LM-2 Page 1

EFS Home > LM2 Hor	me									Log out
Electronic Forms Sys	stem									
PAGE 1	Save	Import	Add Attachments	<u>Validate</u>		Submit	Print The Entire Repo	ort <u>Help</u>	Print This Page	
PAGE 2										
STMT A			FORM LN	1-2 Ι ΔΒC	OR ORGA	ΔΝΙΖΔΤΙΟ	N ANNUAL REP	ORT	Form Approve	-d
STMT B	U.S. Department Office of Labor-Ma		TOKIT LI	I-Z LADO	on Onde	NIZATIO	IN ANNOAL KEP	OKI	Office of Managem	
SCH 1	Standard	s	MUST BE USED BY LAE				MORE IN TOTAL ANNUAL	RECEIPTS AND	Budget No. 1245-000)3
SCH 2	Washington, DO	20210		LABO	R ORGANIZA	TIONS IN TRUS	STEESHIP		Expires: 10-31-	
SCH 3	This report is mand	atory under	P.L. 86-257, as amended.	Failure to cor	nply may resi	ult in criminal p	rosecution, fines,or civil p	enalties as provi	ded by 29 U.S.C. 439	or 440.
SCH 4			READ THE	INSTRUCTIO	NS CAREFUL	LY BEFORE PR	EPARING THIS REPORT.			
SCH 5				2. PERIO	D COVERED		3. (a) AMENDED check here:	- If this is an ar	mended report,	
SCH 6	For Official Use Only	1. FIL	E NUMBER			DAY YEAR	(b) HARDSHIP	- If filing under	hardship	
	E	544-93	34		01/01/2013		procedures, o		minal report, check	_
SCH 7				Through	12/31/2013		here:	- II tills is a tell	illillar report, crieck	
SCH 8	4. AFFILIATION O	R ORGANIZA	ATION NAME			8. MAILING	ADDRESS (Type or print	in capital letter	s)	
SCH 9	TEST ORGANIZA	TION				First Name		Last Name		
SCH 10	5. DESIGNATION ((Local, Lod <u>o</u>		ESIGNATION		BOB		SMITH		
SCH 11			NUI	MBER		P.O Box - Bu	ilding and Room Numbe	er		
SCH 12			0							
SCH 13	7. UNIT NAME (if a	any)				Number and	Street			
SUMMARY	TEST UNION					FIRST STRE				
SCH 14						City				
SCH 15			cords kept at its mailing	9	Yes 🔘	TEST				
SCH 16	address? (If "No,	" provide a	ddress in Item 69.)		No O	State		ZIP Code + 4		
SCH 17						DC 🕶		20015		
SCH 18			authorized officers of the							
			eport (including informatio edge and belief, true, corr					y the signatory a	ind is, to the best of t	he
SCH 19	70. SIGNED:			PF	RESIDENT	71. SIGNED:			TREASU	RER
SCH 20	70101011251		(If o	ther title, see i		, 1, 510,1251		(If oth	er title, see instructio	
ADDNL INFO	Date:		Telephone (ii o			Data:	Te	elephone	ci dae, see meade	,
VALIDATION SUMMARY	Date:		Number:			Date:		lumber:		
					Add Addit	ional Signature	e			
						ional Signature	¥			
	AI - Additional Inform	nation has bee nation must be	en provided. Click "AI" to view provided for this item. Click	v or edit the text the "AI" to ente	r.					
	Form LM-2 (Revi	sed 2010)								

LM-2 Page 2

FS Home > LM2 I	Home							L
Electronic Forms	System							
PAGE 1	Save & Calculate	Import	Add Attachments	4>	<u>Validate</u>	Help	Print	This Page
PAGE 2	COMPLETE ITEMS 10 TH	IDOLICH 3	1				E1	ILE NUMBER:544-9
STMT A	COMPLETE TIEMS TO TI	IKOUGII Z	1				- 11	LE NOMBER.344-9.
STMT B	10. During the reporting period			16. Were any of t				Yes 🔘
SCH 1	labor organization create or par the administration of a trust or		Yes O	pledged as secur way at the end o			otner	No O
SCH 2	or organization, as defined in the	ne	No O	17. Did the labor	organization h	ave anv		
	instructions, which provides ber members or their beneficiaries?	nefits for		contingent liabilit			ting	Yes O No O
SCH 3				period?				NO O
SCH 4	11(a). During the reporting peri labor organization have a politic		Yes 🔘	18. During the re				
SCH 5	committee (PAC) fund?		No O	organization have and bylaws, othe				Yes 🔘
SCH 6	11(b). During the reporting peri	od did the		or in practices/pro	ocedures listed	l in the		No O
SCH 7	labor organization have a subsi	diary	Yes O					
SCH 8	organization as defined in Secti these Instructions?	on x of	No O	19. What is the d			on's	
SCH 9	12 Businesthe acception and	41.4 44		20. How many me				
SCH 10	12. During the reporting period labor organization have an aud		Yes O	organization have			ng	
	of its books and records by an o		No O	period?(Total fror 13)	n the Members	Line of Sch	edule	
SCH 11	accountant or by a parent body auditor/representative?		140	,				
SCH 12	12 During the reporting period	did the		21. What are the minimum and max				
SCH 13	 13. During the reporting period labor organization discover any 		Yes O			of Dues an		,
SUMMARY	shortage of funds or other asse (Answer "Yes" even if there has		No O	Dues/Fees	Amount	Unit	Minimum	Maximum
SCH 14	repayment or recovery.)	been	110	(a) Regular Dues/Fees		per		
SCH 15	14. What is the maximum amou	nt		(b) Working				
SCH 16	recoverable under the labor org	anization's		Dues/Fees		per		
SCH 17	fidelity bond for a loss caused b officer, employee or agent of th			(c) Initiation Fee	5	per		
	organization who handled union			(d) Transfer Fees	;	per		
SCH 18	15. During the reporting period	did the		(e) Work Permits		per		
SCH 19	labor organization acquire or di	spose of	Yes 🔘	1		1.		
SCH 20	any assets in any manner other	r than by	No O					
ADDNL INFO	paralase of saic:							
VALIDATION	If the answer to any of the above qu	estions is "Yes"	. provide details in Item 69	(Additional Information	as explained in	the instructi	ons for each ite	m.
SUMMARY			•	(Additional Information)) do explained in	T CHE MISCI GCC	ons for each ite	
	AI - Additional Information has been prov *AI - Additional Information must be provi							
	Form LM-2 (Revised 2010)							

