



*During the Reporting Period Did Your Organization:*

- |   |                          |                          |
|---|--------------------------|--------------------------|
|   | Yes                      | No                       |
| 10. Have a "subsidiary organization" as defined in Section X of the instructions? .....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Create or participate in the administration of a trust or other fund or organization, as defined in the instructions, which provides benefits for members or their beneficiaries?.....              | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Have a political action committee (PAC) fund? .....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Acquire or dispose of any goods or property in any manner other than by purchase or sale? .....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Have an audit or review of its books and records by an outside accountant or by a parent body auditor/representative? .....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Discover any loss or shortage of funds or other property? .....   | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>(Answer "Yes" even if there has been repayment or recovery.)</i>   |                          |                          |
| 16. Have any officer who was paid \$10,000 or more by your organization and also received \$10,000 or more as an officer or employee of another labor organization or of an employee benefit plan?..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Pay any employee salary, allowances, and other expenses which, together with any payments from affiliates, totaled more than \$10,000? .....  | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. Have loans totaling more than \$250 to any officer, employee, or member, or make any loans to a business enterprise? .....  | <input type="checkbox"/> | <input type="checkbox"/> |

*(If the answer to any of the above questions is "Yes," provide details in Item 56 on page 1 as explained in the instructions for each item.)*

19. How many members did your organization have at the end of the reporting period?
20. What is the maximum amount recoverable under your organization's fidelity bond for a loss caused by any officer or employee of your organization? \$
21. During the reporting period, did your organization have any changes in its constitution and bylaws (other than rates of dues and fees) or in practices/procedures listed in the instructions? .....
- |                          |                          |
|--------------------------|--------------------------|
| Yes                      | No                       |
| <input type="checkbox"/> | <input type="checkbox"/> |
- (If the constitution and bylaws have changed, attach two new dated copies. If practices/procedures have changed, see the instructions.)*
22. What is the date of your organization's next regular election of officers? MO   YEAR
23. What are your organization's rates of dues and fees?  
*(Enter a minimum and maximum if more than one rate applies for any line.)*

Rates of Dues and Fees				
Dues/Fees	Amount	Unit	Minimum	Maximum
(a) Regular Dues/Fees	\$	per		
(b) Initiation Fees	\$	per		
(c) Transfer Fees	\$	per		
(d) Work Permits	\$	per		

**24. ALL OFFICERS AND DISBURSEMENTS TO OFFICERS**

**Enter Amounts in Dollars Only — Do Not Enter Cents**

FILE NUMBER:    —

(A) Name <i>(List all persons who held office during the reporting period even if they received no salary or other disbursements. Use all capital letters.)</i>		Gross Salary (before taxes and other deductions) (D)	Allowances and Other Disbursements (E)	Total (F)									
(B) Title <i>(Enter title of officer, such as PRESIDENT or TREASURER.)</i>	Status (C)*												
1.	<table border="0"> <tr> <td>Last Name</td> <td>First Name</td> <td>MI</td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td colspan="2">Title <input type="text"/></td> <td>Status <input type="text"/></td> </tr> </table>	Last Name	First Name	MI	<input type="text"/>	<input type="text"/>	<input type="text"/>	Title <input type="text"/>		Status <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Last Name	First Name	MI											
<input type="text"/>	<input type="text"/>	<input type="text"/>											
Title <input type="text"/>		Status <input type="text"/>											
8. Totals from additional pages <i>(if any)</i>													
9. Totals of Lines 1 through 8													
10. Less Deductions			<input type="text"/>										
Enter the total from Line 11 in ..... Item 45 ⇨			11. Net Disbursements	<input type="text"/>									

\*Code for Status (C): past officer — P; continuing officer — C; new officer during the reporting period — N.

*(If any officer was not elected at a regular election in accordance with your organization's constitution and bylaws, explain in Item 56 on page 1.)*

**Enter Amounts in Dollars Only — Do Not Enter Cents**

FILE NUMBER:    —

STATEMENT A ASSETS AND LIABILITIES	ASSETS		LIABILITIES			
	Item	Start of Reporting Period (A)	End of Reporting Period (B)	Item	Start of Reporting Period (C)	End of Reporting Period (D)
	25. Cash .....	<input type="text"/>	<input type="text"/>	32. Accounts Payable.....	<input type="text"/>	<input type="text"/>
	26. Loans Receivable.....	<input type="text"/>	<input type="text"/>	33. Loans Payable.....	<input type="text"/>	<input type="text"/>
	27. U.S. Treasury Securities	<input type="text"/>	<input type="text"/>	34. Mortgages Payable.....	<input type="text"/>	<input type="text"/>
	28. Investments.....	<input type="text"/>	<input type="text"/>	35. Other Liabilities.....	<input type="text"/>	<input type="text"/>
	29. Fixed Assets.....	<input type="text"/>	<input type="text"/>	36. TOTAL LIABILITIES..	<input type="text"/>	<input type="text"/>
	30. Other Assets.....	<input type="text"/>	<input type="text"/>			
	31. TOTAL ASSETS.....	<input type="text"/>	<input type="text"/>	37. NET ASSETS <i>(Item 31 less Item 36)...</i>	<input type="text"/>	<input type="text"/>

STATEMENT B RECEIPTS AND DISBURSEMENTS	CASH RECEIPTS		CASH DISBURSEMENTS	
	Item	AMOUNT	Item	AMOUNT
	38. Dues .....	<input type="text"/>	45. To Officers <i>(from Item 24)</i> .....	<input type="text"/>
	39. Per Capita Tax .....	<input type="text"/>	46. To Employees <i>(less deductions)</i> .....	<input type="text"/>
	40. Fees, Fines, Assessments & Work Permits...	<input type="text"/>	47. Per Capita Tax .....	<input type="text"/>
	41. Interest & Dividends .....	<input type="text"/>	48. Office & Administrative Expense.....	<input type="text"/>
	42. Sale of Investments & Fixed Assets.....	<input type="text"/>	49. Professional Fees.....	<input type="text"/>
	43. Other Receipts .....	<input type="text"/>	50. Benefits.....	<input type="text"/>
	44. TOTAL RECEIPTS.....	<input type="text"/>	51. Contributions, Gifts & Grants.....	<input type="text"/>
	<p><b>If total receipts reported in Item 44 are \$250,000 or more, your organization must file Form LM-2 instead of this form.</b></p>		52. Purchase of Investments & Fixed Assets....	<input type="text"/>
			53. Loans Made.....	<input type="text"/>
			54. Other Disbursements.....	<input type="text"/>
			55. TOTAL DISBURSEMENTS.....	<input type="text"/>



ORGANIZATION NAME:

ENDING DATE OF PERIOD COVERED:

FILE NUMBER:  -

PAGE \_\_\_\_ OF \_\_\_\_ ADDITIONAL PAGES

## 24. ALL OFFICERS AND DISBURSEMENTS TO OFFICERS *(continued)*

(A) Name <i>(List all persons who held office during the reporting period even if they received no salary or other disbursements. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances and Other Disbursements (E)	Total (F)
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Last Name <input type="text"/> First Name <input type="text"/> MI <input type="text"/> Title <input type="text"/> Status <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Totals			