April 18, 2019 DOL Home > OLMS > Public Disclosure Home > Search Criteria > Report

Printable View

FORM LM-2 LABOR ORGANIZATION ANNUAL **REPORT**

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

MUST BE USED BY LABOR ORGANIZATIONS WITH \$250,000 OR MORE IN TOTAL ANNUAL RECEIPTS AND LABOR ORGANIZATIONS IN TRUSTEESHIP

Form Approved Office of Management and Budget No. 1245-0003 Expires: 10-31-2013

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.						
	READ IH	IE INS	TRUCTIONS CAL	KEFUL	LY BEFORE PREPARING THIS R	REPORT.	
For Official Use Only	1. FILE NUMBER 1. FILE NUMBER NUMBER 1. FILE NUMBER NUMBER NUMBER 1. FILE NUMBER NUMB	PER From Throug	10/01/2011 h 09/30/2012	(b)	AMENDED - Is this an amended HARDSHIP - Filed under the har TERMINAL - This is a terminal re	dship procedures:	No No No
4. AFFILIATION O	R ORGANIZATION NA	AME			8. MAILING ADDRESS (Type or	print in capital letters)	
	NS WORKERS AFL-CI				First Name	Last Name	
Commonior trong trongers and a cro							
5. DESIGNATION (Local, Lodge, etc.) 6. DESIGNATION NBR		NBR	ARTHUR	DELANNI			
LOCAL UNION	(=====, ====,	1	4156		DOD D "!!" ID N	·	
LOOKE ONION			1100		P.O Box - Building and Room Number		
7. UNIT NAME (if	any)				ROOM 601		
					Number and Street		
					352 SEVENTH AVENUE		
					552 SEVENTITAVENOE		
					City		
Are your organization's records kept at its mailing address? Yes			NEW YORK				
			Yes	NEW TORK			
			State	ZIP Code + 4			
					NY	10001	
						10001	

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 information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned individual's knowledge and belief, true, correct and complete (See Section V on penalties in the instructions.)
70. SIGNED: Arthur De lanni Pl
Date: Dec 27, 2012 Telephone Number: 212-533-2000 TREASURER

PRESIDENT 71. SIGNED: Louis Garafalo T 00 Date: Dec 27, 2012 Telephone Number: 212-967-2305

ITEMS 10 THROUGH 21

10. During the reporting period did the labor organization create or participate in the administration of a trust or a fund or organization, as defined in the instructions, which provides benefits for members or beneficiaries?

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

11(b). During the reporting period did the labor organization have a subsidiary organization as defined in Section X of these Instructions?

12. 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?

13. 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.)

14. What is the maximum amount recoverable under the labor organization's fidelity bond for a loss caused by any officer, employee or agent of the labor organization who handled union funds?

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

16. Were any of the labor organization's assets pledged as security or encumbered in any way at the end of the reporting period?

17. Did the labor organization have any contingent liabilities at the end of the reporting period?

18. During the reporting period did the labor organization have any changes in its constitution or bylaws, other than rates of dues and fees, or in practices/procedures listed in the instructions?

19. What is the date of the labor organization's next regular election of officers?

Form LM-2 (Revised 2010)

FILE NUMBER: 003-105
20. How many members did the labor organization have at the end of the reporting period?

21. What are the labor organization's rates of dues and fees?

	Rates of Dues and Fees								
Dues/Fees	Amount		Unit	Minimum	Maximum				
(a) Regular Dues/Fees	.69% SCALE	per	MONTH	500	900				
(b) Working Dues/Fees		per							
(c) Initiation Fees	300	per			EAL				
(d) Transfer Fees		per							
(e) Work Permits		per							

\$500,000

No

Yes

No

No

Yes

No

No

No

No

11/2014

FILE NUMBER: 003-105

STATEMENT A - ASSETS AND LIABILITIES

ASSETS

ASSETS	Schedule Number	Start of Reporting Period (A)	End of Reporting Period (B)
22. Cash		\$65,610	\$108,231
23. Accounts Receivable	1		\$0
24. Loans Receivable	2		
25. U.S. Treasury Securities		\$1,735,411	\$3,379,851
26. Investments	5	\$1,813,962	
27. Fixed Assets	6	\$49,260	\$41,866
28. Other Assets	7	\$87,958	\$87,368
29. TOTAL ASSETS		\$3,752,201	\$3,617,316

LIABILITIES

LIABILITIES	Schedule Number	Start of Reporting Period (A)	End of Reporting Period (B)
30. Accounts Payable	8	\$24,958	\$24,495
31. Loans Payable	9		
32. Mortgages Payable		\$0	\$0
33. Other Liabilities	10	\$58,108	\$96,642
34. TOTAL LIABILITIES		\$83,066	\$121,137

	35. NET ASSETS	\$3,669,135	\$3,496,179
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STATEMENT B - RECEIPTS AND DISBURSEMENTS

FILE NUMBER: 003-105

CASH RECEIPTS	SCH	AMOUNT	CASH DISBURS	EMENTS	SCH	AMOUNT
36. Dues and Agency Fees		\$57,042	50. Representational Activitie	es	15	\$374,919
37. Per Capita Tax			51. Political Activities and Lo		16	\$3,288
38. Fees, Fines, Assessments, Work Permits		\$0	52. Contributions, Gifts, and	Grants	17	\$3,288
39. Sale of Supplies		\$0	53. General Overhead		18	\$251,112
40. Interest				19	\$40,806	
41. Dividends		ψ30,133	55. Benefits		20	\$91,011
		φυ	56. Per Capita Tax			\$44,862
42. Rents		\$0	57 Strike Benefits			\$0
43. Sale of Investments and Fixed Assets	3	\$1,430,804	58. Fees, Fines, Assessmen		\$0	
44. Loans Obtained	9		59. Supplies for Resale		\$0	
45. Repayments of Loans Made	2	****	60 Durchage of Investments	4	\$1,076,088	
46. On Behalf of Affiliates for Transmittal to Them		\$248,912	61. Loans Made			+ 1,0 1 0,000
47. From Members for Disbursement on Their		\$54.402	262. Repayment of Loans Obtained		9	
Behalf		****	63. To Affiliates of Funds Col	lected on Their		****
48. Other Receipts	14	\$340,947	63. To Affiliates of Funds Col Behalf			\$275,694
49. TOTAL RECEIPTS		\$2 228 26U	64. On Behalf of Individual M			\$0
			65. Direct Taxes			\$17,006
			66. Subtotal			\$2,178,074
			67. Withholding Taxes and P	ayroll Deductions		
			67a. Total Withheld	\$93,348		
			67b. Less Total Disbursed	\$100,913		
			67c. Total Withheld But Not Disbursed			-\$7,565
			68. TOTAL DISBURSEMENT	TS		\$2,185,639

SCHEDULE 1 - ACCOUNTS RECEIVABLE AGING SCHEDULE

FILE NUMBER: 003-105

Entity or Individual Name (A)	Total Account Receivable (B)	90-180 Days Past Due (C)	180+ Days Past Due (D)	Liquidated Account Receivable (E)
Total of all itemized accounts receivable	\$0	\$0	\$0	\$0
Totals from all other accounts receivable				
Totals (Total of Column (B) will be automatically entered in Item 23, Column(B))	\$0	\$0	\$0	\$0

SCHEDULE 2 - LOANS RECEIVABLE

FILE NUMBER: 003-105

List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to business enterprises regarless of amount. (A)		Loans Made During Period (C)	Pe	Received During riod Other Than Cash (D)(2)	
Total of loans not listed above					
Total of all lines above	\$0	\$0	\$0	\$0	\$0
Totale will be automatically entered in	Item 24	Item 61	Item 45	Item 69	Item 24
Totals will be automatically entered in	Column (A)			with Explanation	Column (B)

SCHEDULE 3 - SALE OF INVESTMENTS AND FIXED ASSETS

FILE NUMBER: 003-105

Description (if land or buildings give location)	Cost	Book Value	Gross Sales Price	Amount Received
(A)	(B)	(C)	(D)	(E)
SALES OF INVESTMENTS	\$1,420,561	\$1,420,561	\$1,420,561	\$1,420,561
GAINS ON SALES OF INVESTMENTS	\$10,243	\$10,243	\$10,243	\$10,243
Total of all lines above	\$1,430,804	\$1,430,804	\$1,430,804	\$1,430,804
	\$0			
(The total from Net Sales Line	\$1,430,804			

SCHEDULE 4 - PURCHASE OF INVESTMENTS AND FIXED ASSETS

FILE NUMBER: 003-105

Description (if land or buildings, give location)	Cost	Book Value	Cash Paid
(A)	(B)	(C)	(D)
INVESTMENTS PURCHASED	\$1,076,088	\$1,076,088	\$1,076,088
Total of all lines above	\$1,076,088	\$1,076,088	\$1,076,088
		Less Reinvestments	\$0
(The total from Net Purchases Line will be automati	Net Purchases	\$1,076,088	