LM-2 Statement A

AGE 1	Save & Calculate	Import	Add Attachments	1>	<u>Validate</u>	Help	Print This Page
AGE 2	STATEMENT A - ASS	SETS AND LIA	RILITIES				FILE NUMBER:544-93
A TMT	Complete Schedules 1 thro						Cash Reconciliation : \$
тмт в	Complete Schedules 1 tillo	ougii 20 Belore Co	inpleting Statement A				
CH 1			ASSETS	Schedule	Start of Reporting Pe	eriod	End of Reporting Period
CH 2			ASSETS	Number	(A)		(B)
CH 3		22. Cash					
CH 4	_	23. Accounts Rec		1			
CH 5	_	24. Loans Receiv		2			
CH 6	ASSETS	25. U.S. Treasury	Securities				
CH 7	_	26. Investments		<u>5</u>			
CH 8	_	27. Fixed Assets		<u>6</u>			
CH 9	_	28. Other Assets		<u>Z</u>		Г	
CH 10		29. TOTAL ASSET	5			\$0	
CH 11 CH 12							
CH 13	_						
UMMARY	_		LIABILITIES	Schedule Number	Start of Reporting P (C)	eriod	End of Reporting Period (D)
CH 14		30. Accounts Pay	able	<u>8</u>			
CH 15	LIABILITIES	31. Loans Payabl	e	9			
CH 16	LIABILITIES	32. Mortgages Pa	yable				
CH 17	_	33. Other Liabiliti	es	10			
CH 18	-	34. TOTAL LIABIL	ITIES			\$0	
CH 19	-						
CH 20							
DDNL INFO		35. NET ASSETS(I	tem 29 Less Item 34)	1		\$0	
ALIDATION	- <u>-</u>	id-d Glisl-llati	to view or edit the text.				

LM-2 Statement B

ectronic Forms S	lome System						Log
schollic Forms a	system						
PAGE 1	Save & Calculate	nport	Add Attachments	~>	<u>Validate</u>	Help	Print This Page
PAGE 2	STATEMENT B - RECEIPT	S AND	DISBURSEMENTS				FILE NUMBER: 544-93
STMT A	Complete Schedules 1 Through 20) Before	Completing Statement B				
STMT B							
SCH 1	Item CASH RECEIPTS	SCH#	AMOUNT		ISBURSEMENTS	SCH#	AMOUNT
SCH 2	36. Dues and Agency Fees			50. Representa	ational Activities	<u>15</u>	S
SCH 3	37. Per Capita Tax			51. Political Act	ivities and Lobbying	16	S
SCH 4	38. Fees, Fines, Assessments, Work Permits			52. Contributio	ns, Gifts, and Grants	17	S
SCH 5	39. Sale of Supplies		Sale	s of Supplies neral Ov	erhead	18	Š
SCH 6	40. Interest			54. Union Admi		19	
SCH 7	41. Dividends				ITIISUTALIOTT		
SCH 8	42. Rents			55. Benefits		20	S
SCH 9	43. Sale of Investments and Fixed	3	9	56. Per Capita	Tax		
SCH 10	Assets			57. Strike Bene	efits		
SCH 11	44. Loans Obtained	9		58. Fees, Fines	, Assessments, etc.		
SCH 12	45. Repayments of Loans Made	2		59. Supplies fo	r Resale		
SCH 13	46. On Behalf of Affiliates for Transmittal to Them			60. Purchase o Fixed Assets	f Investments and	4	S
SUMMARY	47. From Members for Disbursement on Their Behalf			61. Loans Mad	e	2	S
SCH 14	48. Other Receipts	14		62. Repayment	of Loans Obtained	9	S
SCH 15	49, TOTAL RECEIPTS			63. To Affiliates	of Funds Collected on	i i	
SCH 16	49. TOTAL RECEIPTS	ļ ļ	•	ineir Benaii	** F.1 1 1		
SCH 17					of Individual Members		
SCH 18				65. Direct Taxe	!S		
SCH 19				66. Subtotal			
SCH 20					g Taxes and Payroll		3
ADDNL INFO				Deductions	y rakes and Payroll		
VALIDATION SUMMARY				67a. Total Withheld			
				67b. Less Tot	al		
				Disbursed 67c Total Wit	hheld But Not	r	
				Disbursed			\$
				68. TOTAL DISE Line 67c)	BURSEMENTS(Line 66-		S
	Form LM-2 (Revised 2010)						

