U.S. Department of Labor
Office of Labor-Management Standards
Washington, DC 20210

## FORM LM-4 LABOR ORGANIZATION ANNUAL REPORT

Form Approved
Office of Management and Budget
No. 1245-0003
Expires 09-30-2021

FOR USE ONLY BY LABOR ORGANIZATIONS WITH LESS THAN \$10,000 IN TOTAL ANNUAL RECEIPTS

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. 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.							
For Official Use Only	1. FILE NUMBER	2. PERIOD (	COVERED MO DAY	YEAR	3. (a) AMENDED — If this is an amended report, check here:		
		From			(b) HARDSHIP — If filing under hardship procedures check here:		
		Through			(c) TERMINAL — If this is a terminal report, check here:		
			8. MAILING AD	DRESS (Type o	or print in capital letters.)		
			First Name				
			Last Name				
			P.O. Box • Buil	ding and Room	Number (if any)		
			Number and St	treet			
4. AFFILIATION OR ORGANIZATION NAME			City				
5. DESIGNATION (Local, Lodge, etc.)	6. DESIGNATIO	N NUMBER	State ZIP	Code + 4			
7. UNIT NAME (if any)					-		
19. ADDITIONAL INFORMATION Item Number							
Each of the undersigned, duly authorized officers of 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 Section VI on penalties in the instructions.)							
20. SIGNED:	<b>3</b>		RESIDENT other title,	21. SIGNED:	TREASURER (If other title,		
	)		ee instructions.)	/	/ <u>( ) see instructions.)</u>		
Date	Telephone Number				Date Telephone Number		

Enter Amounts in Dollars Only — Do Not Enter Cents	]	FILE NUMBER:
Complete Items 9 through 18.		14. Enter the total value of your organization assets at the end of the reporting period
<ol><li>During the reporting period, did your organization have any changes in its constitution and bylaws</li></ol>		(cash, bank accounts, equipment, etc.) \$
(other than rates of dues and fees) or in practices/ procedures listed in the instructions?	Yes No	15. Enter the total liabilities (debts) of your organization at the end of the reporting
(If the constitution and bylaws have changed, attach two new dated copies. If practices/		period (unpaid bills, loans owed, etc.) \$
procedures have changed, see the instructions.)		Enter the total receipts of your organization     during the reporting period (dues, fees,
10. Did your organization change its rates of dues and fees during the reporting period?	Yes No	interest received, etc.). (If \$10,000 or more, your organization must file Form LM-2 or
(If "Yes," report the new rates in Item 19 on page 1.)		LM-3 instead of this form.) \$
11. Did your organization discover any loss or		organization during the reporting period (per
shortage of funds or property during the reporting period?	Yes No	capita tax, loans made, net payment to officers, payments for office supplies, etc.).
(If "Yes," provide details in Item 19 on page 1. Answer "Yes" even if there has been repayment		18. Enter the total payments to officers and
or recovery.)	0	employees during the reporting period (gross salaries, lost time payments,
12. Was your organization insured by a fidelity bond during the reporting period?	Yes No	allowances, expenses, etc.).
		Please be sure to:
If "Yes," enter the maximum amount recoverable under the bond for loss		Enter your union's 6-digit file number in Item 1.
caused by any person. \$		Report a time period of no more than one year in Item 2.
13. How many members did your		<ul> <li>Have your union's president and treasurer sign the Form LM-4 in Items 20 and 21.</li> </ul>
organization have at the end of the reporting period?		FILE ON TIME. Form LM-4 must be filed within 90 days after the end of your union's fiscal year.