SCHEDULE 5 - INVESTMENTS

FILE NUMBER: 003-105

Description (A)	Amount (B)
Marketable Securities	
A. Total Cost	
B. Total Book Value	
C. List each marketable security which has a book value over \$5,000 and exceeds 5% of Line B.	
Other Investments	
D. Total Cost	
E. Total Book Value	
F. List each other investment which has a book value over \$5,000 and exceeds 5% of Line E. Also, list each subsidiary for which separate reports are attached.	
G. Total of Lines B and E (Total will be automatically entered in Item 26, Column(B))	\$0

SCHEDULE 6 - FIXED ASSETS

FILE NUMBER: 003-105

Description (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed (C)	Book Value (D)	Value (E)
A. Land (give location)	\$0		\$0	\$0
B. Buildings (give location)	\$0	\$0	\$0	\$0
C. Automobiles and Other Vehicles	\$29,768	\$0	\$29,768	\$29,768
D. Office Furniture and Equipment	\$12,097	\$0	\$12,097	\$12,097
E. Other Fixed Assets	\$1	\$0	\$1	\$1
F. Totals of Lines A through E (Column(D) Total will be automatically entered in Item 27, Column(B))	\$41,866	\$0	\$41,866	\$41,866

SCHEDULE 7 - OTHER ASSETS

FILE NUMBER: 003-105

Description	Book Value
(A)	(B)
INTEREST RECEIVABLE	\$22,070
SECURITY DEPOSIT	\$28,753
PREPAID EXPENSES	\$17,489
DUE FROM AFFILIATES	\$19,056
Total (Total will be automatically entered in Item 28, Column(B))	\$87,368

SCHEDULE 8 - ACCOUNTS PAYABLE AGING SCHEDULE

FILE NUMBER: 003-105

Entity or Individual Name (A)	Total Account Payable (B)	90-180 Days Past Due (C)	180+ Days Past Due (D)	Liquidated Account Payable (E)
ACCOUNTS PAYABLE	\$24,495	\$0	\$0	\$0
Total for all itemized accounts payable	\$24,495	\$0	\$0	\$0
Total from all other accounts payable	\$0	\$0	\$0	\$0
Totals (Total for Column(B) will be automatically entered in Item 30, Column(D))	\$24,495	\$0	\$0	\$0

SCHEDULE 9 - LOANS PAYABLE

FILE NUMBER: 003-105

Source of Loans Payable at Any Time During the Reporting Period (A)	Loans Owed at Start of Period (B)	Loans Obtained During Period (C)	Repayment During Period Cash (D)(1)	Repayment During Period Other Than Cash (D)(2)	Loans Owed at End of Period (E)
Total Loans Payable	\$0	\$0	\$0	\$0	\$0
Totals will be automatically entered in	Item 31	Item 44	Item 62	Item 69	Item 31
Totals will be automatically efficied in	Column (C)			with Explanation	Column (D)

SCHEDULE 10 - OTHER LIABILITIES

FILE NUMBER: 003-105

Description	Amount at End of Period
(A)	(B)
DUE TO RETIREES CLUB	\$18,803
DUE TO CWA	\$46,001
DUE TO AFFILIATE	\$19,950
EXCHANGE	\$11,888
Total Other Liabilities (Total will be automatically entered in Item 33, Column(D))	\$96,642

SCHEDULE 11 - ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

	(A) Name	(B) Title		(C) Status	Disbu (bef	(D) s Salar rsemer ore any uctions	nts /	(E) Allowances Disbursed		for	(F) ursements r Official usiness	re	(G) Other rseme ported throug	nts not in	-	(H) FOTAL
В	DE IANNI,AI P <mark>RESIDENT</mark> C	RTHUR				\$189,	458	\$	0		\$28,718			\$0		\$218,176
ш	Schedule 15 Representatio	nal Activities	85 %	Schedule 16 Political Activ		1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr		10 %
В	BIENIAS , KA FORMER SEC P		REAS			\$42,	413	\$	0		\$170			\$0		\$42,583
	Schedule 15 Representatio	nal Activities	85 %	Schedule 16 Political Activ		1 %	1	nedule 17 ntributions	ľ	1 %	Schedule 1 General Ov		3 %	Schedule Administr		10 %
В	MURRAY, JA VICE PRESID C						\$0	\$	0		\$2,952			\$0		\$2,952
	Schedule 15 Representatio	nal Activities	90 %	Schedule 16 Political Activ		1 %		nedule 17 ntributions	ľ	1 %	Schedule 1 General Ov		3 %	Schedule Administr		5 %
	GARAFALO , SECT-TREAS C			,,			\$0	\$	o		\$2,528			\$0		\$2,528
	Schedule 15 Representatio	nal Activities	90 %	Schedule 16 Political Activ		1 %		nedule 17 ntributions	ľ	1 %	Schedule 1 General O		3 %	Schedule Administr		5 %
	LO MONTE , CHAIRMAN- E C		IITTEE				\$0	\$	0		\$4,836			\$0		\$4,836
	Schedule 15 Representatio	nal Activities	90 %	Schedule 16 Political Activ		1 %		nedule 17 ntributions	ľ	1 %	Schedule 1 General Ov		3 %	Schedule Administr		5 %
В	RODAK,MA SECTY- EXEC C		EE				\$0	\$	0		\$1,667			\$0		\$1,667
ш	Schedule 15 Representatio	nal Activities	90 %	Schedule 16 Political Activ		1 %		nedule 17 ntributions	ľ	1 %	Schedule 1 General Ov		3 %	Schedule Administr		5 %
В	HEDGECOKE EXECUTIVE (C						\$0	\$	0		\$915			\$0		\$915
	Schedule 15 Representatio	nal Activities	90 %	Schedule 16 Political Activ		1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr		5 %
В	MARTINEZ , EXECUTIVE (C						\$0	\$	0		\$734					\$734
ш	Schedule 15 Representatio	nal Activities	90 %	Schedule 16 Political Activ		1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr		5 %
	NATUSCH , E EXECUTIVE (C						\$0	\$	0		\$1,029			\$0		\$1,029
	Schedule 15 Representatio	nal Activities	90 %	Schedule 16 Political Activand Lobbying	rities	1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr		5 %
В	MANTLEMAN RECORDING C		Υ				\$0	\$	0		\$2,340			\$0		\$2,340
	Schedule 15 Representatio	nal Activities	90 %	Schedule 16 Political Activ	ities	1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr		5 %
_	tal Officer Dis		;			\$231	,871	\$	0		\$45,889	9		\$0		\$277,760
_	ss Deduction	_														
Ne	t Disburseme	nts														\$277,760

SCHEDULE 12 - DISBURSEMENTS TO EMPLOYEES

FILE NUMBER: 003-105

	(A) Name	(B) Title	(C) Other Payer	Disb (be	(D) oss Sala ourseme efore are duction	ents ny	(E) Allowances Disbursed		(F) Disbursemer for Official Business		no	(G) Disburt t report) throug		(H) TOTA	AL.
A B C	DE IANNI , ST REPRESENTA NONE				\$50	0,092		\$0	\$1,	038			\$0	\$	51,130
ı	Schedule 15 Representatior	nal Activities	80 % Schedule 16 Political Activi and Lobbying		1 %	l .	dule 17 ributions	1	% Schedule General (head	3 %	Schedule Administ		15 %
	TALS RECEIV 0,000 OR LESS		OYEES MAKING												\$0
I	Schedule 15 Representatior	nal Activities	Schedule 16 Political Activi	ties a	nd Lob	bying	Sched Contrib				le 18 I Over	head		nedule 19 ministration	
To	tal Employee l	Disburseme	nts		\$50	,092	\$	0	\$1,03	38			\$0) \$	51,130
Le	ss Deductions	3						\perp							
Ne	t Disburseme	nts												\$	51,130

SCHEDULE 13 - MEMBERSHIP STATUS

FILE NUMBER: 003-105

Category of Membership	Number	Voting Eligibility				
(A)	(B)	(C)				
VOTING MEMBERS	334	Yes				
Members (Total of all lines above)	334					
Agency Fee Payers*	0					
Total Members/Fee Payers	334					
Agency Fee Payers are not considered members of the labor organization.						