ectronic Forms	System				
PAGE 1	Save & Calculate Import	Add Attachments	<u>Validate</u>	Help	Print This Page
PAGE 2	SCHEDULE 1 - ACCOUNTS RECEIV	ABLE AGING SCHEDULE	Add Account	s Receivable	FILE NUMBER:544-934
STMT A	Entity or Individual Name	Total Account Receivable	90-180 Days	180+ Days	Liquidated Account
STMT B	(A)	(B)	Past Due (C)	Past Due (D)	Receivable (E)
5CH 1	1		(0)	(5)	
5CH 2	2				
5CH 3	3				
5CH 4	4				
5CH 5	5				
SCH 6	6				
SCH 7	7				
5CH 8	8				
SCH 9	9				
SCH 10					
SCH 11	Total of all itemized accounts receivable				
SCH 12	Total from all other accounts receivable Totals (Total of Column(B) will be automatically				
SCH 13	entered in Item 23, Column (B))				
SUMMARY	AI - Additional Information has been provided. Click "AI" t *AI - Additional Information must be provided for this item.	o view or edit the text.			
	*AI - Additional Information must be provided for this item.	Click the "AI" to enter.			
SCH 14	Form LM-2 (Revised 2010)				
SCH 15	- Torri Err 2 (Revised 2019)				
SCH 16					
SCH 17					
SCH 18					
SCH 19					
SCH 20					
ADDNL INFO					
VALIDATION SUMMARY					

EFS Home > LM2 Ho	me								Log out
Electronic Forms S	stem								
PAGE 1		0 0 0-11-1-					P.4-4-	U-l- Bring Th	
PAGE 2		Save & Calculate	<u>Import</u>	Add Attach	ments	<u>va</u>	<u>llidate</u>	Help Print Th	is Page
STMT A	SCHI	EDULE 2 - LOANS	RECEIVAE	BLE		Add Loans Receivab	<u>le</u>	FILE	NUMBER:544-934
STMT B									
SCH 1									
					Loans		Repayments Re		Loans
SCH 2		low loans to officers, empl			Outstanding at Start of Period	Loans Made	Peri	iod er Than Cash	Outstanding at
SCH 3		at any time during the repo loans to business enterpri			(B)	During Period (C)	Cash Othe (D)(1)	(D)(2)	End of Period (E)
SCH 4	1			()					
SCH 5		Purpose:							
SCH 6		Security:							
SCH 7		Terms of Repayment:							
SCH 8	2	Name:							
SCH 9		Purpose:							
SCH 10		Security:							
SCH 11		Terms of Repayment:							
SCH 12	3	Wallie.							
SCH 13		Purpose:							
SUMMARY		Security:							
SCH 14	4	Terms of Repayment: Name:							
SCH 15		Purpose:							
		Security:							
SCH 16		Terms of Repayment:							
SCH 17	Total (of loans not listed above	2						
SCH 18	Total (of all lines above							
SCH 19	Totals	will be automatically en	tered in		Item 24	Item 61	Item 45	Item 69	Item 24
SCH 20	<	De accomacically en	icer eu iii		Column (A)			with Explanation	Column (B)
ADDNL INFO									•
VALIDATION SUMMARY	AI - A	dditional Information has been dditional Information must be p	provided, Click "A provided for this its	AI" to view or edit th em. Click the "AI" to	e text. o enter.				
SOFIFIARI									
	Forn	n LM-2 (Revised 2010)							

EFS Home > LM2 Ho	ome								Log out
Electronic Forms S	System								
PAGE 1		Save & Calculate	<u>Import</u>	Add Attac	chments	4>	Validate	Help	Print This Page
PAGE 2	SCHED	ULE 3 - SALE O	E INVESTM	ENTS AND) FIXED AS	SETS	Add Investments Ar	nd Fixed Assets Sales	FILE NUMBER:544-934
STMT A		cription (if land or bu	ildings, give loc		Cost		Book Value	Gross Sales Price	Amount Received
STMT B		(A)			(B)		(C)	(D)	(E)
SCH 1	1								
SCH 2	3								
SCH 3	4								
SCH 4	5								
SCH 5	6								
SCH 6	7								
SCH 7	8								
SCH 8	9								
SCH 9	10								
SCH 10									
SCH 11	Total of a	all lines above							
SCH 12				,		,		Less Reinvestments	
SCH 13			(The total fro	om Net Sales	Line will be aut	omatically e	entered in Item 43.)	Net Sales	
SUMMARY									
SCH 14									
SCH 15	Form Li	M-2 (Revised 2010)							
SCH 16									
SCH 17									
SCH 18									
SCH 19									
SCH 20									
ADDNL INFO									
VALIDATION SUMMARY									
SOLITARI									

EFS Home > LM2 Ho	ome						Log out
Electronic Forms Sy	ystem						
PAGE 1	Save & Calculate	Import	Add Attachments	1>	Validate	Help	Print This Page
PAGE 2							
STMT A	ASSETS	HASE OF INV	ESTMENTS AND FIXE		Add Investments And Purchases	Fixed Assets	FILE NUMBER:544-934
STMT B		tion (if land or buil	dings, give location)	_	Cost	Book Value	Cash Paid
SCH 1	1	(A)			(B)	(C)	(D)
SCH 2	2						
SCH 3	3						
<u>SCH 4</u>	4						
SCH 5	5						
SCH 6	6						
SCH 7	7 8						
SCH 8	9						
SCH 9	10						
SCH 10	Total of all lines above						
5CH 11						Less Reinvestments	
5CH 12		(The total fro	m Net Purchases Line will be a	automatically (entered in Item 60.) Net Purchases	
SCH 13							
SUMMARY	Form LM-2 (Revised 2010)						
SCH 14	Torri EM-2 (Nevised 2010)						
SCH 15							
SCH 16							
SCH 17							
SCH 18							
SCH 19							
SCH 20							
ADDNL INFO							
VALIDATION SUMMARY							
Somme							

