

# FORM LM-15

## TRUSTEESHIP REPORT

For Official Use  
Only

This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 461.

**READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.**

|   |   |   |
|---|---|---|
| 1. File Number of Labor Organization Held in Trusteeship  | 2. Type of Report<br>Initial <i>(complete pages 1 through 4.)</i><br><br>Semiannual for period ending<br><i>(Complete pages 1 and 2 only.)</i> /      / | 3. Date Trusteeship Established<br><br>/      / |
| 4. Labor Organization Held in Trusteeship   |   |   |
| Affiliation or Organization Name  |   |   |
| Designation (Local, Lodge, etc.)  |   | P.O. Box, Bldg. and Room No., if any            |
| Designation Number <i>Prefix</i> <i>Number</i> <i>Suffix</i>  |   | Number and Street                               |
| Unit Name (if any)  |   | City  |
|   |   | State   |
|   |   | ZIP Code + 4                                    |
| 5. Labor Organization Imposing the Trusteeship  |   |   |
| Name  |   |   |
| File Number   |   |   |
| P.O. Box, Building and Room Number, if any  |   |   |
| Number and Street   |   |   |
| City  |   | State   |
|   |   | ZIP Code + 4                                    |
| 6. List the article(s) and section(s) of the constitution which specifically authorize imposition of the trusteeship: |   |   |
|   |   |   |

### Signatures

Each of the undersigned, duly authorized officials of the labor organization imposing the trusteeship over the above labor organization, declares, under penalty of perjury and other applicable penalties of law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. *(See the section on penalties in the instructions.)*

|  |   |  |   |
|--|---|--|---|
| 24. Signed _____<br><br>On _____<br>Date                      Telephone Number | President<br>(if other title,<br>see instructions.) | 26. Signed _____<br><br>On _____<br>Date                      Telephone Number | Trustee<br>(if other title,<br>see instructions.) |
| 25. Signed _____<br><br>On _____<br>Date                      Telephone Number | Treasurer<br>(if other title,<br>see instructions.) | 27. Signed _____<br><br>On _____<br>Date                      Telephone Number | Trustee<br>(If other title,<br>see instructions.) |

Name of Labor Organization Held In Trusteeship

File Number

7. Check the reason(s) for establishing or continuing the trusteeship:

- a. To correct corruption or financial malpractice.
- b. To assure the performance of collective bargaining agreements or other duties of a bargaining representative.
- c. To restore democratic procedures.
- d. Other.

8. Provide a detailed statement which explains each reason checked in Item 7, above.

9. During the period covered by this report

a. Did a convention or other policy-determining body meet to which the trustee labor organization sent delegates or would have sent delegates if not in trusteeship?

Yes                      No

*(if the answer is "Yes," complete and file Form LM-15A.)*

b. Did the labor organization imposing the trusteeship hold an election of officers?

Yes                      No

*(If the answer is "Yes," complete and file Form LM-15A.)*

|  |             |
|--|-------------|
| Name of Labor Organization Held In Trusteeship | File Number |
|--|-------------|

| Statement of Assets and Liabilities (Complete for Initial Report Only) |             |        |  |             |        |
|--|-------------|--------|--|-------------|--------|
| Assets as of Date Trusteeship Imposed                                  |             |        | Liabilities as of Date Trusteeship Imposed |             |        |
| Item   | From Sch. # | Amount | Item                                       | From Sch. # | Amount |
| 10. Cash   |             |        | 18. Accounts Payable                       |             |        |
| 11. Accounts Receivable  |             |        | 19. Loans Payable                          | 6           |        |
| 12. Loans Receivable   | 1           |        | 20. Mortgages Payable                      |             |        |
| 13. U.S. Treasury Securities   |             |        | 21. Other Liabilities                      | 4           |        |
| 14. Investments  | 2           |        | 22. TOTAL LIABILITIES                      |             |        |
| 15. Fixed Assets   | 5           |        | 23. NET ASSETS (Item 17 less Item 22)      |             |        |
| 16. Other Assets   | 3           |        |  |             |        |
| 17. TOTAL ASSETS   |             |        |  |             |        |

| Schedule 1 - Loans Receivable (See Instructions for Item 12)  |  |            |
|---|--|------------|
| (A) Name of officer, employee, member, or business enterprise | (B) Purpose of loan, security, if any, and terms for repayment | (C) Amount |
| 1.  |  |            |
| 2.  |  |            |
| 3.  |  |            |
| 4. Total from additional pages (if any)                       |  |            |
| 5. Total of loans not listed above                            |  |            |
| 6. Total of Lines 1 through 5                                 |  |            |

| Schedule 2 - Investments (See Instructions for Item 14)   |            | Schedule 3 - Other Assets (See Instructions for Item 16)      |                |
|---|------------|---|----------------|
| (A) Description   | (B) Amount | (A) Description   | (B) Book Value |
| <b>Marketable Securities:</b>   |            | 1.  |                |
| 1. Total Cost   |            | 2.  |                |
| 2. Total Book Value   |            | 3.  |                |
| 3. List each marketable security that has a book value over \$1,000 and exceeds 20% of Line 2.  |            | 4.  |                |
| (a)   |            | 5.  |                |
| (b)   |            | 6.  |                |
| (c) Total from additional pages (if any)  |            | 7. Total from additional pages (if any)                       |                |
|   |            | 8. Total of Lines 1 through 7                                 |                |
| <b>Other Investments:</b>   |            | Schedule 4 - Other Liabilities (See Instructions for Item 21) |                |
| 4. Total Cost   |            | (A) Description   | (B) Amount     |
| 5. Total Book Value   |            | 1.  |                |
| 6. List each other investment which has a book value over \$1,000 and exceeds 20% of Line 5. Also list each subsidiary or trust which is an investment. |            | 2.  |                |
| (a)   |            | 3.  |                |
| (b)   |            | 4.  |                |
| (c) Total from additional pages (if any)  |            | 5.  |                |
|   |            | 6.  |                |
| 7. Total of Lines 2 and 5   |            | 7. Total from additional pages (if any)                       |                |
|   |            | 8. Total of Lines 1 through 7                                 |                |

|  |             |
|--|-------------|
| Name of Labor Organization Held In Trusteeship | File Number |
|--|-------------|

| <b>Schedule 5 - Fixed Assets</b> (See instructions for Item 15) |                         |   |                |                       |
|---|-------------------------|---|----------------|-----------------------|
| (A) Description   | (B) Cost or Other Basis | (C) Total Depreciation or Amount Expensed | (D) Book Value | (E) Fair Market Value |
| 1. Land (give location)   |                         |   |                |                       |
| 2. Total from additional pages (if any)                         |                         |   |                |                       |
| 3. Buildings (give location)                                    |                         |   |                |                       |
| 4. Total from additional pages (if any)                         |                         |   |                |                       |
| 5. Automobiles and Other Vehicles                               |                         |   |                |                       |
| 6. Office Furniture and Equipment                               |                         |   |                |                       |
| 7. Other Fixed Assets   |                         |   |                |                       |
| 8. Total of Lines 1 through 7                                   |                         |   |                |                       |

| <b>Schedule 6 - Loans Payable</b> (See Instructions for Item 19) |   |
|--|---|
| (A) Source   | (B) Amount                              |
| 1.   |   |
| 2.   |   |
| 3.   |   |
| 4.   |   |
|  | 5. Total from additional pages (if any) |
|  | 6. Total of Lines 1 through 6           |