

UNITED STATES BANKRUPTCY COURT

FOR THE DISTRICT OF NEVADA

In re: Front Sight Management LLC

Case No. 22-11824

Debtor(s)

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§  
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§

Jointly Administered

**Post-confirmation Report**

Chapter 11

Quarter Ending Date: 09/30/2023

Petition Date: 05/24/2022

Plan Confirmed Date: 11/29/2022

Plan Effective Date: 12/02/2022

This Post-confirmation Report relates to:  Reorganized Debtor

Other Authorized Party or Entity: Liquidating Trustee

Name of Authorized Party or Entity

/s/ Susan K. Seflin

Signature of Responsible Party

10/23/2023

Date

Susan K. Seflin

Printed Name of Responsible Party

BG Law

21650 Oxnard St., Ste. 500

Woodland Hills, CA 91367

Address

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.

Debtor's Name Front Sight Management LLC

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**Part 1: Summary of Post-confirmation Transfers**

	Current Quarter	Total Since Effective Date
a. Total cash disbursements	\$65,608	\$255,171
b. Non-cash securities transferred	\$0	\$0
c. Other non-cash property transferred	\$0	\$0
d. Total transferred (a+b+c)	\$65,608	\$255,171

**Part 2: Preconfirmation Professional Fees and Expenses**

a.			Approved Current Quarter	Approved Cumulative	Paid Current Quarter	Paid Cumulative
	Professional fees & expenses (bankruptcy) incurred by or on behalf of the debtor <i>Aggregate Total</i>			\$0	\$0	\$0
<i>Itemized Breakdown by Firm</i>						
	Firm Name	Role				
i			\$0	\$0	\$0	\$0
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			Approved Current Quarter	Approved Cumulative	Paid Current Quarter	Paid Cumulative
b.	Professional fees & expenses (nonbankruptcy) incurred by or on behalf of the debtor		\$0	\$0	\$0	\$0
	<i>Aggregate Total</i>					
	<i>Itemized Breakdown by Firm</i>					
		Firm Name	Role			
	i			\$0	\$0	\$0
	ii					
	iii					
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c.	All professional fees and expenses (debtor & committees)		\$0	\$0	\$0	\$0

**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	\$3,000,000	\$0	\$0	\$0	0%
e. Equity interests	\$0	\$0	\$0	\$0	0%

**Part 4: Questionnaire**

- a. Is this a final report? Yes  No
- If yes, give date Final Decree was entered: \_\_\_\_\_
- If no, give date when the application for Final Decree is anticipated: 12/31/2023
- b. Are you current with quarterly U.S. Trustee fees as set forth under 28 U.S.C. § 1930? Yes  No

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**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](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.**

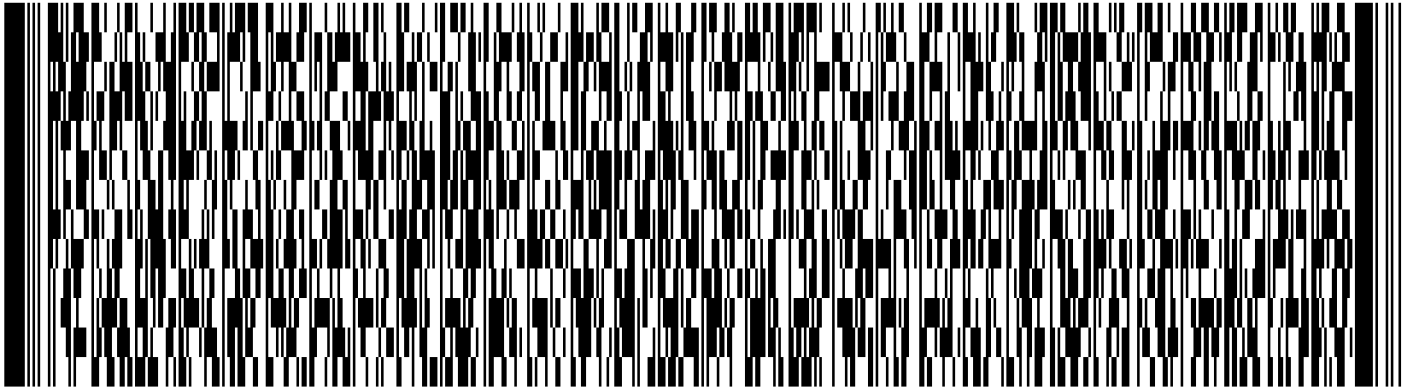
/s/ Amanda Swift  
 \_\_\_\_\_  
 Signature of Responsible Party  
 Principal  
 \_\_\_\_\_  
 Title