EFS Home > LM2 H	ome							Log out
Electronic Forms 9	System							
PAGE 1	Save & Calculate	Import	Add Attachments	4>	Validate	Help	Print This Page	
PAGE 2	SCHEDULE 5 - INVES	TMENTS					FILE NUMBER:544-	934
STMT A	JOHN DOLL STATES		Description				Amount	
STMT B			(A)				(B)	
SCH 1		Marketable	Securities Add More Man	ketable Securities				
SCH 2	A. Total Cost							
SCH 3	B. Total Book Value							
SCH 4	C. List each marketable secu	rity which has a	book value over \$5,000 a	and exceeds 5% of	Line B.			
<u>SCH 5</u>	1							
SCH 6	2							
SCH 7	3							
SCH 8	4							
SCH 9	5							
SCH 10	6							
SCH 11	7							
SCH 12	8							
SCH 13	9							~
SUMMARY	<			1111)	>
SCH 14		Other Ir	nvestments Add More Oth	er Investments				
SCH 15	D. Total Cost							
SCH 16	E. Total Book Value							
SCH 17	F. List each other investment for which separate reports a	t which has a bo	ok value over \$5,000 and	exceeds 5% of Line	e E. Also, list each s	ubsidiary		
SCH 18	1							_
SCH 19	2							
SCH 20	3							
ADDNL INFO	4							
VALIDATION SUMMARY	5							
	6							
	7							
	8							
	Q							
	G. Total of Lines B and E (Tot	al will be autom	atically entered in Item 26	5, Column (B))				
	<			Ш				>

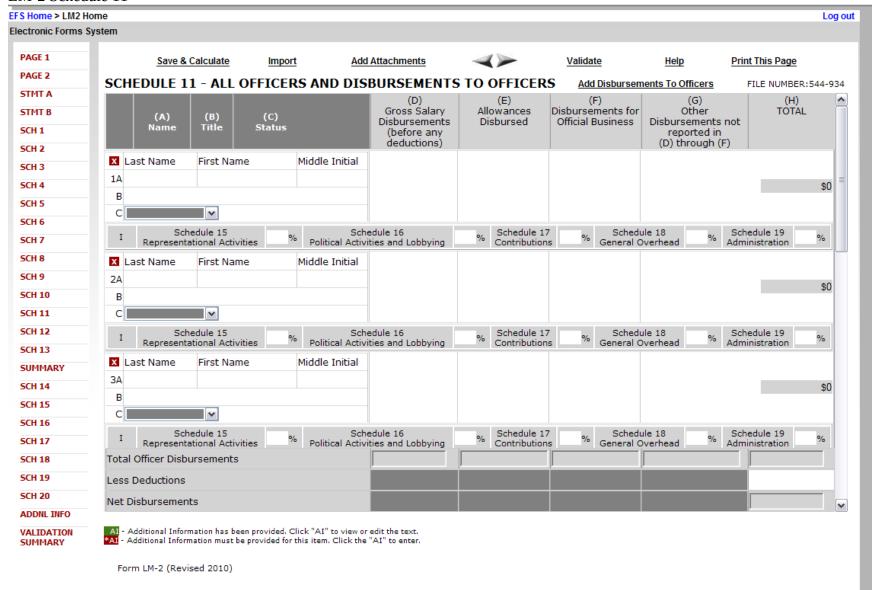
EFS Home > LM2 Ho	ome				Log out
Electronic Forms S	ystem				
PAGE 1	Save & Calculate Import A	Add Attachments	Validate	Help	Print This Page
PAGE 2		ida Attaorimonto	vandato	11015	
STMT A	SCHEDULE 6 - FIXED ASSETS		T-t- Di-ti		FILE NUMBER:544-934
STMT B	Description (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed	Book Value (D)	Value (E)
SCH 1	A.Land (give location)	Add Land	(C)		
SCH 2	1				
SCH 3	2				
SCH 4	3				
SCH 5	4				-
SCH 6	5				
SCH 7	6				
SCH 8	7				
SCH 9	8				
SCH 10	9				~
SCH 11	<	<u>,</u>			>
SCH 12	B. Buildings (give location)	Add Buildings			
SCH 13	1				
SUMMARY	2				
SCH 14	3				
SCH 15	4				
SCH 16	5				
SCH 17	6				
SCH 18	7				
SCH 19	8				
SCH 20	9				
ADDNL INFO	C. Automobiles and Other Vehicles				
VALIDATION	D. Office Furniture and Equipment				
SUMMARY	E. Other Fixed Assets				
	F. Totals of Lines A through E (Column (D) Total will automatically entered in Item 27, Column (B))	be			
	<				\
	Form LM-2 (Revised 2010)				

EFS Home > LM2 Ho	me							Log out	
Electronic Forms Sy	ystem								
PAGE 1		Save & Calculate	<u>Import</u>	Add Attachments	4>	<u>Validate</u>	<u>Help</u>	Print This Page	ı
PAGE 2	SCHE	DULE 7 - OTHER	RASSETS		Add Other As:	sets_		FILE NUMBER:544-934	
STMT A				Description				Book Value	
STMT B				(A)				(B)	
SCH 1	1								
SCH 2	3								п
SCH 3	4								
SCH 4	5								п
SCH 5	6								п
SCH 6	7								
SCH 7	8								
SCH 8	9								
SCH 9	10								
SCH 10	Total (T	otal will be automatic	ally entered in It	tem 28, Column(B))					
SCH 11									
SCH 12	Form	LM-2 (Revised 2010)							
SCH 13									
SUMMARY									
SCH 14									
SCH 15									
SCH 16									
SCH 17									
SCH 18									
SCH 19									
SCH 20									
ADDNL INFO									
VALIDATION SUMMARY									

