

Public reporting burden for this collection of information is estimated to average 21 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Persons are not required to respond to the collection of information unless it displays a valid OMB control number. Reporting of this information is mandatory and is required by the Labor-Management Reporting and Disclosure Act of 1959, as amended, for the purpose of public disclosure. As this is public information, there are no assurances of confidentiality. If you have any comments regarding this estimate or any other aspect of this information collection, including suggestions for reducing this burden, please send them to the U.S. Department of Labor, Office of Labor-Management Standards, Division of Interpretations and Standards, Room N-5609, 200 Constitution Avenue, NW, Washington, DC 20210.

**DO NOT SEND YOUR COMPLETED FORM LM-16 TO THE ABOVE ADDRESS.**

## **INSTRUCTIONS FOR FORM LM-16 TERMINAL TRUSTEESHIP REPORT**

### **GENERAL INSTRUCTIONS**

#### **I. WHY FILE**

The Labor-Management Reporting and Disclosure Act of 1959, as amended (LMRDA), the Civil Service Reform Act (CSRA), and the Foreign Service Act (FSA) require public disclosure of certain matters pertaining to a trusteeship which a labor organization imposes on a subordinate body. The Secretary, under the authority of the LMRDA, the CSRA, and the FSA has prescribed the filing of the Terminal Trusteeship Report, Form LM-16, to satisfy the requirement to disclose matters relating to the termination of a trusteeship.

#### **II. WHO MUST FILE**

Every labor organization subject to the Labor-Management Reporting and Disclosure Act of 1959, as amended (LMRDA), the Civil Service Reform Act (CSRA), or the Foreign Service Act (FSA) which has terminated a receivership, trusteeship, or other method of supervision or control, suspending the autonomy otherwise available to a subordinate labor organization under its constitution or bylaws, must file a Terminal Trusteeship Report, Form LM-16. This report must be filed whenever the following occur: (1) the subordinate labor organization is restored to the autonomy otherwise available to it under its constitution and bylaws and the constitution and bylaws of the labor organization which imposed the trusteeship, or (2) the subordinate labor organization loses its reporting identity through dissolution, merger, consolidation, or otherwise.

#### **III. WHAT FORMS TO FILE**

Form LM-16, Terminal Trusteeship Report, must be filed by the labor organization terminating the trusteeship. In addition, Form LM-2, Labor Organization Annual Report, must be filed with the Form LM-16. The Form LM-2 must cover the period from the beginning of the subordinate labor organization's fiscal year to the date of the termination of the trusteeship or the date of the subordinate labor organization's loss of reporting

identity. The Form LM-2 must contain the signatures of the trustees, in addition to the signatures of the president and treasurer or corresponding principal officers of the parent union. To add signature blocks to the Form LM-2 in the electronic filing system, click on the "Add Signature Block" button on the bottom of page 1. If paper filing is permitted, trustees should sign and date the Form LM-2 in the space below the officers' signatures in Items 70 and 71.

**NOTE:** *After termination of a trusteeship the subordinate labor organization becomes responsible for filing the Labor Organization Annual Report, Forms LM-2/3/4, and any amended Labor Organization Information Report, Form LM-1, required by section 201 of the LMRDA and section 458.3 of the regulations implementing the standards of conduct provisions of the CSRA. The subordinate labor organization may treat the date of termination of the trusteeship as the beginning of the new fiscal period to be covered in the next annual financial report and consequently need not, in its subsequent report, report any activities occurring prior to this date.*

#### **IV. WHO MUST SIGN THE REPORT**

Form LM-16 must be signed by the president and treasurer, or corresponding principal officers, of the parent labor organization **and** the trustees of the subordinate labor organization.

#### **V. WHEN TO FILE**

Form LM-16 and the accompanying Form LM-2 must be filed within 90 days after the termination of the trusteeship.

#### **VI. WHERE TO FILE**

The completed Form LM-16, with the accompanying Form LM-2, and any required attachments and additional pages must be mailed to the following address:

U.S. Department of Labor  
Office of Labor-Management Standards  
200 Constitution Avenue, NW, Room N-5603  
Washington, DC 20210

## VII. PUBLIC DISCLOSURE

Pursuant to the LMRDA, the U.S. Department of Labor is required to make all submitted reports available for public inspection. You may examine the Form LM-16 reports at, and purchase copies from, the OLMS Public Disclosure Room at the address listed in Section VI, or at the OLMS field office in whose jurisdiction the trustee labor organization is located. At the end of these instructions is a list of OLMS field offices.