Amanda Swift  
 \_\_\_\_\_  
 Printed Name of Responsible Party  
 10/23/2023  
 \_\_\_\_\_  
 Date

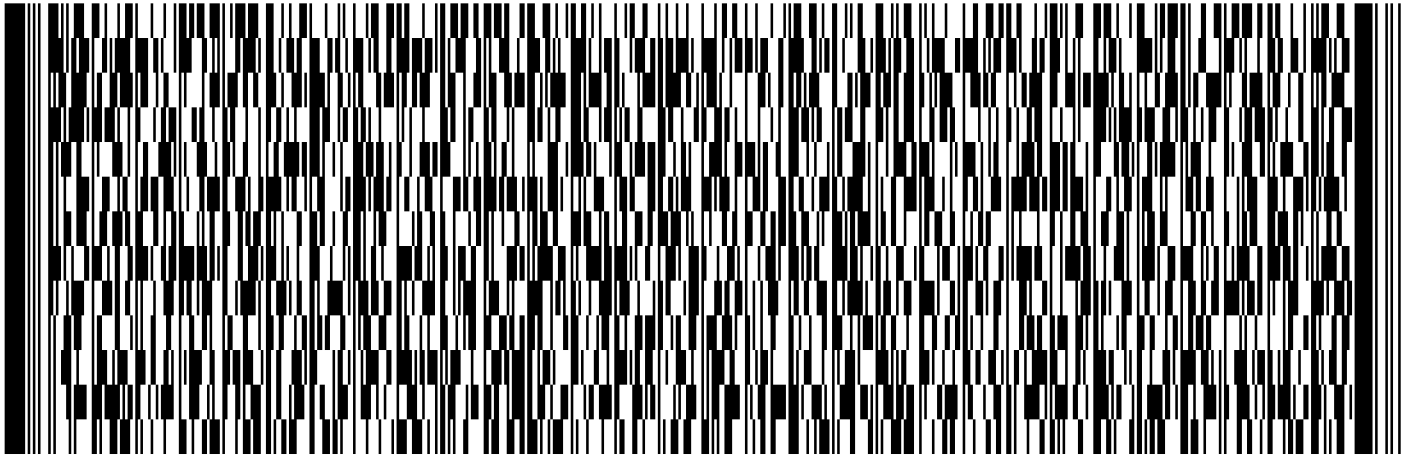


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