ectronic Forms	System						Log
PAGE 1	Save & Calculate	mport	Add Attachments	4>	<u>Validate</u>	Help	Print This Page
PAGE 2	SCHEDULE 8 - ACCOUNT	S PAYABLE A	AGING SCHED	JLE	Add Accounts	s Payable	FILE NUMBER:544-934
STMT A	Entity or Individu	al Name	Total Acco	unt Payable	90-180 Days Past Due	180+ Days Past Due	Liquidated Account Payable
SCH 1	(A)		(B)	(C)	(D)	(E)
SCH 2	1						
	2						
SCH 3	3 4						
SCH 4	5						
SCH 5	6						
SCH 6	7 Accounts Payable Name 6						
SCH 7	8						
SCH 8	9						
SCH 9	10						
SCH 10	Total of all itemized accounts paya	ble					
SCH 11	Total from all other accounts paya	ble					
SCH 12	Totals (Total for Column (B) will be	automatically en	tered in				
SCH 13	Item 30, Column (D))		,		,		
SUMMARY	AI - Additional Information has been provi *AI - Additional Information must be provid	ided. Click "AI" to vie led for this item. Click	ew or edit the text. the "AI" to enter.				
SCH 14							
SCH 15	Form LM-2 (Revised 2010)						
SCH 16							
SCH 17							
SCH 18							
SCH 19							
SCH 20							
ADDNL INFO							
VALIDATION							
SUMMARY							

PAGE 1	Save & Calculate Im	nport Add Atta	chments	Validate	Help	Print This Page
PAGE 2	SCHEDULE 9 - LOANS PAY	ARIF	Add I	oans Payable		FILE NUMBER:544-93
STMT A	Some Doce 3 Control M	NOLE.	7144 2	- Carlo r ayabio		TIEE NOTIBERRATION SE
STMT B						
SCH 1						
SCH 2				Repayment Mad	de During Period	
SCH 3	Source of Loans Payable at Any	Loans Owed at	Loans Obtained			Loans Owed at
SCH 4	Time During the Reporting Period	Start of Period	During Period	Cash (D)(1)	Other Than Cash (D)(2)	End of Period
SCH 5	(A)	(B)	(C)	,	1 - 10-1	(E)
SCH 6	2					
5CH 7	3					
SCH 8	4					
SCH 9	5					
SCH 10	6					
SCH 11	7					
SCH 12	8					
SCH 13	9					
SUMMARY	Total Loans Payable					
SCH 14	Totals will be automatically	Item 31	Item 44	Item 62	Item 69	Item 31
SCH 15	entered in	Column (C)	reem 44		with Explanation	Column (D)
SCH 16	AI - Additional Information has been provide *AI - Additional Information must be provided	d. Click "AI" to view or edit t	he text.			
SCH 17	*AI - Additional Information must be provided	for this item. Click the "AI" t	to enter.			
SCH 18	Form LM-2 (Revised 2010)					
SCH 19						
SCH 20						
ADDNL INFO						
VALIDATION						

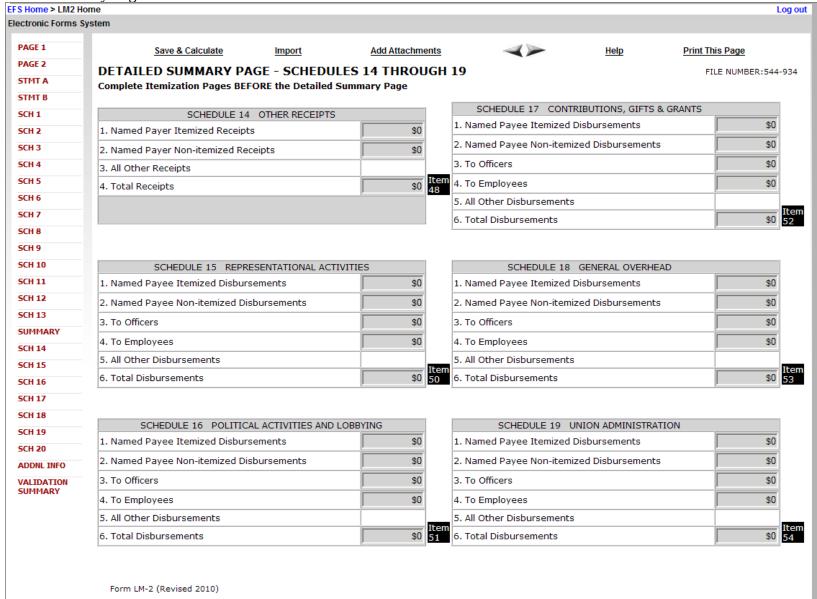
EFS Home > LM2 Ho	me							Log out
Electronic Forms Sy	/stem							
PAGE 1					10			B : 4 T : B
PAGE 2		Save & Calculate	<u>Import</u>	Add Attachments	~	<u>Validate</u>	Help	Print This Page
STMT A	SCHEE	OULE 10 - OTHE	R LIABILI	TIES	Add Other	<u>Liabilities</u>		FILE NUMBER:544-934
				Description (A)				Amount at End Of Period
STMT B				(A)				(B)
SCH 1	1							
SCH 2	2							
SCH 3	3							
SCH 4	4							
SCH 5	5							
SCH 6	6							
SCH 7	7							
SCH 8	8							
SCH 9	9							
SCH 10	10							
SCH 11	Total Otl	her Liabilities (Total w	vill be automati	cally entered in Item 33, Co	lumn (D))			
5CH 12	-							
SCH 13								
SUMMARY	Form L	M-2 (Revised 2010)						
SCH 14								
SCH 15								
SCH 16								
SCH 17								
SCH 18								
SCH 19								
SCH 20								
ADDNL INFO								
VALIDATION								
SUMMARY								