DETAILED SUMMARY PAGE - SCHEDULES 14 THROUGH 19

SCHEDULE 14 OTHER RECEIPTS	
Named Payer Itemized Receipts	\$168,834
2. Named Payer Non-itemized Receipts	\$172,113
3. All Other Receipts	\$0
4. Total Receipts	\$340,947

ITIES
\$87,927
\$0
\$236,947
\$40,904
\$9,141
\$374,919
BBYING
\$0
\$0
\$2,777
\$511
\$0
\$3,288

Form LM-2 (Revised 2010)

SCHEDULE 17 CONTRIBUTIONS, GIFTS & GRAN					
Named Payee Itemized Disbursements	\$0				
Named Payee Non-itemized Disbursements	\$0				
3. To Officers	\$2,777				
4. To Employees	\$511				
5. All Other Disbursements	\$0				
6. Total Disbursements	\$3,288				

FILE NUMBER: 003-105

SCHEDULE 18 GENERAL OVERHEAD	SCHEDULE 18 GENERAL OVERHEAD						
Named Payee Itemized Disbursements	\$197,654						
Named Payee Non-itemized Disbursements	\$26,648						
3. To Officers	\$8,332						
4. To Employees	\$1,534						
5. All Other Disbursements	\$16,944						
6. Total Disbursements	\$251,112						
SCHEDULE 19 UNION ADMINISTRATION	1						
Named Payee Itemized Disbursements	\$0						
Named Payee Non-itemized Disbursements	\$0						
3. To Officers	\$26,926						
4. To Employees	\$7,670						
5. All Other Disbursements	\$6,210						
6. Total Disbursements	\$40,806						

SCHEDULE 14 - OTHER RECEIPTS

Name and Address			
(A)			
BOSTON TYPO # 13	-		
	Purpose	Date	Amount
520 DORCHESTER AVENUE	(C)	(D)	(E)
SOUTH BOSTON	MERGER INCOME	05/15/2012	\$152,275
MA	Total Itemized Transactions with this Payee/Payer		\$152,275
02127	Total Non-Itemized Transactions with this Payee/Pa		\$0
Type or Classification	Total of All Transactions with this Payee/Payer	for This Schedule	\$152,275
(B)			
MERGER INCOME	-		
Name and Address			
(A)			
EXCHANGES WITH OTHER FUNDS	-		
Exertitives with other order	Purpose	Date	Amount
352 SEVENTH AVENUE	(C)	(D)	(E)
NEW YORK	Total Itemized Transactions with this Payee/Payer	(-)	(-/
NY	Total Non-Itemized Transactions with this Payee/Pa	aver	\$62,635
10001	Total of All Transactions with this Payee/Payer		\$62,635
Type or Classification	Total of All Hallsactions with this rayee/rayer	ioi iiiis ochedule	Ψ02,033
(B)			
EXCHANGES	-		
Name and Address			
(A)			
MAILERS UNION	_		_
IVIJ TIELITO OTTIOTO	Purpose	Date	Amount
352 SEVENTH AVENUE	(C)	(D)	(E)
NEW YORK	EXPENSE REIMBURSEMENT	04/18/2012	\$6,199
NY	Total Itemized Transactions with this Payee/Payer		\$6,199
10001	Total Non-Itemized Transactions with this Payee/Page 1		\$44,022
Type or Classification	Total of All Transactions with this Payee/Payer	for This Schedule	\$50,221
(B)			
EXPENSE REIMBURSEMENT	-		
Name and Address			
(A)			
TYPO BENEFITS & OTHER EXP REIMB	-		
THE BENEFITS & OTHER EXP REIMB	Purpose	Date	Amount
352 SEVENTH AVENUE	(C)	(D)	(E)
NEW YORK	CWA REIMBURSEMENT	03/20/2012	\$10,360
NY	Total Itemized Transactions with this Payee/Payer	\$10,360	
10001	Total Non-Itemized Transactions with this Payee/Pa		\$65,456
Type or Classification	Total of All Transactions with this Payee/Payer	for This Schedule	\$75,816
(B)			
EXPENSE REIMBURSEMENT	-		
EXT ETTOE REINIDOROLIVIETT	1		

SCHEDULE 15 - REPRESENTATIONAL ACTIVITIES

FILE NUMBER: 003-105

Name and Address						
(A)						
HENRY VITALE	Purpose	Date	Amount			
	(C)	(D)	(E)			
	REPRESENTATION BOSTON	08/07/2012	\$8,708			
BOSTON	REPRESENTATION BOSTON	09/13/2012	\$3,900			
MA	Total Itemized Transactions with this Payee/Payer		\$12,608			
Type or Classification	Total Non-Itemized Transactions with this Payee/Page 1					
(B)	Total of All Transactions with this Payee/Payer	for This Schedule	\$12,608			
BOSTON REPRESENTATIONAL						
ACTIVITIES						
Name and Address	Purpose	Date	Amount			
(A)	(C)	(D)	(E)			
LEVY RATNER	LEGAL FEES	10/17/2011	\$5,457			
	LEGAL FEES	11/10/2011	\$6,573			
80 EIGHT AVENUE	LEGAL FEES	12/12/2011	\$6,095			
NEW YORK	LEGAL FEES	01/09/2012	\$5,700			
NY	LEGAL FEES	02/07/2012	\$7,076			
10013	LEGAL FEES	03/12/2012	\$7,821			
Type or Classification	LEGAL FEES	04/12/2012	\$5,811			
(B)	LEGAL FEES	05/10/2012	\$5,669			
LEGAL FEES	LEGAL FEES	06/11/2012	\$5,968			
	LEGAL FEES	07/10/2012	\$6,220			
	LEGAL FEES	08/13/2012	\$6,293			
	LEGAL FEES	09/10/2012	\$6,636			
	Total Itemized Transactions with this Payee/Payer	\$75,319				
	Total Non-Itemized Transactions with this Payee/Page 1	Total Non-Itemized Transactions with this Payee/Payer				
	Total of All Transactions with this Payee/Payer	\$75,319				

SCHEDULE 16 - POLITICAL ACTIVITIES AND LOBBYING

FILE NUMBER 003-105

There was no data found for this schedule.

SCHEDULE 17 - CONTRIBUTIONS, GIFTS & GRANTS

FILE NUMBER: 003-105

There was no data found for this schedule.

SCHEDULE 18 - GENERAL OVERHEAD

FILE NUMBER: 003-105

Name and Address	Purpose	Date	Amount
(A)	(C)	(D)	(E)
A.M. PROPERTY HOLDING CORP	RENT	10/03/2011	\$12,783
352 SEVENTH AVENUE	RENT	11/01/2011	\$12,556
NEW YORK	RENT RENT	12/01/2011	\$12,153
NY		01/03/2012	\$11,992
10001	RENT	02/02/2012	\$11,905 \$11,905
Type or Classification	RENT RENT	03/01/2012	\$11,87
(B)		04/02/2012	\$11,886
RENT BEFORE ALLOCATIONS	RENT RENT	05/01/2012	\$14,940 \$12,13
		06/01/2012	
	RENT RENT	07/02/2012	\$13,113 \$13,487
		08/02/2012	
	RENT	09/04/2012	\$13,346
	Total Itemized Transactions with this Payee/Payer		\$152,172
	Total Non-Itemized Transactions with this Payee/Pa		6450 47
	Total of All Transactions with this Payee/Payer	or This Schedule	\$152,172
Name and Address			
(A)			
BIH COMPUTER SERVICES			
265	Purpose	Date	Amount
ANALOMINK	(C)	(D)	(E)
PA	Total Itemized Transactions with this Payee/Payer		
18320	Total Non-Itemized Transactions with this Payee/Pa		\$9,710
Type or Classification	Total of All Transactions with this Payee/Payer t	for This Schedule	\$9,710
(B)			
NETWORK AND COMPUTER SUPPOR	T		
SERVICES			
Name and Address			
(A)			
BUTWIN INSURANCE			
L	Purpose	Date	Amount
60 CUTTERMILL ROAD SUITE 41	(C)	(D)	(E)
GREAT NECK	INSURANCE	05/29/2012	\$11,452
NY 44024-2404	Total Itemized Transactions with this Payee/Payer		\$11,452
11021-3104	Total Non-Itemized Transactions with this Payee/Pa	ayer	
Type or Classification	Total of All Transportions with this Daves/Daves	ion Thio Cohodula	¢44.4E0
Type or Classification	Total of All Transactions with this Payee/Payer	for This Schedule	\$11,452
(B)	Total of All Transactions with this Payee/Payer f	for This Schedule	\$11,452
(B) INSURANCE- LIABILITY 5/23/12 TO	Total of All Transactions with this Payee/Payer t	or This Schedule	\$11,452
(B) INSURANCE- LIABILITY 5/23/12 TO 5/23/13	Total of All Transactions with this Payee/Payer f	or This Schedule	\$11,452
(B) INSURANCE- LIABILITY 5/23/12 TO 5/23/13 Name and Address	Total of All Transactions with this Payee/Payer t	or This Schedule	\$11,452
(B) INSURANCE- LIABILITY 5/23/12 TO 5/23/13	Total of All Transactions with this Payee/Payer f	or This Schedule	\$11,452
(B) INSURANCE- LIABILITY 5/23/12 TO 5/23/13 Name and Address (A)	Total of All Transactions with this Payee/Payer f	or This Schedule	\$11,452 Amount
(B) INSURANCE- LIABILITY 5/23/12 TO 5/23/13 Name and Address (A) PITNEY BOWES			
(B) INSURANCE- LIABILITY 5/23/12 TO 5/23/13 Name and Address (A) PITNEY BOWES	Purpose (C) Total Itemized Transactions with this Payee/Payer	Date (D)	Amount
(B) INSURANCE- LIABILITY 5/23/12 TO 5/23/13 Name and Address (A) PITNEY BOWES 371887	Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa	Date (D)	Amount (E)
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(B) INSURANCE- LIABILITY 5/23/12 TO 5/23/13 Name and Address (A) PITNEY BOWES 371887 PITTSBURGH PA	Purpose (C) Total Itemized Transactions with this Payee/Payer	Date (D)	Amount (E) \$6,759
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(B) INSURANCE- LIABILITY 5/23/12 TO 5/23/13 Name and Address (A) PITNEY BOWES 371887 PITTSBURGH PA 15250-7887 Type or Classification (B) POSTAGE AND MAILING Name and Address (A)	Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa	Date (D)	Amount (E) \$6,759
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85243	Purpose (C)	Date (D)	Amount (E)
CAN DIECO	(-)		
SAN DIEGO	Total Non-Itemized Transactions with this Payee/Pa		\$5,000
CA	Total of All Transactions with this Payee/Payer	for This Schedule	\$5,000
92186-5243			
Type or Classification			
(B)			
INVESTMENT EXP BÉFORE			
ALLOCATION			
Name and Address			
(A)			
VOLK AND VALANE LLC	Purpose	Date	Amount
	(C)	(D)	(E)
39 WEST 32ND ST-SUITE 1600B	AUDIT FEE	01/12/2012	\$14,700
NEW YORK	AUDIT FEE	07/24/2012	\$13,200
NY	Total Itemized Transactions with this Payee/Payer	•	\$27,900
10001	Total Non-Itemized Transactions with this Payee/Page 1	ayer	
Type or Classification (B)	Total of All Transactions with this Payee/Payer	for This Schedule	\$27,900
AUDITING FEES, 990 AND LM-2 PREP			

SCHEDULE 19 - UNION ADMINISTRATION

FILE NUMBER: 003-105

There was no data found for this schedule.

