L DAVIENTO		CTED (if checked)	1	
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Rents	OMB No. 1545-0115	
	22326787	\$	2017	Miscellaneous
AB STAR GROUP	(510)304-8687	2 Royalties		Income
3885 BEACON AVE STE	D D			
FREMONT CA 94538		\$	Form 1099-MISC	
		3 Other income	4 Federal income tax withheld	
		\$	\$	Copy 2
PAYER'S federal identification number	RECIPIENT'S identification number	5 Fishing boat proceeds	6 Medical and health care payments	4
				recipient's state
	14,14			income tax return,
51-0526098	071-63-5541	\$	\$	when required.
RECIPIENT'S name		7 Nonemployee compensation	8 Substitute payments in lieu or	
JOBISH SOMASUNDARAN			dividends or interest	
Street address (including apt. no.)		\$ 1040.00	\$	
320 S PROSPECT AVE		9 Payer made direct sales of	10 Crop insurance proceeds	†
APT 25		\$5,000 or more of consumer		
City or town, state or province, country, and ZIP or foreign postal code		products to a buyer (recipient) for resale ►	\$	
		11	12	Ť
REDONDO CA 90277		Trace		
Account number (see instructions)	FATCA filing	13 Excess golden parachute	14 Gross proceeds paid to an	†
	requirement	payments	attorney	
000069 R7/FKG #		\$	\$	
15a Section 409A deferrals	15b Section 409A income	16 State tax withheld	17 State/Payer's state no.	18 State income
		\$	CA249-2735 2	\$ 1040.00
\$	\$	\$	***************************************	\$
Form 1099-MISC	www.irs.gov/form1099r	misc	Department of the Treasury	Internal Revenue Service
			,	
	☐ CORRE	CTED (if checked)		
PAYER'S name street address city of	r town state or province country 7ID	1 Ponts	OMB No. 1545-0115	

☐ CORRE	CTED (if checked)		
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	1 Rents	OMB No. 1545-0115	
22326787	\$	2017	Miscellaneous
AB STAR GROUP (510)304-8687	2 Royalties		Income
3885 BEACON AVE STE D			
FREMONT CA 94538	\$	Form 1099-MISC	
	3 Other income	4 Federal income tax withheld	Copy B
R7/FKG/2017/4/97620 / /000069	\$	\$	For Recipient
PAYER'S federal identification number RECIPIENT'S identification number	5 Fishing boat proceeds	6 Medical and health care payments	
51-0526098 071-63-5541	\$	\$	
RECIPIENT'S name	7 Nonemployee compensation	8 Substitute payments in lieu of	This is important tax
JOBISH SOMASUNDARAN		dividends or interest	information and is
			being furnished to
Street address (including apt. no.)	\$ 1040.00	\$	the Internal Revenue Service. If you are
320 S PROSPECT AVE	9 Payer made direct sales of	10 Crop insurance proceeds	required to file a
APT 25	\$5,000 or more of consumer products to a buyer		return, a negligence penalty or other
City or town, state or province, country, and ZIP or foreign postal code	(recipient) for resale ▶	\$	sanction may be
	11	12	imposed on you if
REDONDO CA 90277			this income is taxable and the IRS
Account number (see instructions) FATCA filing	13 Excess golden parachute	14 Gross proceeds paid to an	determines that it
requirement	payments	attorney	has not been
000069 R7/FKG A U	\$	\$	reported.
15a Section 409A deferrals 15b Section 409A income	16 State tax withheld	17 State/Payer's state no.	18 State income
	\$ '	CA249-2735 2	\$ 1040.00
\$ \$	\$		\$