EFS Home > LM2 Hor	me							Log out
Electronic Forms Sy	stem							
PAGE 1	Save & Calcu	<u>llate</u> <u>Import</u>	Add Attachments	1>	Validate	Help	Print This Page	
PAGE 2	SCHEDULE 12 - I	DISBURSEMENT	S TO EMPLOYEES	Ado	d Disbursements To Employ	/ees	FILE NUMBER:54	14-934
STMT A			(D)	(E)	(F)	(G)	(H)	^
STMT B	(A) (B		Gross Salary Disbursements	Allowances Disbursed	Disbursements for Official Business	Other Disbursements	not	
SCH 1	Name Tit	le Other Pay	(before any deductions)	2.020.000		reported in (D) through (F		
SCH 2		Mic Mic	deductions)			(D) trilough (r	-)	
SCH 3	X Last Name		tial					∥≣
SCH 4	1A							\$0
SCH 5	В							
SCH 6	С							
SCH 7	I Schedule Representational		Schedule 16 itical Activities and Lobbying	% Schedul Contribu		le 18 verhead % A	Schedule 19 dministration	%
SCH 8	X Last Name		ddle					
SCH 9	2A	Ini	tial					
SCH 10	В							\$0
SCH 11	С							
<u>SCH 12</u>	, Schedule	15	Schedule 16	Schedul			Schedule 19	
SCH 13	Representational		itical Activities and Lobbying	% Contribu	itions % General Ov	verhead % A	dministration	%
SUMMARY	X Last Name		ddle tial					
SCH 14	3A							60
SCH 15	\$10,000 OR LESS	LL OTHER EMPLOYEES I	MAKING					
SCH 16	I Schedule		Schedule 16	Schedul			Schedule 19	%
SCH 17	Representationa		litical Acitivies and Lobbying	% Contribu	tions % General Ov	verhead % A	dministration	70
SCH 18	Total Employee Disbur	sements						
SCH 19	Less Deductions							_
SCH 20	Net Disbursements							~
ADDNL INFO	AI - Additional Information	has been provided. Click "A	I" to view or edit the text					
VALIDATION SUMMARY	*AI - Additional Information							
	Form LM-2 (Revised 2	010)						

EFS Home > LM2 Ho	ome							Log out
Electronic Forms S	ystem							
PAGE 1	Save & Calcu	ılate	Import	Add Attachments		Validate	Help	Print This Page
PAGE 2							пор	
STMT A	SCHEDULE 13 -	MEMBEI			Add Member	ship Statuses		FILE NUMBER:544-934
STMT B			Ca	tegory of Membership (A)			Number (B)	er Voting Eligibility (C)
SCH 1	1							Yes 🗆
SCH 2	2							Yes 🗆
SCH 3	3							Yes 🗆
SCH 4	4							Yes 🗆
	5							Yes 🗆
SCH 5	6							Yes 🗆
SCH 6	7							Yes 🗆
SCH 7	8							Yes □ Yes □
SCH 8	10							Yes 🗆
SCH 9	10							res L
SCH 10	Members (Total of all I	ines above	<u>:</u>)					
SCH 11	Agency Fee Payers*							
SCH 12	Total Members/Fee Pa	yers						
SCH 13	*Agency Fee Payers a	re not con	sidered membe	ers of the labor organizat	tion.		,	'
SUMMARY	AI - Additional Information	n has been pro	vided. Click "AI"	to view or edit the text.				
SCH 14	*AI - Additional Information	must be prov	ided for this item.	Click the "AI" to enter.				
SCH 15	Form LM-2 (Revised 2	2010)						
SCH 16								
SCH 17								
SCH 18								
SCH 19								
SCH 20								
ADDNL INFO								
VALIDATION SUMMARY								

LM-2 Summary Page



STMT A STMT B SCH 1	<u>s</u> SCHEDUI	ave & Calculate LE 14 - OTHE	Import R RECEIPTS	Add Attachments	4>	<u>Validate</u>	Help	Print This Page	Log out
PAGE 2 STMT A STMT B SCH 1	SCHEDUI			Add Attachments	4>	<u>Validate</u>	Help	Print This Page	
STMT A STMT B SCH 1	SCHEDUI			Add Attachments		Validato	ПСБ	Tille Tillo Tage	
STMT A STMT B SCH 1		LE 14 - OTHE	R RECEIPTS						
SCH 1	Complete It				Add Other R	<u>leceipts</u>		FILE NUMBER:	
	Complete It						Show Payer:	Dele	ete Payer
	Complete It								
SCH 2			BEFORE the Detai d Address	led Summary Page	Purpose	- I -	ate	Amount	_
SCH 3			a Address A)		(C)		(D)	(E)	
SCH 4	Name			1.					
SCH 5	P.O.Box			2.					
SCH 6	Street			3.					
SCH 7	City			4.					
SCH 8	State	~		5.					
SCH 9	Zip Code			6.					
SCH 10		More Receipts	For This Payer	7.					
SCH 11				8.					
SCH 12	(B)Type or C	Classification							
SCH 13					emized Transactions		The second secon		
SUMMARY					n-Itemized Transact				
SCH 14				Total of Schedul	All Transactions with e	i this Payee/Payer i	for this		
SCH 15				<		Ш			>
SCH 16									
SCH 17	Form LM-2	(Revised 2010)							
SCH 18									
5CH 19									
SCH 20									
ADDNL INFO									
VALIDATION SUMMARY									