SCHEDULE 20 - BENEFITS

FILE NUMBER: 003-105

Description	To Whom Paid	Amount
(A)	(B)	(C)
PENSION FUND	PENSION FUND	\$60,062
WELFARE FUND	WELFARE FUND	\$30,949
Total of all lines above (Total will be automatically entered in Item 55.)		\$91,011

69. ADDITIONAL INFORMATION SUMMARY

FILE NUMBER: 003-105

Question 10: THE UNION PAYS BENEFITS TO THE CWA LOCAL 14156 PRINTERS, PUBLISHERS AND MEDIA WORKERS BENEFIT AND HEALTH FUND. THE FUND IS LOCATED AT 352 SEVENTH AVENUE- SUITE 601- NEW YORK, NY 10001

Question 12: AUDIT PERFORMED BY THE ACCOUNTING FIRM OF VOLK AND VALANE, LLC LOCATED AT 39 WEST 32ND STREET, NEW YORK, NY 10001. EIN # 20-5094634.

Schedule 13, Row1:MEMBERS FULLY ELIGIBLE TO VOTE Form LM-2 (Revised 2010)

Frequently Asked Questions | Freedom of Information Act | Privacy & Security Statement | Disclaimers | Customer Survey | Important Web Site Notices

U.S. Department of Labor | Frances Perkins Building, 200 Constitution Ave., NW, Washington, DC 20210 www.dol.gov | Telephone: 1-866-4-USA-DOL (1-866-487-2365) | TTY: 1-877-4-889-5627 | Contact Us

April 18, 2019 DOL Home > OLMS > Public Disclosure Home > Search Criteria > Report

Printable View

FORM LM-2 LABOR ORGANIZATION ANNUAL **REPORT**

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

MUST BE USED BY LABOR ORGANIZATIONS WITH \$250,000 OR MORE IN TOTAL ANNUAL RECEIPTS AND LABOR ORGANIZATIONS IN TRUSTEESHIP

Form Approved Office of Management and Budget No. 1245-0003 Expires: 08-31-2016

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.

	5=15=	.=		. = =			
	READ II	HE IN	STRUCTIONS CAR	KEFULI	LY BEFORE PREPARING THIS R	REPORT.	
For Official Use Only	1. FILE NUMBER 003-105	2. PEI From Throu		(b)	AMENDED - Is this an amended HARDSHIP - Filed under the har TERMINAL - This is a terminal re	dship procedures:	Yes No No
4. AFFILIATION C	R ORGANIZATION N	AME			8. MAILING ADDRESS (Type or	print in capital letters)	
COMMUNICATION	NS WORKERS AFL-C	OIC			First Name	Last Name	
					ARTHUR	DELANNI	
DESIGNATION	(Local, Lodge, etc.)		DESIGNATION N	NBR	AKTIOK	DELANNI	
LOCAL UNION			14156		P.O Box - Building and Room Nu	mbor	
7. UNIT NAME (if any)							
	Number and Street						
					352 SEVENTH AVENUE		
					COZ GEVERNITAVENCE		
					City		
			0	.,	NÉW YORK		
9. Are your organi	zation's records kept a	at its n	nailing address?	Yes			
					State	ZIP Code + 4	
					NY	10001	

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 information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned individual's knowledge and belief, true, correct and complete (See Section V on penalties in the instructions.)
70. SIGNED: Arthur De lanni Pl
Date: Dec 30, 2013 Telephone Number: 212-533-2000 PRESIDENT 71. SIGNED: Louis Garafalo T 00 Date: Dec 30, 2013 Telephone Number: 212-967-2305 TREASURER

ITEMS 10 THROUGH 21

10. During the reporting period did the labor organization create or participate in the administration of a trust or a fund or organization, as defined in the instructions, which provides benefits for members or beneficiaries?

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

11(b). During the reporting period did the labor organization have a subsidiary organization as defined in Section X of these Instructions?

12. 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?

13. 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.)

14. What is the maximum amount recoverable under the labor organization's fidelity bond for a loss caused by any officer, employee or agent of the labor organization who handled union funds?

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

. 16. Were any of the labor organization's assets pledged as security or encumbered in any way at the end of the reporting period?

17. Did the labor organization have any contingent liabilities at the end of the reporting period?

18. During the reporting period did the labor organization have any changes in its constitution or bylaws, other than rates of dues and fees, or in practices/procedures listed in the instructions?

19. What is the date of the labor organization's next regular election of officers?

Form LM-2 (Revised 2010)

FILE NUMBER: 003-105 20. How many members did the labor organization have at the end of the reporting period?

331

21. What are the labor organization's rates of dues and fees?

Rates of Dues and Fees									
Dues/Fees	Amount		Unit	Minimum	Maximum				
(a) Regular Dues/Fees	.69 % scale	per	per month	500	900				
(b) Working Dues/Fees		per		0	C				
(c) Initiation Fees	300	per		300	300				
(d) Transfer Fees		per		0	C				
(e) Work Permits		per		0	C				

\$500,000

Yes

No

No

Yes

No

No

No

No

No

11/2014

STATEMENT A - ASSETS AND LIABILITIES

ASSETS	Schedule Number	Start of Reporting Period (A)	End of Reporting Period (B)
22. Cash		\$108,231	\$51,136
23. Accounts Receivable	1		\$0
24. Loans Receivable	2		
25. U.S. Treasury Securities		\$3,379,851	\$2,930,888
26. Investments	5		
27. Fixed Assets	6	\$41,866	\$34,800
28. Other Assets	7	\$87,368	
29. TOTAL ASSETS		\$3,617,316	\$3,016,824

LIABILITIES

LIABILITIES	Schedule	Start of Reporting Period	End of Reporting Period
LIABILITIES	Number	(A)	(B)
30. Accounts Payable	8	\$24,495	
31. Loans Payable	9		
32. Mortgages Payable		\$0	\$0
33. Other Liabilities	10	\$96,642	
34. TOTAL LIABILITIES		\$121,137	\$0

	35. NET ASSETS	\$3,496,179	\$3,016,824
--	----------------	-------------	-------------

STATEMENT B - RECEIPTS AND DISBURSEMENTS

FILE NUMBER: 003-105

CASH RECEIPTS	SCH	AMOUNT	CASH DISBURS	EMENTS	SCH	AMOUNT
36. Dues and Agency Fees		\$58,877	50. Representational Activitie	es	15	\$456,356
37. Per Capita Tax			51. Political Activities and Lo		16	\$4,372
38. Fees, Fines, Assessments, Work Permits		\$0	52. Contributions, Gifts, and	Grants	17	\$4,247
39. Sale of Supplies		\$0	53. General Overhead		18	\$344,994
40. Interest					19	\$48,793
41. Dividends		ψ10,123 ¢0	55. Benefits		20	\$52,548
		φ0	56. Per Capita Tax			\$34,403
42. Rents		\$0	57 Strike Benefits			\$0
43. Sale of Investments and Fixed Assets	3	\$1,791,299	58. Fees, Fines, Assessmen	ts, etc.		\$0
44. Loans Obtained	9		59 Supplies for Resale			\$0
45. Repayments of Loans Made	2	****	60. Purchase of Investments	and Fixed Assets	4	\$1,303,685
46. On Behalf of Affiliates for Transmittal to Them		\$227,979	61. Loans Made		2	+ 1,000,000
47. From Members for Disbursement on Their		\$0	62. Repayment of Loans Obt	ained	9	
Behalf		***	63. To Affiliates of Funds Col	lected on Their		****
48. Other Receipts	14	\$317,588	63. To Affiliates of Funds Col Behalf			\$204,489
49. TOTAL RECEIPTS		\$2,473,872	64. On Behalf of Individual M	lembers		\$34,403
			65. Direct Taxes			\$40,908
			6. Subtotal			\$2,529,198
			67. Withholding Taxes and P	ayroll Deductions		
			67a. Total Withheld	\$127,147		
			67b. Less Total Disbursed	\$128,916		
			67c. Total Withheld But Not	Disbursed		-\$1,769
			68. TOTAL DISBURSEMENT	TS	ΙT	\$2,530,967