## VIII. OFFICER RESPONSIBILITIES AND PENALTIES

Each individual required to sign Form LM-16 is personally responsible for its filing and accuracy. Under the LMRDA, these individuals are subject to criminal penalties for willful failure to file a required report and/or for false reporting. False reporting includes making any false statement or misrepresentation of a material fact while knowing it to be false, or for knowingly failing to disclose a material fact in a required report or in the information required to be contained in it or in any information required to be submitted with it.

The reporting labor organization and the individuals required to sign Form LM-16 are also subject to civil prosecution for violations of filing requirements. According to Section 210 of the LMRDA, "whenever it shall appear that any person has violated or is about to violate any of the provisions of this title, the Secretary may bring a civil action for such relief (including injunctions) as may be appropriate."

Under the CSRA and FSA and implementing regulations, false reporting and failure to report may result in administrative enforcement action and litigation. Individuals responsible for signing Form LM-16 are also subject to criminal penalties for false reporting under section 1001 of Title 18 of the United States Code.

## IX. RECORDKEEPING

The individuals required to file Form LM-16 are responsible for maintaining records which will provide in sufficient detail the information and data necessary to verify the accuracy and completeness of the report. You must retain the records for at least 5 years after the date you filed the report. You must retain any record necessary to verify, explain, or clarify the report including, but not limited to, vouchers, worksheets, receipts, and applicable resolutions.

Individuals are subject to penalties for willfully making any false entry in or concealing, withholding, or

destroying any books, records, or statements required to be kept.

## X. COMPLETING FORM LM-16

*Read these instructions carefully before completing Form LM-16.*

**Information Entry.** Entries on the report should be typed or clearly printed in black ink. Do not use a pencil or any other color ink.

**Additional Pages.** If you need additional space to complete an Item, enter the additional information on a separate letter-size (8.5 x 11) page(s), indicating the number of the item to which the information applies. Print clearly at the top of each attached page the following information: (1) full name of the subordinate labor organization formerly held in trusteeship, (2) its 6-digit file number as reported in Item 1, and (3) the date that the trusteeship was terminated as reported in Item 2. All attachments must be labeled sequentially 1 of \_\_\_, 2 of \_\_\_, etc.

### INFORMATION ITEMS 1 - 9

**1. FILE NUMBER** — Enter the 6-digit file number assigned by OLMS to the subordinate labor organization formerly held in trusteeship. If you do not know the organization's file number and cannot obtain it from prior reports, contact nearest OLMS field office listed at the end of these instructions to obtain the 6-digit file number.

**2. TRUSTEESHIP TERMINATION DATE** — Enter the month, day, and year the trusteeship was terminated.

**3. ADDRESS OF LABOR ORGANIZATION FORMERLY HELD IN TRUSTEESHIP** — Enter the full name and the complete mailing address of the labor organization formerly held in trusteeship, including any building and room number. Include the affiliation or organization name (for example, International Association of Factory Workers); any designation which specifically identifies the trustee organization (for example, Local, Lodge, Branch, Joint Council, District Council, etc.); and any designation number or other identifier by which the trustee organization is known (for example, Local 123 or Southeast Joint Council).

**4. FILE NUMBER OF LABOR ORGANIZATION TERMINATING THE TRUSTEESHIP**— Enter the file number of the labor organization that is terminating the trusteeship.

**5. NAME AND ADDRESS OF LABOR ORGANIZATION TERMINATING THE TRUSTEESHIP**— Enter the name and mailing address of the labor organization terminating the trusteeship, including any building and room number.

**6. CONVENTIONS AND ELECTIONS** — Select **YES** in Item 6(a) if, during the period since the last Trusteeship Report (Form LM-15) was filed, any convention or other policy-determining body met to which the trustee organization sent delegates, or would have sent delegates if it was not in trusteeship.

Select **YES** in Item 6(b) if, during the period since the last Trusteeship Report (Form LM-15) was filed, there was an election of officers of the labor organization terminating the trusteeship.

If **YES** for either Item 6(a) or Item 6(b) is selected, you must file a Report on Selection of Delegates and Officers, Form LM-15A.

A policy-determining body means any body convened by the parent labor organization or other labor organization which is composed of delegates from labor organizations and which formulates policy on such matters as wages, hours, or other conditions of employment or recommends or takes any action in the name of the participating labor organization. Such a body includes, for example, a district council, area conference, or joint board.

**7. METHOD OF TERMINATION OF THE TRUSTEESHIP** — Select Item 7(a) if the subordinate labor organization was dissolved. In Item 10, give a detailed explanation of the circumstances of the dissolution and its effective date.

Select Item 7(b) if the subordinate labor organization was merged or consolidated. In Item 10, give a detailed explanation of the circumstances relating to the merger or consolidation, its effective date, and list the name and mailing address of the labor organization into which the subordinate labor organization has been consolidated, merged, or otherwise absorbed.

Select Item 7(c) if the subordinate labor organization has been restored to the autonomy otherwise available to it under its constitution and bylaws and the constitution and bylaws of the labor organization which had imposed the trusteeship.

**Complete Items 8 and 9 only if Item 7(c) is selected.**

**8. METHOD OF OFFICER SELECTION** — Select Item 8(a) if the officers of the subordinate labor organization were elected by the membership.

Select Item 8(b) if the officers were selected by another method and explain that method in Item 10.

**9. OFFICERS** — Enter the names and titles of the officers of the subordinate labor organization.

#### **ADDITIONAL INFORMATION AND SIGNATURES**

**10. ADDITIONAL INFORMATION** — Use Item 10 to provide additional information as indicated on Form LM-16 and in these instructions. Enter the number of the item to which the information relates in the Item Number

column. See Section VIII (Completing Form LM-16) if there is not enough space in Item 10.

**11 - 14. SIGNATURES** — The completed Form LM-16 which is filed with OLMS must be signed by the president and treasurer or corresponding principal officers of the organization which has imposed the trusteeship, **and** all the trustees designated to supervise the affairs of the organization held in trusteeship. If the report is signed by an officer other than the president and/or treasurer, so indicate in Items 11 and/or 12 by (1) crossing out the pre-printed officer title(s) and (2) inserting the appropriate officer title(s). If the trustees have a different title such as administrator, cross out the printed title and enter the correct title in Items 13 and 14. If there are more than two trustees, the additional trustee(s) should sign and date the Form LM-15 in the space below the officers' and trustees' signatures in Items 11-14. You must have original signatures on the Form LM-16 filed with OLMS; stamped or mechanical signatures are unacceptable.

Enter the date the report was signed and the telephone number(s) used by the signatories to conduct official business. You do not have to report a private, unlisted telephone number.

#### ***If You Need Assistance***

The Office of Labor-Management Standards has district offices located in the following cities to assist you if you have any questions concerning LMRDA and CSRA reporting requirements.

Atlanta-Nashville  
Boston-Buffalo  
Chicago  
Cincinnati-Cleveland  
Dallas-New Orleans  
Denver-St. Louis  
Detroit-Milwaukee  
Los Angeles  
Philadelphia-Pittsburgh  
New York  
San Francisco-Seattle  
Washington

Copies of labor organization annual financial reports, employer reports, and labor relations consultant reports filed for the year 2000 and after can be viewed and printed at [www.unionreports.gov](http://www.unionreports.gov). Copies of reports for the year 1999 and earlier can be ordered through the website.

Information about OLMS, including key personnel and telephone numbers, compliance assistance materials, the text of the LMRDA, and related Federal Register and Code of Federal Regulations (CFR) documents, is also available on the Internet at: <http://www.olms.dol.gov>.

Additionally, you can call the OLMS national office at (202) 693-0123 or email [OLMS-Public@dol.gov](mailto:OLMS-Public@dol.gov).

**REMINDER...**

**File Form LM-2 with Form LM-16**

**Form LM-2** – You must file a completed Labor Organization Annual Report, Form LM-2, covering the period from the beginning of the subordinate labor organization's latest fiscal year through the termination date of the trusteeship with each Terminal Trusteeship Report, Form LM-16.

**Termination of the Subordinate Labor Organization**

– Be sure to check the box in Item 3 of the Form LM-2 if the subordinate labor organization has gone out of business by disbanding, merging into another labor organization, or being merged or consolidated with one or more labor organizations to form a new labor organization.

(Technical Revisions 3/2015; 6/2016; 11/2016; 4/2020)