EFS Home > LM2 H	Home					Log out
Electronic Forms	System					
PAGE 1	Save & Calculate Import Add Atta	chments		Validate	Help	Print This Page
PAGE 2	SCHEDULE 15 - REPRESENTATIONAL ACT					
STMT A	SCHEDULE 15 - REPRESENTATIONAL ACT.	IVITIES	Add	Representational Act		FILE NUMBER:544-934 Delete Payee
STMT B					Show Payee	: Delete Payee
SCH 1		_				
SCH 2	Complete Itemization Pages BEFORE the Detailed Summ Name and Address	ary Page	Purpose	Date		Amount
SCH 3	(A)		(C)	(D)		(E)
SCH 4	Name	1.				
SCH 5	P.O.Box	2.				
SCH 6	Street	3.				
SCH 7	City	4.				
SCH 8	State 💌	5.				
SCH 9	Zip Code	6. 7.				
SCH 10	More Disbursements For This Payee	8.				
SCH 11		9.				
SCH 12	(B)Type or Classification	10.				
SCH 13			emized Transactions	with this Dayee/Da	ver	
SUMMARY			on-Itemized Transact			
SCH 14			All Transactions with			
SCH 15		Schedul	e		101 (1115	
SCH 16						
SCH 17	Form LM-2 (Revised 2010)					
SCH 18						
SCH 19						
SCH 20						
ADDNL INFO						
VALIDATION SUMMARY						

FS Home > LM2 H	Home			Log ou	
lectronic Forms	System				
PAGE 1	Save & Calculate Import	Add Attachments	Validate He	elp Print This Page	
PAGE 2	SCHEDULE 16 - POLITICAL ACT				
STMT A	SCHEDULE 16 - POLITICAL ACT	IVITIES AND LOBBYING	Add Political Activities	FILE NUMBER: 544-934 Delete Payee	
STMT B			Show	Payee: Delete Payee	
SCH 1					
SCH 2	Complete Itemization Pages BEFORE the D Name and Address	Detailed Summary Page Purpose	Date	Amount	
SCH 3	(A)	(C)	(D)	(E)	
SCH 4	Name	1.			
SCH 5	P.O.Box	2.			
SCH 6	Street	3.			
SCH 7	City	4.			
SCH 8	State 💌	5.			
SCH 9	Zip Code	6.			
SCH 10	More Disbursements For This Pa	7. 8.			
SCH 11		9.			
SCH 12	(B)Type or Classification	10.			
SCH 13					
SUMMARY			ons with this Payee/Payer		
SCH 14			Total Non-Itemized Transactions with this Payee/Payer		
SCH 15		Schedule	with this Payee/Payer for this		
SCH 16					
SCH 17	Form LM-2 (Revised 2010)				
SCH 18	- 10111 LM-2 (Revised 2010)				
SCH 19					
SCH 20					
ADDNL INFO					
VALIDATION SUMMARY					

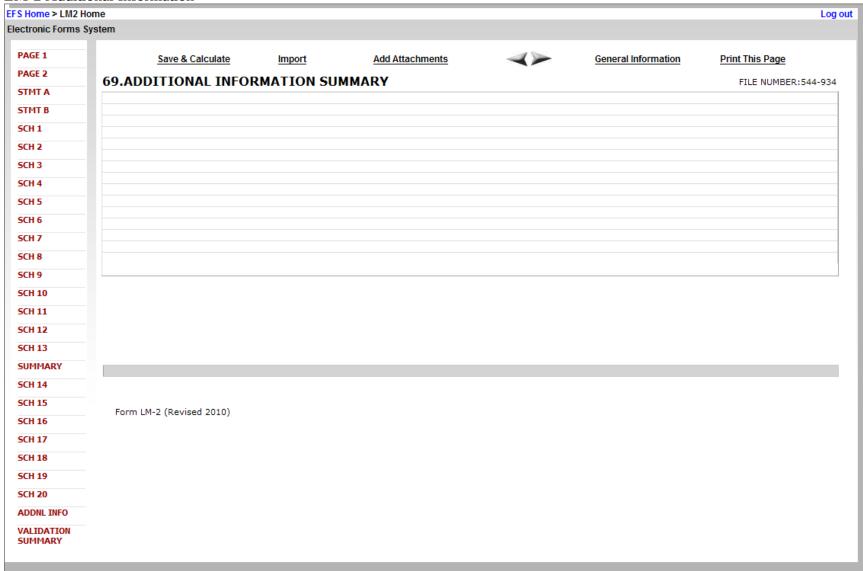
EFS Home > LM2 H	lome			Log out
Electronic Forms	System			
PAGE 1	Save & Calculate Import Add Attac	hments	<u>Validate</u> <u>Help</u>	Print This Page
PAGE 2	SCHEDULE 17 - CONTRIBUTIONS, GIFTS &	GRANTS	Add Gifts	FILE NUMBER:544-934
STMT A	SCHEDOLE 17 CONTRIBUTIONS, GIT 13 &	dianis		
STMT B			Show Pa	yee: Delete Payee
SCH 1				
SCH 2	Complete Itemization Pages BEFORE the Detailed Summa Name and Address	-1.5	Date	Amount
SCH 3	(A)	Purpose (C)	(D)	(E)
SCH 4	Name	1.		
SCH 5	P.O.Box	2.		
SCH 6	Street	3.		
SCH 7	City	4.		
SCH 8	State 🗸	5.		
SCH 9	Zip Code	6.		
SCH 10	More Disbursements For This Payee	7.		
SCH 11		8.		
SCH 12	(B)Type or Classification	9.		
SCH 13		10.		
SUMMARY		Total Itemized Transactions		
SCH 14		Total Non-Itemized Transact		
SCH 15		Total of All Transactions with Schedule	n this Payee/Payer for this	
SCH 16				
SCH 17	Form IM 2 (Parished 2010)			
SCH 18	Form LM-2 (Revised 2010)			
SCH 19				
SCH 20				
ADDNL INFO				
VALIDATION SUMMARY				

