

FORM LM-3 LABOR ORGANIZATION ANNUAL REPORT

FOR USE BY LABOR ORGANIZATIONS WITH LESS THAN \$250,000 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 MON DAY YEAR From Through	3. (a) AMENDED – If this is an amended report correcting a previously filed report, check here: <input type="checkbox"/> (b) TERMINAL – If your organization ceased to exist and this is its terminal report, see section XII of the instructions and check here: <input type="checkbox"/> (c) SUBSIDIARY – If this is a report for a subsidiary organization of your union as defined in section X of the instructions, check here: <input type="checkbox"/>
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4. AFFILIATION OR ORGANIZATION NAME		8. MAILING ADDRESS (Type or print in capital letters)	
5. DESIGNATION (Local, Lodge, etc.)		6. DESIGNATION NUMBER	
7. UNIT NAME (if any)		P.O. Box – Building and Room Number (if any)	
9. Are your organization's records kept at its mailing address? (If "No," provide address in Item 56.) Yes <input type="checkbox"/> No <input type="checkbox"/>		Number and Street	
		City	
		State	ZIP Code + 4
		First Name	

56. ADDITIONAL INFORMATION

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.)

57. SIGNED: _____ (If other title, see instructions.)

 Date Telephone Number

58. SIGNED: _____ (If other title, see instructions.)

 Date Telephone Number

COMPLETE ITEMS 10 THROUGH 23

FILE NUMBER:

10. During the reporting period did the labor organization have a ‘subsidiary organization’ as defined in section X of the instructions?

Yes No

11. During the reporting period did the labor organization 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?

Yes No

12. During the reporting period did the labor organization have a political action committee (PAC) fund?

Yes No

13. During the reporting period did the labor organization acquire or dispose of any assets in any manner other than by purchase or sale?

Yes No

14. During the reporting period did the labor organization have an audit or review of its books and records by an outside accountant or by a parent body auditor/representative?

Yes No

15. During the reporting period did the labor organization discover any loss or shortage of funds or other assets? (Answer “Yes” even if there has been repayment or recovery.)

Yes No

16. During the reporting period did the labor organization 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?

Yes No

17. During the reporting period did the labor organization pay any employee salary, allowances, and other expenses which, together with any payments from affiliates, totaled more than \$10,000?

Yes No

18. During the reporting period did the labor organization have loans totaling more than \$250 to any officer, employee, or member, or make any loans to a business enterprise?

Yes No

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 the labor organization have any changes in its constitution and bylaws, other than the rates of dues and fees, or in practices/procedures listed in the instructions? (If the constitution and bylaws

Yes No

22. What is the date of your organization’s next regular election of officers?

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		

If the answer to any of the above questions is “Yes”, provide details in Item 56 (Additional Information) as explained in the instructions for each item.

24. ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

Enter Amounts in Dollars Only – Do Not Enter Cents

FILE NUMBER:

(A) Name (List all persons who held office during the reporting period even if they received no salary or other disbursements. Use all capital letters.)				Gross Salary (before taxes and other deductions) (D)	Allowances and Other Disbursements (E)	Total (F)
(B) Title (Enter title of officer, such as PRESIDENT or TREASURER.)		(C) Status *				
1.	Last Name	First Name	Middle Initial			
	Title		Status			
2.	Last Name	First Name	Middle Initial			
	Title		Status			
3.	Last Name	First Name	Middle Initial			
	Title		Status			
4.	Last Name	First Name	Middle Initial			
	Title		Status			
5.	Last Name	First Name	Middle Initial			
	Title		Status			
6.	Last Name	First Name	Middle Initial			
	Title		Status			
7.	Last Name	First Name	Middle Initial			
	Title		Status			
8.	Totals from additional pages (if any)					
9.	Totals of Lines 1 through 8					
					10. Less Deductions	
The Total from Line 11 will be entered in Item 45					11. Net Disbursements	
* Code for (C) Status: 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			32. Accounts Payable		
	26. Loans Receivable			33. Loans Payable		
	27. U.S. Treasury Securities			34. Mortgages Payable		
	28. Investments			35. Other Liabilities		
	29. Fixed Assets			36. TOTAL LIABILITITES		
	30. Other Assets					
31. TOTAL ASSETS			37. NET ASSETS (Item 31 less Item 36)			

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

56. ADDITIONAL INFORMATION

FILE NUMBER: