
| <input checked="" type="checkbox"/> TE Holdcorp, LLC (Case No. 20-11442) | <input type="checkbox"/> TE Holdings, LLC (Case No. 20-11445) | <input type="checkbox"/> Templar Operating LLC (Case No. 20-11452) |
| <input type="checkbox"/> TE Holdings II, LLC (Case No. 20-11449) | | |

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. Other than a claim under 11 U.S.C. § 503(b)(9), this form should not be used to make a claim for an administrative expense arising after the commencement of the case.

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

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

Fill in all the information about the claim as of the date the case was filed.

Part 1: Identify the Claim

1. Who is the current creditor?	AG Diversified Income Master Fund, L.P. Name of the current creditor (the person or entity to be paid for this claim)	
	Other names the creditor used with the debtor <u>Angelo, Gordon & Co., L.P.</u>	
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent? <u>Angelo, Gordon & Co., L.P.</u> Name <u>245 Park Ave, 24th FL- Legal & Compliance</u> Number Street <u>New York NY 10167</u> City State ZIP Code <u>USA</u> Country Contact phone <u>212-692-2000</u> Contact email <u>legal@angelogordon.com</u>	Where should payments to the creditor be sent? (if different) Name _____ Number Street _____ City State ZIP Code _____ Country _____ Contact phone _____ Contact email _____
	Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on _____ MM / DD / YYYY	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____	

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

6. Do you have any number you use to identify the debtor? No
 Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____

7. How much is the claim? \$ 44,160.42. 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.
TE Holdcorp LLC Corp Class A Common Units

9. Is all or part of the claim secured? No
 Yes. The claim is secured by a lien on property.
Nature of property:
 Real estate: If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.
 Motor vehicle
 Other. Describe: _____
Basis for perfection: _____
Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)
Value of property: \$ _____
Amount of the claim that is secured: \$ _____
Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amount should match the amount in line 7.)

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

Annual Interest Rate (when case was filed) _____%

Fixed
 Variable

10. Is this claim based on a lease? No
 Yes. Amount necessary to cure any default as of the date of the petition. \$ _____

11. Is this claim subject to a right of setoff? No
 Yes. Identify the property: _____

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

No

Yes. Check all that apply:

Amount entitled to priority

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

Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

\$ _____

Up to \$3,025* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

\$ _____

Wages, salaries, or commissions (up to \$13,650*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).

\$ _____

Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

\$ _____

Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).

\$ _____

Other. Specify subsection of 11 U.S.C. § 507(a)() that applies.

\$ _____

* Amounts are subject to adjustment on 4/01/22 and every 3 years after that for cases begun on or after the date of adjustment.

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

No

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

\$ _____

Part 3: Sign Below

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

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

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

Check the appropriate box:

I am the creditor.

I am the creditor's attorney or authorized agent.

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

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

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

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

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

Executed on date

07 28 2020
MM / DD / YYYY

Signature

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

Name

FRANK E STADELMAIER
First name Middle name Last name

Title

Chief Operating Officer

Company

Angelo, Gordon & Co., L.P., as investment adviser

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

245 Park Ave, 24th Fl

City

Number Street
New York

State
NY

10167

Country
USA

Contact phone

City
212-692-2000

State
NY

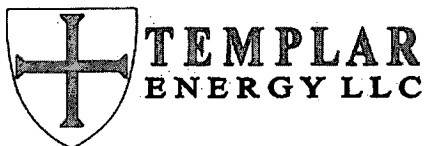
ZIP Code
10167

Country
USA

Email legal@angelogordon.com

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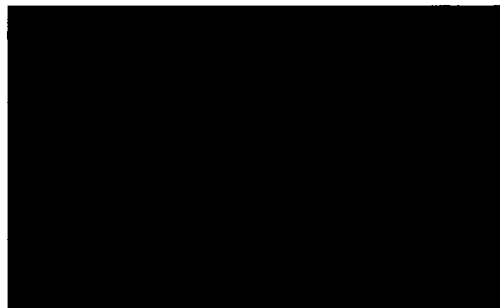
Computershare Trust Company, N.A.
 PO Box 505000
 Louisville, KY 40233-5000
 Telephone: 866-595-6048
www.computershare.com/investor

TE Holdcorp, LLC is incorporated under the laws of the State of DE.

004528



AG DIVERSIFIED INCOME MASTER FUND LP
 ATTN D FOREST WOLFE
 245 PARK AVENUE 26TH FLOOR
 NEW YORK NY 10167



Uncertified accounts are subject to withholding taxes on dividend payments and sales proceeds.

TE Holdcorp, LLC - Account Statement

Summary of Account Holdings as of 31 Dec 2019

01YK1_AST_2

Type of Holding	Restrictions on Holding	Opening Balance as of 01 Jan 2019	Share/Unit Activity	Closing Balance as of 31 Dec 2019	Closing Share Price (USD) on 21 Sep 2016	Closing Value (USD)
CLASS A COMMON UNITS	Restricted	44,160.415000	0.000000	44,160.415000	10.00	441,604.15
TOTAL HOLDINGS		44,160.415000	0.000000	44,160.415000		441,604.15

Valuation Information

Unit price is as of the original offering date.

Important: State Unclaimed Property laws require Computershare as Transfer Agent to show periodic contact from you otherwise your state of residence may require your shares and/or uncashed checks to be turned over to the state as 'abandoned'. Please initiate contact by logging into your account via web or phone at least annually.