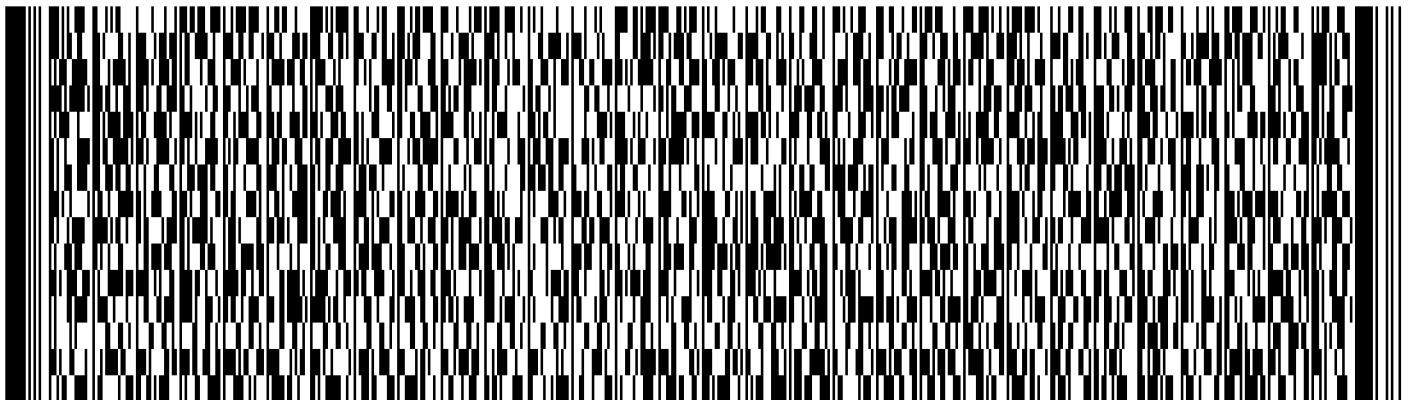
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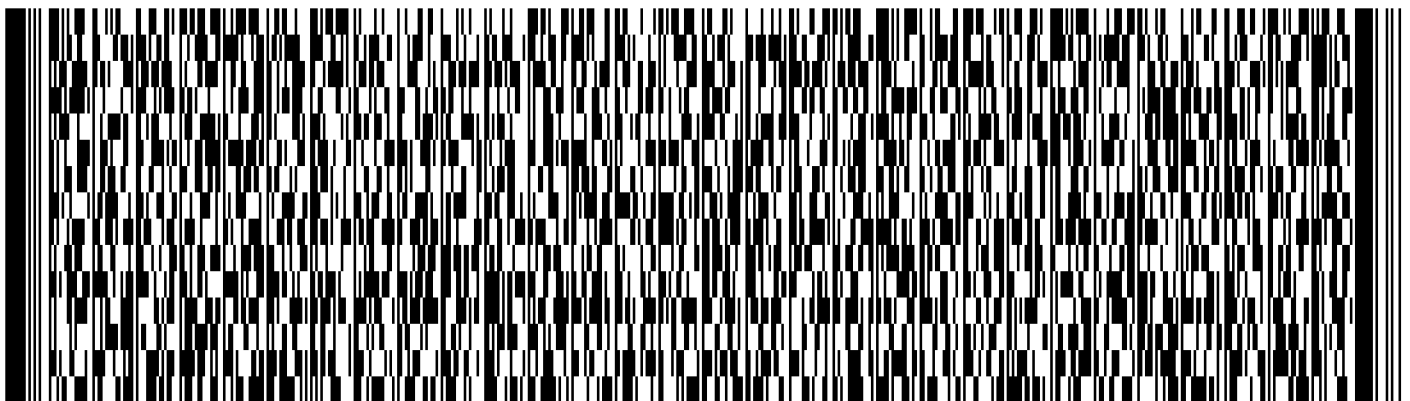
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Other Page 1