SCHEDULE 1 - ACCOUNTS RECEIVABLE AGING SCHEDULE

FILE NUMBER: 003-105

Entity or Individual Name (A)	Total Account Receivable (B)	90-180 Days Past Due (C)	180+ Days Past Due (D)	Liquidated Account Receivable (E)
Total of all itemized accounts receivable	\$0	\$0	\$0	\$0
Totals from all other accounts receivable				
Totals (Total of Column (B) will be automatically entered in Item 23, Column(B))	\$0	\$0	\$0	\$0

SCHEDULE 2 - LOANS RECEIVABLE

FILE NUMBER: 003-105

List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to business enterprises regarless of amount. (A)		Loans Made During Period (C)	Pe	eceived During riod Other Than Cash (D)(2)	/ - \
Total of loans not listed above					
Total of all lines above	\$0	\$0	\$0	\$0	\$0
Totals will be automatically entered in	Item 24	Item 61	Item 45	Item 69	Item 24
	Column (A)			with Explanation	Column (B)

SCHEDULE 3 - SALE OF INVESTMENTS AND FIXED ASSETS

FILE NUMBER: 003-105

Description (if land or buildings give location)	Cost	Book Value	Gross Sales Price	Amount Received
(A)	(B)	(C)	(D)	(E)
SALES OF INVESTMENTS	\$1,757,098	\$1,757,098	\$1,757,098	\$1,757,098
PROFIT ON SALES OF INVESTMENTS	\$34,201	\$34,201	\$34,201	\$34,201
Total of all lines above	\$1,791,299	\$1,791,299	\$1,791,299	\$1,791,299
Less Reinvestments				
(The total from Net Sales Line will be automatically entered in Item 43) Net Sales				\$1,791,299

SCHEDULE 4 - PURCHASE OF INVESTMENTS AND FIXED ASSETS

FILE NUMBER: 003-105

Description (if land or buildings, give location)	Cost	Book Value	Cash Paid
(A)	(B)	(C)	(D)
PURCHASE OF INVESTMENTS	\$1,303,685	\$1,303,685	\$1,303,685
Total of all lines above	\$1,303,685	\$1,303,685	\$1,303,685
	\$0		
(The total from Net Purchases Line will be automated)	Net Purchases	\$1,303,685	

SCHEDULE 5 - INVESTMENTS

FILE NUMBER: 003-105

Description (A)	Amount (B)
Marketable Securities	
A. Total Cost	
B. Total Book Value	
C. List each marketable security which has a book value over \$5,000 and exceeds 5% of Line B.	
Other Investments	
D. Total Cost	
E. Total Book Value	
F. List each other investment which has a book value over \$5,000 and exceeds 5% of Line E. Also, list each	
subsidiary for which separate reports are attached.	
G. Total of Lines B and E (Total will be automatically entered in Item 26, Column(B))	\$0

SCHEDULE 6 - FIXED ASSETS

FILE NUMBER: 003-105

Description (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed (C)	Book Value (D)	Value (E)
A. Land (give location)	\$0		\$0	\$0
B. Buildings (give location)	\$0	\$0	\$0	\$0
C. Automobiles and Other Vehicles	\$21,943		\$21,943	\$21,943
D. Office Furniture and Equipment	\$11,286		\$12,856	\$112,856
E. Other Fixed Assets	\$1		\$1	\$1
F. Totals of Lines A through E (Column(D) Total will be automatically entered in Item 27, Column(B))	\$33,230	\$0	\$34,800	\$134,800

SCHEDULE 7 - OTHER ASSETS

FILE NUMBER: 003-105

Description	Book Value	
(A)	(B)	
Total (Total will be automatically entered in Item 28, Column(B))	\$0	

SCHEDULE 8 - ACCOUNTS PAYABLE AGING SCHEDULE

FILE NUMBER: 003-105

Entity or Individual Name (A)	Total Account Payable (B)	90-180 Days Past Due (C)	180+ Days Past Due (D)	Liquidated Account Payable (E)
Total for all itemized accounts payable	\$0	\$0	\$0	\$0
Total from all other accounts payable	\$0	\$0	\$0	\$0
Totals (Total for Column(B) will be automatically entered in Item 30, Column(D))	\$0	\$0	\$0	\$0

SCHEDULE 9 - LOANS PAYABLE

FILE NUMBER: 003-105

Source of Loans Payable at Any Time During the Reporting Period (A)	Loans Owed at Start of Period (B)	Loans Obtained During Period (C)	Repayment During Period Cash (D)(1)	Repayment During Period Other Than Cash (D)(2)	Loans Owed at End of Period (E)
Total Loans Payable	\$0	\$0	\$0	\$0	\$0
Totals will be automatically entered in	Item 31	Item 44	Item 62	Item 69	Item 31
Totals will be automatically entered in	Column (C)			with Explanation	Column (D)

SCHEDULE 10 - OTHER LIABILITIES

FILE NUMBER: 003-105

Description	Amount at End of Period
(A)	(B)
Total Other Liabilities (Total will be automatically entered in Item 33, Column(D))	\$0

FILE NUMBER: 003-105

SCHEDULE 11 - ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

	(A) Name	(B) Title		(C) Status	Disbu (bef	(D) ss Salar rsemer ore any uctions	nts	(E) Allowances Disbursed		fo	(F) ursements r Official usiness	re	(G) Other urseme eported throug	nts not in	7	(H) OTAL
A B C		RTHUR				\$192,	687	\$	0		\$2,014			\$0		\$194,701
ı	Schedule 15 Representation		85 %	Schedule 16 Political Activ and Lobbying		1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr		10 %
A B C	MURRAY, JA VICE PRESID C						\$0	\$	0		\$5,606			\$0		\$5,606
ı	Schedule 15 Representation	nal Activities	85 %	Schedule 16 Political Activand Lobbying	/ities	1 %		nedule 17 ntributions	ľ	1 %	Schedule 1 General Ov		3 %	Schedule Administr		10 %
A B C	SECTY-TREA						\$0	\$	0		\$2,388			\$0		\$2,388
ı	Schedule 15 Representation	nal Activities	85 %	Schedule 16 Political Activand Lobbying	/ities	1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr		10 %
A B C	CHAIRMAN E		TTEE				\$0	\$	0		\$4,153			\$0		\$4,153
ı	Schedule 15 Representation	nal Activities	85 %	Schedule 16 Political Activ	/ities	1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr		10 %
A B C							\$0	\$	0		\$1,847			\$0		\$1,847
ı	Schedule 15 Representation	nal Activities	85 %	Schedule 16 Political Activ	/ities	1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr		10 %
A B C	HEDGECOKE EXECUTIVE (C						\$0	\$	0		\$825			\$0		\$825
ı	Schedule 15 Representation		85 %	Schedule 16 Political Activand Lobbying	/ities	1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr		10 %
A B C	EXECUTIVE (\$0	\$	0		\$675			\$0		\$675
ı	Schedule 15 Representation	nal Activities	85 %	Schedule 16 Political Activand Lobbying	/ities	1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr		10 %
A B C	NATUSCH, E EXECUTIVE (C						\$0	\$	0		\$750			\$0		\$750
ı	Schedule 15 Representation		85 %	Schedule 16 Political Activand Lobbying		1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr		10 %
A B C		, MARVIN					\$0	\$	0		\$3,041			\$0		\$3,041
ı	Schedule 15 Representation	nal Activities	85 %	Schedule 16 Political Activand Lobbying	/ities	1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr		10 %
To	otal Officer Dis	bursements				\$192	,687	' (\$0		\$21,299			\$0		\$213,986
L	ess Deduction	s														
N	et Disburseme	nts														\$213,986

SCHEDULE 12 - DISBURSEMENTS TO EMPLOYEES

FILE NUMBER: 003-105

_			_													
					Gro	(D) ss Sala	arv	(E) Allowances		Di	(F) sbursements	Other	(G) Disbu	rsements	(H) TOTA	AI.
	(A)	(B) Title		(C)		urseme		Disbursed			for Official		t repor		1017	\L
	Name	TITLE		Other Payer		efore ar					Business	(D) throu	gh (F)		
_	DE IANNI CI				de	duction	ıs)		_							
	DE IANNI, ST REPRESENTA					\$65	5,817		\$0		\$1,083			\$0	9	66,900
	NONE					Ψοσ	,,,,,,,,		,		ψ.,σσσ			Ų.	•	.00,000
	Schedule 15			Schedule 16			Sche	edule 17	Ι.	٠,	Schedule 18			Schedule	e 19	
I	Representation	nal Activities	80 %	Political Activi and Lobbying	ties	1 %	Cont	ributions	1	%	General Over	head	3 %	Administ		15 %
- 1	EATON, NICH	HOLAS		, , , ,												
- 1	ORGANIZER NONE					\$24	1,310		\$0		\$1,090			\$0	\$	25,400
l.	Schedule 15		90 0/	Schedule 16 Political Activi	tion	1 %	Sche	dule 17	١,	%	Schedule 18		3 %	Schedule	e 19	15 %
ľ	Representation	nal Activities	00 /0	and Lobbying	lies	1 /6	Cont	ributions	ļ '	70	General Over	head	3 70	Administ	ration	15 /6
	BIENIAS, KAI										***			•		
	ORG, REIMBU NONE	IKSED BY II	NIL			\$78	3,767		\$0		\$2,147			\$0	*	80,914
	Schedule 15			Schedule 16			Sche	edule 17	Γ.		Schedule 18		l	Schedule	= 19	
I	Representation	nal Activities	80 %	Political Activi and Lobbying	ties	1 %	Cont	ributions	1	%	General Over	head	3 %	Administ	ration	15 %
	TALS RECEIV		LOYE	ES MAKING												\$0
_	0,000 OR LESS Schedule 15	S		Schedule 16				Sched	ulo	17	Schedu	ulo 10		l leah	edule 19	
11	Representation	nal Activities		Political Activi	ities a	nd Lobl	bvina						rhead		ninistration	
	tal Employee I		nts			\$168,	, v		0		\$4,320			\$(73,214
Le	ss Deductions	3														
Ne	t Disburseme	nts													\$1	73,214

