

Fill in this information to identify the case:

Debtor 1 KIKO USA, Inc.

Debtor 2
(Spouse, if filing) _____

United States Bankruptcy Court for the: District of Delaware, Wilmington Division

Case number 18-10069

E-Filed on 02/23/2018
Claim # 17

Modified Form 410
Proof of Claim

04/16

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.

Part 1: Identify the Claim

1. **Who is the current creditor?** Del Amo Fashion Center Operating Company, L.L.C.
Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor _____

2. **Has this claim been acquired from someone else?** No
 Yes. From whom? _____

<p>3. Where should notices and payments to the creditor be sent?</p> <p>Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)</p>	<p>Where should notices to the creditor be sent?</p>	<p>Where should payments to the creditor be sent? (if different)</p>
	<p><u>Simon Property Group, Inc.</u> Name</p> <p><u>225 W. Washington Street</u> Number Street</p> <p><u>Indianapolis</u> <u>Indiana</u> <u>46204</u> City State ZIP Code</p> <p>Contact phone <u>(317) 263-2346</u></p> <p>Contact email <u>rtucker@simon.com</u></p> <p>Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____</p>	<p><u>Del Amo Fashion Center Operating Co LLC</u> Name</p> <p><u>PO Box 409657</u> Number Street</p> <p><u>Atlanta</u> <u>Georgia</u> <u>30384-9657</u> City State ZIP Code</p> <p>Contact phone _____</p> <p>Contact email _____</p>

4. **Does this claim amend one already filed?** No
 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?** No
 Yes. Who made the earlier filing? _____

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: 5 2 4 3

7. How much is the claim? \$ 221,893.05. 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.
Lease Non-Residential

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 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 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 one:*

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

	Amount entitled to priority
<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$ _____
<input type="checkbox"/> Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$ _____
<input type="checkbox"/> Wages, salaries, or commissions (up to \$12,850*) 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).	\$ _____
<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$ _____
<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$ _____
<input checked="" type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(<u>2</u>) that applies.	\$ _____ 100.00

* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

13. Is all or part of the claim entitled to administrative priority 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 acknowledgment 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 a 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 02/23/2018
MM / DD / YYYY

Ronald M. Tucker
Signature

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

Name Ronald M. Tucker
First name Middle name Last name

Title Vice President/Bankruptcy Counsel

Company Simon Property Group, Inc.
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address _____
Number Street

_____ City State ZIP Code

Contact phone _____ Email _____

Attachment 1 - 5243 KIKMI Claim Backup 22318.pdf

Description -

Tenant **Kiko USA, Inc. - KIKUS/**
 Cause # **18-10069**

Rejection Claim Calculation

Lease	Property	Rejection Date	Lease Expiration Date	Months Remaining on Lease Term	Monthly Obligations Amount	Obligations through End of Lease Term	Total Annual Charges	15 % of Rent for Remaining Lease Term	Three Years of Rent
Kiko Milano-KIKM//	Del Amo Fashion Center---5243	02/01/2018	10/31/2025	92	\$16,071.96	\$1,478,620.32		\$221,793.05	\$578,590.56

Rejection Date is not null

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Date of Filing: **01/11/2018** Lease(s) selected: **Kiko Milano-KIKM//**

TENANT: KIKUS// Kiko USA, Inc.
 LEASE: KIKMI// Kiko Milano
 PROJECT: 5243 Del Amo Fashion Center Torrance CA
 INACTIVE SPACE

EXECUTION DATE: 5/28/2015 LEASE STATUS: Terminated Lease
 LEASE START DATE: 10/09/2015 LEASE TYPE: Lease
 LEASE END DATE: 10/31/2025 SECURITY DEPOSIT: .00
 REPLACEMENT DATE: CORP NAME: Kiko USA, Inc.
 INSURANCE EXP: Terms: .
 GENERAL LEASE NOTES: UNKNOWN
 STANDARD PROVISIONS INTENTIONALLY DELETED: NEW YORK NY 10016-
 SUPPLEMENTAL AGREEMENT:
 CONSTRUCTION ALLOWANCE: \$125,000 Sect 24.23