Page 2 Minus Tables



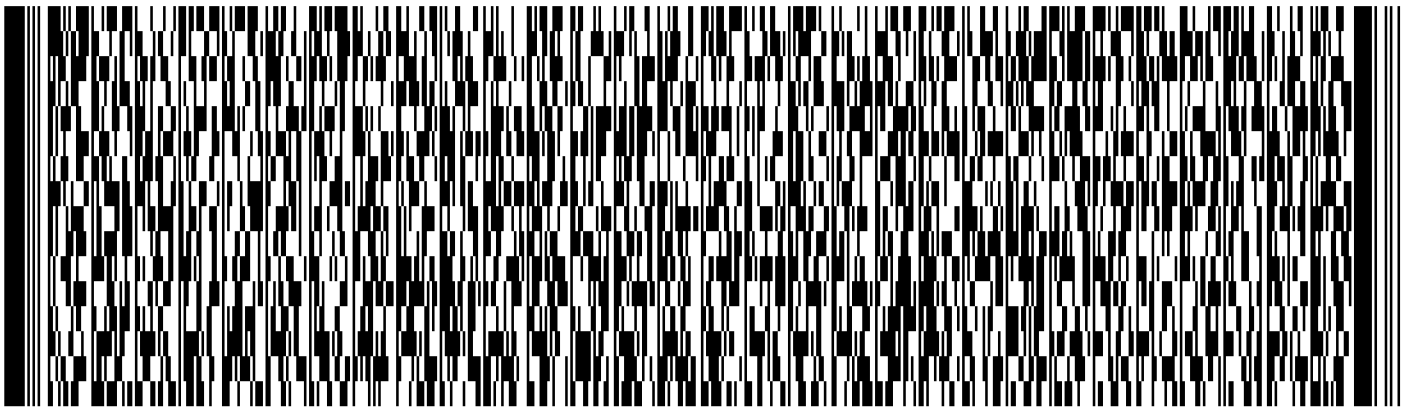
Bankruptcy Table 1-50

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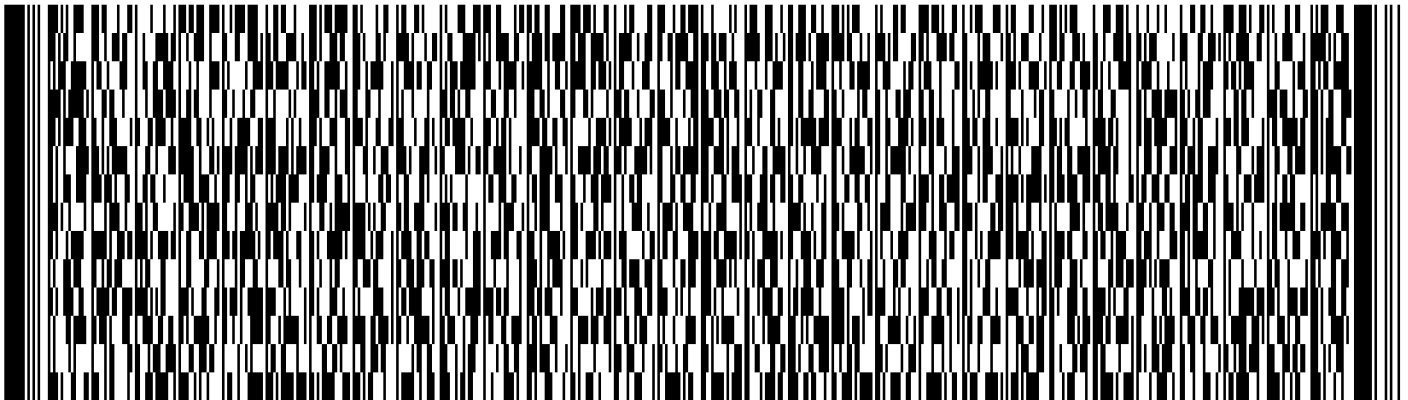
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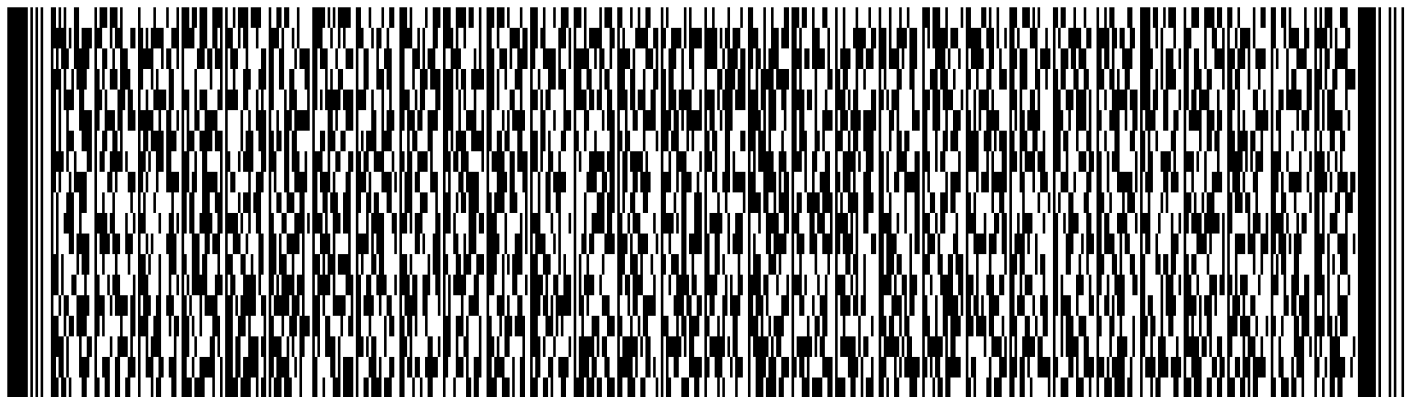
Bankruptcy Table 51-100



Non-Bankruptcy Table 1-50



Non-Bankruptcy Table 51-100



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