SCHEDULE 13 - MEMBERSHIP STATUS

FILE NUMBER: 003-105

Category of Membership	Number	Voting Eligibility
(A)	(B)	(C)
MEMBERS ELIGIBLE TO VOTE	331	Yes
Members (Total of all lines above)	331	
Agency Fee Payers*		
Total Members/Fee Payers	331	
*Agency Fee Payers are not considered members of the labor organization.		

DETAILED SUMMARY PAGE - SCHEDULES 14 THROUGH 19

\$0 \$177,643
\$177.643
\$139,945
\$317,588

SCHEDULE 15 REPRESENTATIONAL ACTIV	ITIES
Named Payee Itemized Disbursements	\$128,803
Named Payee Non-itemized Disbursements	\$5,879
3. To Officers	\$181,889
4. To Employees	\$138,571
5. All Other Disbursements	\$1,214
6. Total Disbursements	\$456,356
SCHEDULE 16 POLITICAL ACTIVITIES AND LO	BBYING
Named Payee Itemized Disbursements	\$0
Named Payee Non-itemized Disbursements	\$0
3. To Officers	\$2,140
4. To Employees	\$1,732
5. All Other Disbursements	\$500
6. Total Disbursement	\$4,372

Form LM-2 (Revised 2010)

SCHEDULE 17 CONTRIBUTIONS, GIFTS & G	RANTS
Named Payee Itemized Disbursements	\$0
Named Payee Non-itemized Disbursements	\$0
3. To Officers	\$2,140
4. To Employees	\$1,732
5. All Other Disbursements	\$375
6. Total Disbursements	\$4,247

FILE NUMBER: 003-105

SCHEDULE 18 GENERAL OVERHEAD	
Named Payee Itemized Disbursements	\$194,424
Named Payee Non-itemized Disbursements	\$99,100
3. To Officers	\$6,420
4. To Employees	\$5,196
5. All Other Disbursements	\$39,854
6. Total Disbursements	\$344,994
SCHEDULE 19 UNION ADMINISTRATION	١
Named Payee Itemized Disbursements	\$0
Named Payee Non-itemized Disbursements	\$0
3. To Officers	\$21,400
4. To Employees	\$25,982
5. All Other Disbursements	\$1,411
6. Total Disbursements	\$48,793

FILE NUMBER: 003-105

SCHEDULE 14 - OTHER RECEIPTS

Name and Address			1
(A)			
CWA BOSTON TYPO			
	Purpose	Date	Amount
	(C)	(D)	(E)
BOSTON	Total Itemized Transactions with this Payee/Payer		
MA	Total Non-Itemized Transactions with this Payee/Pa	ayer	\$49,048
Type or Classification	Total of All Transactions with this Payee/Payer	for This Schedule	\$49,048
(B)			
BOSTON MERGER TRF OF CASH			
BALANCE			
Name and Address			
(A)			
CWA INTERNATIONAL	Purpose	Date	Amount
	(C)	(D)	(E)
WASHINGTON	Total Itemized Transactions with this Payee/Payer		
DC	Total Non-Itemized Transactions with this Payee/Pa	ayer	\$128,595
Type or Classification	Total of All Transactions with this Payee/Payer	for This Schedule	\$128,595
(B)			
REIMBURSEMENT FOR ORGANIZER	_		
INCIMIDATION ON ON ORGANIZER			

SCHEDULE 15 - REPRESENTATIONAL ACTIVITIES

Name and Address (A)			
HENRY VITALE	_		
TEMET VIIVEE	Purpose	Date	Amount
1 PRESCOTT STREET	(C)	(D)	(E)
EAST BOSTON	SUPPORT SRVCS	11/27/2012	\$11,610
MA	TRANSITION SUPPORT	02/04/2013	\$6,192
02128	Total Itemized Transactions with this Payee/Payer		\$17,802
Type or Classification	Total Non-Itemized Transactions with this Payee/P		\$879
(B)	Total of All Transactions with this Payee/Payer	for This Schedule	\$18,681
REPRESENTATIVE FOR BOSTON TRANSITION			
Name and Address	Purpose	Date	Amount
(A)	(C)	(D)	(E)
LEVY RATNER	LEGAL FEES	10/11/2012	\$5,972
	LEGAL FEES	11/19/2012	\$30,000
80 EIGHT AVENUE	LEGAL FEES	11/19/2012	\$6,937
NEW YORK	LEGAL FEES	12/13/2012	\$6,643
NY	LEGAL FEES	01/10/2013	\$6,873
10011-5126	LEGAL FEES	02/12/2013	\$6,949
Type or Classification	LEGAL FEES	03/07/2013	\$6,750
(B)	LEGAL FEES	04/15/2013	\$6,941
ATTORNEY FEES	LEGAL FEES	05/23/2013	\$7,342
	LEGAL FEES	06/03/2013	\$7,033
	LEGAL FEES	07/15/2013	\$6,793
	LEGAL FEES	08/08/2013	\$6,881
	LEGAL FEES	09/03/2013	\$5,887
	Total Itemized Transactions with this Payee/Payer	55/55/25/5	\$111,001
	Total Non-Itemized Transactions with this Payee/P	aver	* · · · · , · · · ·
	Total of All Transactions with this Payee/Payer		\$111,001
Name and Address			****,***
(A)			
RAMIREZ ASSET MANAGEMENT	_		
	Purpose	Date	Amount
61 BROADWAY ROOM 2924	(C)	(D)	(E)
NEW YORK	Total Itemized Transactions with this Payee/Payer	· · · · · · · · · · · · · · · · · · ·	(/
NY	Total Non-Itemized Transactions with this Payee/P	aver	\$5.000
10006	Total of All Transactions with this Payee/Payer		\$5,000
Type or Classification (B)		1	\$0,000
INVESTMENT ADVISORY SERVICES	<u> </u>		

SCHEDULE 16 - POLITICAL ACTIVITIES AND LOBBYING

FILE NUMBER 003-105

There was no data found for this schedule.

SCHEDULE 17 - CONTRIBUTIONS, GIFTS & GRANTS

FILE NUMBER: 003-105

There was no data found for this schedule.

