9595	ΠV	OID [COR	RECTED		
PAYER'S name, street address, city or town, state or province, country, ZIP					OMB No. 1545-0115	
or foreign postal code, and telephone no.				•		Miscellaneous
				\$ 2 Royalties	20 17 Miscellaneou	
				,		
				\$	Form 1099-MISC	
				3 Other income	4 Federal income tax withhel	3393
PAYER'S federal identification numbe	IT'S identific	ation numb	•	6 Medical and health care paymen	For Internal Revenue	
						Service Center
RECIPIENT'S name				\$7 Nonemployee compensation	\$ Substitute payments in lieu	of Far Drive av And
TILOR ILIA STIAINE			1 Honomployee compensation	dividends or interest	For Privacy Act	
						Reduction Act
Street address (including apt. no.)				\$	\$	Notice, see the 2017 General
				9 Payer made direct sales of \$5,000 or more of consumer	10 Crop insurance proceeds	Instructions for
City or town, state or province, country, and ZIP or foreign postal code				products to a buyer (recipient) for resale ▶	\$	Certair
				11	12	Information Returns
		LEATON SE	To LTIN	140.5	44.0	
Account number (see instructions)	requirement 2nd 11N not		ot. 13 Excess golden parachute payments	14 Gross proceeds paid to ar attorney		
				\$	\$	
15a Section 409A deferrals	15b Section	n 409A inco	me	16 State tax withheld	17 State/Payer's state no.	18 State income
φ.	,			\$		\$
\$ Form 1099-MISC	. No. 14425			ww.irs.gov/form1099misc	Department of the Treasur	A Internal Devenue Comitee
Do Not Cut or Separa			This P	ge — Do Not Cut o	or Separate Form	s on This Page
9595		OID .		RECTED	TOMP No. 4545 0445	
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.				P 1 Rents	OMB No. 1545-0115	
				\$	2017	Miscellaneous
				2 Royalties		Income
					- 4000 14100	
			\$ 3 Other income	Form 1099-MISC 4 Federal income tax withhel	d Copy A	
				\$	\$	Foi
PAYER'S federal identification number	r RECIPIEN	IT'S identific	ation numb	5 Fishing boat proceeds	6 Medical and health care paymen	Internal Revenue
						Service Center
				\$	\$	
RECIPIENT'S name			T T T T T T T T T T T T T T T T T T T		File with Form 1006	
RECIPIENT'S name				7 Nonemployee compensation		
RECIPIENT'S name				7 Nonemployee compensation	8 Substitute payments in lieu dividends or interest	of For Privacy Act
					dividends or interest	and Paperwork Reduction Act
RECIPIENT'S name Street address (including apt. no.)				7 Nonemployee compensation \$ 9 Payer made direct sales of		of For Privacy Act and Paperwork

11 12 Returns. 2nd TIN not. 13 Excess golden parachute Account number (see instructions) FATCA filing 14 Gross proceeds paid to an requirement payments attorney 15a Section 409A deferrals 15b Section 409A income 16 State tax withheld 17 State/Payer's state no. 18 State income

(recipient) for resale ▶

\$

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Information

City or town, state or province, country, and ZIP or foreign postal code