EFS Home > LM2 H	lome			Log out
Electronic Forms	System			
PAGE 1	Saura & Calmulata		Malidata II-la	Driet This Dans
PAGE 2	Save & Calculate Import Add Attac	enments	<u>Validate</u> <u>Help</u>	Print This Page
STMT A	SCHEDULE 18 - GENERAL OVERHEAD	<u>A</u>	add Overheads	FILE NUMBER:544-934
STMT B			Show Pa	yee: Delete Payee
SCH 1				
SCH 2	Complete Itemization Pages BEFORE the Detailed Summa	ry Page		
SCH 3	Name and Address (A)	Purpose (C)	Date (D)	Amount (E)
SCH 4	Name	1.	(0)	(E)
SCH 5	P.O.Box	2.		
SCH 6		3.		
	Street	4.		
SCH 7	City	5.		
SCH 8	State 💌	6.		
SCH 9	Zip Code	7.		
SCH 10	More Disbursements For This Payee	8.		
SCH 11		9.		
SCH 12	(B)Type or Classification	10.		
SCH 13		Total Itemized Transaction	ns with this Davee/Daver	
SUMMARY			actions with this Payee/Payer	,
SCH 14			rith this Payee/Payer for this	
SCH 15		Schedule	narano rayee/rayer for ano	
SCH 16				
SCH 17				
SCH 18	Form LM-2 (Revised 2010)			
SCH 19				
SCH 20				
ADDNL INFO				
VALIDATION SUMMARY				

EFS Home > LM2 H	ome						Log out
Electronic Forms 9	System						
PAGE 1	Save & Calculate	Import	Add Attachments		Validate	Help	Print This Page
PAGE 2						- I G G	
STMT A	SCHEDULE 19 - UNI	ON ADMINIST	RATION		Add Administration		FILE NUMBER:544-934
STMT B						Show Payee:	Delete Payee
SCH 1							
SCH 2	Complete Itemization Page		iled Summary Page	5			
SCH 3	Name	and Address (A)		Purpose (C)	Date (D)		Amount (E)
SCH 4	Name		1.				
SCH 5	P.O.Box		2.				
SCH 6	Street		3.				
SCH 7	City		4.				
SCH 8	State		5.				
SCH 9	Zip Code		6.				
SCH 10		ments For This Payee	7.				
SCH 11			8.				
SCH 12	(B)Type or Classification		9.				
SCH 13							
SUMMARY					s with this Payee/Pa	,	
SCH 14					ctions with this Paye		
SCH 15			Schedu	ile	th this Payee/Payer	ior triis	
SCH 16							
SCH 17	Form LM-2 (Revised 2010)						
SCH 18	10111 EN 2 (ROVISCO 2010)						
SCH 19							
SCH 20							
ADDNL INFO							
VALIDATION SUMMARY							

S Home > LM2 ectronic Forms							Loi
PAGE 1	Save & Calculate	<u>Import</u>	Add Attachments	4>	Validate	Help	Print This Page
PAGE 2	SCHEDULE 20 - BENE	FITS		Add Benefits			FILE NUMBER:544-934
STMT A		scription (A)			To Whom Paid		Amount
STMT B		(A)			(B)		(C)
SCH 1	1 2						
SCH 2	3						
SCH 3	4						
5CH 4	5						
SCH 5	6						
SCH 6	7						
SCH 7	8						
SCH 8	9						
SCH 9	10						
SCH 10	Total of all lines above (Total	will be automati	cally entered in Item 55.)			
SCH 11							
SCH 12	Form LM-2 (Revised 2010)						
SCH 13	Torri EN 2 (Novised 2010)						
SUMMARY							
SCH 14							
SCH 14							
SCH 15							
SCH 15 SCH 16							
SCH 15 SCH 16 SCH 17							
SCH 15 SCH 16 SCH 17 SCH 18							
SCH 15 SCH 16 SCH 17 SCH 18 SCH 19							
SCH 15 SCH 16 SCH 17 SCH 18 SCH 19 SCH 20							
SCH 15 SCH 16 SCH 17 SCH 18 SCH 19							

LM-2 Additional Information



LM-2 Validation Summary

EFS Home > LM2 Ho	ome				Log out
Electronic Forms S	ystem				
PAGE 1	Save & Calculate	Import	Add Attachments	4	Print This Page
PAGE 2					FILE NUMBER:544-934
STMT A					TILE NOMBERISAT 354
STMT B	VALIDATION SUMMARY PAGE				
SCH 1					
SCH 2					
SCH 3					
SCH 4					
SCH 5					
SCH 6					
SCH 7					
SCH 8					
SCH 9					
SCH 10					
SCH 11					
SCH 12					i
SCH 13					
SUMMARY					
SCH 14					
SCH 15	Form LM-2 (Revised 2010)				
SCH 16	, , , , , , , , , , , , , , , , , , , ,				
SCH 17					
SCH 18					
SCH 19					
SCH 20					
ADDNL INFO					
VALIDATION SUMMARY					