SCHEDULE 18 - GENERAL OVERHEAD

FILE NUMBER: 003-105

Name and Address	Purpose	Date	Amount
(A)	(C)	(D)	(E)
A.M. PROPERTY HOLDING	RENT BEFORE EXP REIMB	10/11/2012	\$13,372
	RENT BEFORE EXP REIMB	11/08/2012	\$12,90
352 SEVENTH AVENUE	RENT BEFORE EXP REIMB	12/03/2012	\$12,186
NEW YORK	RENT BEFORE EXP REIMB	01/07/2013	\$12,152
NY	RENT BEFORE EXP REIMB	02/01/2013	\$12,209
10001	RENT BEFORE EXP REIMB	03/01/2013	\$12,107
Type or Classification	RENT BEFORE EXP REIMB	04/01/2013	\$12,127
(B)	RENT BEFORE EXP REIMB	05/01/2013	\$15,190
RENT BEFORE EXPENSE	RENT BEFORE EXP REIMB	06/03/2013	\$12,432
REIMBURSEMENT	RENT BEFORE EXP REIMB	07/01/2013	\$12,789
	RENT BEFORE EXP REIMB	08/01/2013	\$13,396
	RENT BEFORE EXP REIMB	09/03/2013	\$13,694
	Total Itemized Transactions with this Payee/Payer	03/03/2010	\$154,555
	Total Non-Itemized Transactions with this Payee/P	avor	\$(
	Total of All Transactions with this Payee/Payer		\$154,555
Name and Address	Total of All Transactions with this Payee/Payer	ioi Tilis Schedule	φ104,000
(A)			
BIH COMPUTER SERVICES			
255	Purpose	Date	Amount
200	(C)	(D)	(E)
ANALOMINK	Total Itemized Transactions with this Payee/Payer	(B)	(L)
PA	Total Non-Itemized Transactions with this Payee/P	avor	\$9,068
18320	Total of All Transactions with this Payee/Payer		\$9,068
Type or Classification	Total of All Transactions with this Payee/Payer	ior mis schedule	φ9,000
(B)			
COMPUTER & NETWORK SUPPORT	_		
	+		
Name and Address			
(A)			
EBERTS & HARRISON	Purpose	Date	Amount
1000 CENTURY PLAZA, SUITE 3	(C)	(D)	(E)
10630 LITTLE PATUXENT PKWAY	INSURANCE	11/08/2012	\$6,269
COLUMBIA	Total Itemized Transactions with this Payee/Payer	·	\$6,269
MD	Total Non-Itemized Transactions with this Payee/P	aver	\$18,494
21044-3276	Total of All Transactions with this Payee/Payer		\$24,763
Type or Classification	Total of All Transactions with this I dycen ayer	ioi iiiis ociicadic	Ψ24,700
(B)			
INSURANCE			
Name and Address			
(A)			
PRINTING PUBLISHERS & MEDIA			
	Purpose	Date	Amount
	(C)	(D)	(E)
352 SEVENTH AVE	(-)		(上)
NEW YORK	Total Itemized Transactions with this Payee/Payer		(L)
352 SEVENTH AVE NEW YORK NY	(-)	ayer	
NEW YORK NY 10001	Total Itemized Transactions with this Payee/Payer		\$64,411
NEW YORK NY	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/P		\$64,411
NEW YORK NY 10001 Type or Classification (B)	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/P		\$64,411
NEW YORK NY 10001 Type or Classification (B)	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/P		\$64,411
NEW YORK NY 10001 Type or Classification (B)	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/P		\$64,411
NEW YORK NY 10001 Type or Classification (B) SHARE OF CLERICAL EXPENSES	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/P		\$64,411
NEW YORK NY 10001 Type or Classification (B) SHARE OF CLERICAL EXPENSES Name and Address (A)	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/P Total of All Transactions with this Payee/Payer	for This Schedule	\$64,411 \$64,411
NEW YORK NY 10001 Type or Classification (B) SHARE OF CLERICAL EXPENSES Name and Address (A)	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/P Total of All Transactions with this Payee/Payer Purpose	for This Schedule	\$64,411 \$64,411
NEW YORK NY 10001 Type or Classification (B) SHARE OF CLERICAL EXPENSES Name and Address	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/P Total of All Transactions with this Payee/Payer Purpose (C)	for This Schedule	\$64,411 \$64,411
NEW YORK NY 10001 Type or Classification (B) SHARE OF CLERICAL EXPENSES Name and Address (A) VERIZON	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/P Total of All Transactions with this Payee/Payer Purpose (C) Total Itemized Transactions with this Payee/Payer	for This Schedule Date (D)	\$64,411 \$64,411 Amount (E)
NEW YORK NY 10001 Type or Classification (B) SHARE OF CLERICAL EXPENSES Name and Address (A) VERIZON NEW YORK	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/P Total of All Transactions with this Payee/Payer Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer	for This Schedule Date (D)	\$64,411 \$64,411 Amount (E)
NEW YORK NY 10001 Type or Classification (B) SHARE OF CLERICAL EXPENSES Name and Address (A) VERIZON NEW YORK	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/P Total of All Transactions with this Payee/Payer Purpose (C) Total Itemized Transactions with this Payee/Payer	for This Schedule Date (D)	\$64,411 \$64,411 Amount (E)
NEW YORK NY 10001 Type or Classification (B) SHARE OF CLERICAL EXPENSES Name and Address (A) VERIZON NEW YORK NY	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/P Total of All Transactions with this Payee/Payer Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer	for This Schedule Date (D)	\$64,411 \$64,411 Amount (E)
NEW YORK NY 10001 Type or Classification (B) SHARE OF CLERICAL EXPENSES Name and Address (A) VERIZON NEW YORK NY Type or Classification (B)	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/P Total of All Transactions with this Payee/Payer Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer	for This Schedule Date (D)	\$64,411 \$64,411 Amount (E)
NEW YORK NY 10001 Type or Classification (B) SHARE OF CLERICAL EXPENSES Name and Address (A) VERIZON NEW YORK NY Type or Classification (B) PHONE & WIRELESS PHONES	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/P Total of All Transactions with this Payee/Payer Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer	for This Schedule Date (D)	\$64,411 \$64,411 Amount (E)
NEW YORK NY 10001 Type or Classification (B) SHARE OF CLERICAL EXPENSES Name and Address (A) VERIZON NEW YORK NY Type or Classification (B) PHONE & WIRELESS PHONES Name and Address	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/P Total of All Transactions with this Payee/Payer Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer	Date (D) ayer for This Schedule	\$64,411 \$64,411 Amount (E) \$7,127
NEW YORK NY 10001 Type or Classification (B) SHARE OF CLERICAL EXPENSES Name and Address (A) VERIZON NEW YORK NY Type or Classification (B) PHONE & WIRELESS PHONES Name and Address (A)	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/P Total of All Transactions with this Payee/Payer Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Purpose	Date (D) ayer for This Schedule	\$64,411 \$64,411 Amount (E) \$7,127
NEW YORK NY 10001 Type or Classification (B) SHARE OF CLERICAL EXPENSES Name and Address (A) VERIZON NEW YORK NY Type or Classification (B) PHONE & WIRELESS PHONES Name and Address (A)	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/P Total of All Transactions with this Payee/Payer Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Purpose (C)	Date (D) ayer for This Schedule Date (D) Date (D)	\$64,411 \$64,411 Amount (E) \$7,127 \$7,127
NEW YORK NY 10001 Type or Classification (B) SHARE OF CLERICAL EXPENSES Name and Address (A) VERIZON NEW YORK NY Type or Classification (B) PHONE & WIRELESS PHONES Name and Address (A) VOLK & VALANE LLC	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Purpose (C) ACCOUNTING	Date (D) ayer for This Schedule Date (D) ayer for This Schedule Date (D) 12/31/2012	\$64,411 \$64,411 Amount (E) \$7,127 \$7,127
NEW YORK NY 10001 Type or Classification (B) SHARE OF CLERICAL EXPENSES Name and Address (A) VERIZON NEW YORK NY Type or Classification (B) PHONE & WIRELESS PHONES Name and Address (A) VOLK & VALANE LLC 39 WEST 32ND STREET 1600-B	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/P Total of All Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/P Total of All Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Accounting Purpose (C) ACCOUNTING BOSTON AUDIT	Date (D) Date (D) ayer for This Schedule Date (D) 12/31/2012 04/02/2013	\$64,411 \$64,411 Amount (E) \$7,127 \$7,127
NEW YORK NY 10001 Type or Classification (B) SHARE OF CLERICAL EXPENSES Name and Address (A) VERIZON NEW YORK NY Type or Classification (B) PHONE & WIRELESS PHONES Name and Address (A) VOLK & VALANE LLC 39 WEST 32ND STREET 1600-B NEW YORK	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/P Total of All Transactions with this Payee/Payer Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Purpose (C) ACCOUNTING BOSTON AUDIT AUDITING	Date (D) ayer for This Schedule Date (D) ayer for This Schedule Date (D) 12/31/2012	Amount (E) Amount (E) Amount (E) \$7,127 \$7,127
NEW YORK NY 10001 Type or Classification (B) SHARE OF CLERICAL EXPENSES Name and Address (A) VERIZON NEW YORK NY Type or Classification (B) PHONE & WIRELESS PHONES Name and Address (A) VOLK & VALANE LLC 39 WEST 32ND STREET 1600-B NEW YORK NY	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Co. Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Purpose (C) ACCOUNTING BOSTON AUDIT AUDITING Total Itemized Transactions with this Payee/Payer	Date (D) ayer for This Schedule Date (D) ayer 100	Amount (E) Amount (E) Amount (E) \$7,127 \$7,127
NEW YORK NY 10001 Type or Classification (B) SHARE OF CLERICAL EXPENSES Name and Address (A) VERIZON NEW YORK NY Type or Classification (B) PHONE & WIRELESS PHONES Name and Address (A) VOLK & VALANE LLC 39 WEST 32ND STREET 1600-B NEW YORK NY 10001	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Payer Payer (C) Purpose (C) ACCOUNTING BOSTON AUDIT AUDITING Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total Non-It	Date (D) Payer for This Schedule Date (D) Payer for This Schedule Date (D) 12/31/2012 04/02/2013 06/17/2013 Payer for This Schedule	Amount (E) Amount (E) \$7,127 \$7,127 Amount (E) \$14,700 \$13,200 \$33,600
NEW YORK NY 10001 Type or Classification (B) SHARE OF CLERICAL EXPENSES Name and Address (A) VERIZON NEW YORK NY Type or Classification (B) PHONE & WIRELESS PHONES Name and Address (A) VOLK & VALANE LLC 39 WEST 32ND STREET 1600-B NEW YORK NY 10001 Type or Classification	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Payer Payer (C) Purpose (C) ACCOUNTING BOSTON AUDIT AUDITING Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total Non-It	Date (D) Payer for This Schedule Date (D) Payer for This Schedule Date (D) 12/31/2012 04/02/2013 06/17/2013 Payer for This Schedule	\$64,411 \$64,411 \$64,411 Amount (E) \$7,127 \$7,127 Amount (E) \$14,700 \$5,700 \$13,200 \$33,600
NEW YORK NY 10001 Type or Classification (B) SHARE OF CLERICAL EXPENSES Name and Address (A) VERIZON NEW YORK NY Type or Classification (B) PHONE & WIRELESS PHONES Name and Address (A) VOLK & VALANE LLC 39 WEST 32ND STREET 1600-B NEW YORK NY 10001	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Co. Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Purpose (C) ACCOUNTING BOSTON AUDIT AUDITING Total Itemized Transactions with this Payee/Payer	Date (D) Payer for This Schedule Date (D) Payer for This Schedule Date (D) 12/31/2012 04/02/2013 06/17/2013 Payer for This Schedule	\$64,411 \$64,411 Amount (E) \$7,127 \$7,127

SCHEDULE 19 - UNION ADMINISTRATION

FILE NUMBER: 003-105

There was no data found for this schedule.