RENEWAL:
 TERMINATION: Tnt closed 1/26/18, vacated 2/1/18, terminated 2/1/18
 per TAR - Prior to Lease Expiration.
 TID RENAME:
 LID RENAME:

---SPACE INFO--- SEQ #: 1
 FLOOR: 02 UNIT: 450B UNIT TYPE: INL SPACE TYPE: RET
 SQ FT RENTABLE SPACE START 10/09/2015 OPEN 10/09/2015
 LEASE 1,151 SPACE END 2/01/2018 VACATE 2/01/2018
 ACTUAL 1,151 RCD 10/09/2015 TERM 2/01/2018
 SALES REPORTING Monthly DAYS 20
 PAYMENT Annually 45
 SALES YEAR Nov - Oct
 SIC 1951 Cosmetics

Start Dt	End Date	Ann Rent	Rent Sq/Ft	Monthly Rent	BREAK POINT	INFO	Sls Cat	Chg Typ	Ovr%g	Product Sls Base	Ovr%g	Product Sls Base
10/09/15	10/31/16	120,855.00	105.00	10,071.25	10/09/15	10/31/16	RET	BOV	8.000	1,510,687		
11/01/16	10/31/17	124,480.68	108.15	10,373.39	11/01/16	10/31/17	RET	BOV	8.000	1,556,008		
11/01/17	2/28/18	128,209.92	111.39	10,684.16	11/01/17	1/26/18	RET	BOV	8.000	1,602,623		
2/02/18	2/28/18	128,209.92	111.39	10,684.16			RET	BOV	8.000			
11/01/18	10/31/19	132,054.24	114.73	11,004.52								
11/01/19	10/31/20	136,013.64	118.17	11,334.47								
11/01/20	10/31/21	140,099.76	121.72	11,674.98								
11/01/21	10/31/22	144,300.84	125.37	12,025.07								
11/01/22	10/31/23	148,628.64	129.13	12,385.72								
11/01/23	10/31/24	153,083.04	133.00	12,756.92								
11/01/24	10/31/25	157,675.44	136.99	13,139.62								

---CURRENT MONTHLY OBLIGATIONS---

Charge Description	Ann Amt	Sq/Ft	Monthly	Pay	Eff Date	End Date	Recovery Information
BMR Base Minimum Rent	128,209.92	111.39	10,684.16	MON	11/01/17	2/28/18	RET Real Estate Tax Reimbursement
CMP Trash Removal	1,162.56	1.01	96.88	MON	1/01/18	2/28/18	RET Estate Tax Reimbursement
DWT Domestic Water	355.80	.31	29.65	MON	10/09/15	2/28/18	Proprate Cost
ELE Electricity	7,827.60	6.80	652.30	MON	11/01/17	2/28/18	Cap/Max: Y Rate: 100% Amt: %
OFN Operating Costs Fixe	37,041.48	32.18	3,086.79	MON	1/01/18	2/28/18	
PFD Promotion Fund	2,664.84	2.32	222.07	MON	1/01/18	2/28/18	
RET R/E Tax	15,593.88	13.55	1,299.49	MON	1/01/17	2/28/18	
SEW Sewage Treatment	7.44	.01	.62	MON	10/09/15	2/28/18	

2/23/18 BRIDGEST
10:36:16 QPADEV0071

* * TENANT DETAIL SUMMARY * *

By Tenant

CM8075
V000414 CO

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TENANT: KIKUS/ Kiko USA, Inc.
LEASE: KIKMI// Kiko Milano
PROJECT: 5243 Del Amo Fashion Center

Torrance

CA

INACTIVE SPACE

--SPACE INFO-- SEQ #: 1 ...CONTINUED
CURRENT OBLIGATION: 192,863.52 167.57 16,071.96

Current Effective Rent: 128,209.89
Total Ancillaries: 64,653.59
Total Charges: 192,863.52
Effective Rent/Sq Ft: 167.53

% OF LAST YR SALES

46.75%
23.57%
70.32%

This Year (Est):
Last year sales:
2nd Prev Yr sls:

18,067.40
274,272.99
330,483.59