SCHEDULE 20 - BENEFITS

FILE NUMBER: 003-105

Description	To Whom Paid	Amount
(A)	(B)	(C)
PENSION	CWA/ITU NEGOTIATED PENSION FUND	\$26,746
WELFARE	PRINTING PUBLISHING & MEDIA WORKERS FUND	\$25,802
Total of all lines above (Total will be automatically entered in Item 55.)		\$52,548

69. ADDITIONAL INFORMATION SUMMARY

FILE NUMBER: 003-105

Question 12: AUDIT PERFORMED BY THE ACCOUNTING FIRM OF VOLK AND VALANE LLC- LOCATED AT 39 WEST 32ND STREET, NEW YORK, NY 10001

Question 10: THE UNION PAYS BENEFITS TO THE CWA LOCAL 14156- PRINTERS, PUBLISHERS AND MEDIA WORKERS BENEFIT AND HEALTH FUND. THE FUND IS LOCATED AT 352 SEVENTH AVENUE- SUITE 601- NEW YORK, NY 10001

Schedule 13, Row1:

Schedule 13, Row1:MEMBERS ELIGIBLE TO VOTE Form LM-2 (Revised 2010)

Frequently Asked Questions | Freedom of Information Act | Privacy & Security Statement | Disclaimers | Customer Survey | Important Web Site Notices

U.S. Department of Labor | Frances Perkins Building, 200 Constitution Ave., NW, Washington, DC 20210 www.dol.gov | Telephone: 1-866-4-USA-DOL (1-866-487-2365) | TTY: 1-877-4-889-5627 | Contact.us

April 18, 2019 DOL Home > OLMS > Public Disclosure Home > Search Criteria > Report

Printable View

FORM LM-2 LABOR ORGANIZATION ANNUAL **REPORT**

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

MUST BE USED BY LABOR ORGANIZATIONS WITH \$250,000 OR MORE IN TOTAL ANNUAL RECEIPTS AND LABOR ORGANIZATIONS IN TRUSTEESHIP

Form Approved Office of Management and Budget No. 1245-0003 Expires: 08-31-2016

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 THI	E INSTRUCTIONS CAR	REFUL	LY BEFORE PREPARING THIS R	REPORT.	
For Official Use Only	1. FILE NUMBER F	PERIOD COVERED 10/01/2013 hrough 09/30/2014	(b) AMENDED - Is this an amended) HARDSHIP - Filed under the har TERMINAL - This is a terminal re	dship procedures:	No No No
4. AFFILIATION O	R ORGANIZATION NA	ME		8. MAILING ADDRESS (Type or	print in capital letters)	
COMMUNICATION	NS WORKERS AFL-CI	0		First Name	Last Name	
			ARTHUR	DELANNI		
5. DESIGNATION	(Local, Lodge, etc.)	cal, Lodge, etc.) 6. DESIGNATION NBR		AKTIOK	DELYNNIN	
LOCAL UNION		14156		P.O Box - Building and Room Number		
7 LINUT NIAME /if.				ROOM 601		
7. UNIT NAME (if a	any)					
				Number and Street		
				352 SEVENTH AVENUE		
				0.1		
				City		
9. Are your organize	zation's records kept at	its mailing address?	Yes	NEW YORK		
,		3		State	ZIP Code + 4	
				NY	10001	
				T**	1.0001	

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 information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned individual's knowledge and belief, true, correct and complete (See Section V on penalties in the instructions.)
70. SIGNED: Arthur De lanni Pl
Date: Dec 28, 2014 Telephone Number: 212-533-2000 PRESIDENT 71. SIGNED: Louis Garafalo T 00 Date: Dec 28, 2014 Telephone Number: 212-967-2305 TREASURER

ITEMS 10 THROUGH 21

10. During the reporting period did the labor organization create or participate in the administration of a trust or a fund or organization, as defined in the instructions, which provides benefits for members or beneficiaries?

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

11(b). During the reporting period did the labor organization have a subsidiary organization as defined in Section X of these Instructions?

12. 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?

13. 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.)

14. What is the maximum amount recoverable under the labor organization's fidelity bond for a loss caused by any officer, employee or agent of the labor organization who handled union funds?

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

. 16. Were any of the labor organization's assets pledged as security or encumbered in any way at the end of the reporting period?

17. Did the labor organization have any contingent liabilities at the end of the reporting period?

18. During the reporting period did the labor organization have any changes in its constitution or bylaws, other than rates of dues and fees, or in practices/procedures listed in the instructions?

19. What is the date of the labor organization's next regular election of officers?

Form LM-2 (Revised 2010)

FILE NUMBER: 003-105 20. How many members did the labor organization have at the end of the reporting period?

21. What are the labor organization's rates of dues and fees?

Rates of Dues and Fees								
Dues/Fees	Amount			Minimum	Maximum			
(a) Regular Dues/Fees	.69 OF Scale	per	per month	500	900			
(b) Working Dues/Fees		per						
(c) Initiation Fees	300	per	start	300	300			
(d) Transfer Fees		per						
(e) Work Permits		per						

331

\$500,000

Yes

No

No

Yes

No

No

No

No

No

11/2017

STATEMENT A - ASSETS AND LIABILITIES

ASSETS	Schedule Number	Start of Reporting Period (A)	End of Reporting Period (B)
22. Cash		\$51,136	\$31,093
23. Accounts Receivable	1		\$0
24. Loans Receivable	2		
25. U.S. Treasury Securities		\$2,930,888	\$1,094,175
26. Investments	5		\$1,510,317
27. Fixed Assets	6	\$34,800	\$24,594
28. Other Assets	7		\$71,481
29. TOTAL ASSETS		\$3,016,824	\$2,731,660

LIABILITIES

LIABILITIES	Schedule Number	Start of Reporting Period (A)	End of Reporting Period (B)
30. Accounts Payable	8	, ,	,
31. Loans Payable	9		
32. Mortgages Payable		\$0	\$0
33. Other Liabilities	10		
34. TOTAL LIABILITIES		\$0	\$0

35. NET ASSETS	\$3,016,824	\$2,731,660
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STATEMENT B - RECEIPTS AND DISBURSEMENTS

FILE NUMBER: 003-105

CASH RECEIPTS	SCH	AMOUNT	CASH DISBURSEMENTS			AMOUNT
36. Dues and Agency Fees		\$76,227	50. Representational Activities		15	\$322,612
37. Per Capita Tax			51. Political Activities and Lobbying			\$2,878
38. Fees, Fines, Assessments, Work Permits		\$0	52. Contributions, Gifts, and	Grants	17	\$3,253
39. Sale of Supplies		\$0	53. General Overhead		18	\$210,028
40. Interest					19	\$33,678
41. Dividends		Ψ-10,271	55. Benefits		20	\$74,346
		φυ	56. Per Capita Tax			\$12,149
42. Rents		\$0	57 Strike Benefits			\$0
43. Sale of Investments and Fixed Assets	3	\$1,221,210	58. Fees, Fines, Assessmen	ts, etc.		\$0
44. Loans Obtained	9		59. Supplies for Resale			\$0
45. Repayments of Loans Made	2	*****	60 Durchage of Investments and Fixed Assets			\$772,686
46. On Behalf of Affiliates for Transmittal to Them		\$276,944	61. Loans Made		2	+,
47. From Members for Disbursement on Their		\$55.639	62. Repayment of Loans Obt	tained	9	
Behalf		***	63. To Affiliates of Funds Col	lected on Their		*****
48. Other Receipts	14	\$28,033	63. To Affiliates of Funds Col Behalf			\$194,444
49. TOTAL RECEIPTS		\$1,704,324	64. On Behalf of Individual M	lembers		\$54,629
			65. Direct Taxes			\$43,664
			66. Subtotal			\$1,724,367
			67. Withholding Taxes and P	ayroll Deductions		
			67a. Total Withheld	\$111,122		
			67b. Less Total Disbursed	\$111,122		
			67c. Total Withheld But Not	Disbursed		
			68. TOTAL DISBURSEMEN	TS		\$1,724,367

SCHEDULE 1 - ACCOUNTS RECEIVABLE AGING SCHEDULE

FILE NUMBER: 003-105

Entity or Individual Name (A)	Total Account Receivable (B)	90-180 Days Past Due (C)	180+ Days Past Due (D)	Liquidated Account Receivable (E)
Total of all itemized accounts receivable	\$0	\$0	\$0	\$0
Totals from all other accounts receivable				
Totals (Total of Column (B) will be automatically entered in Item 23, Column(B))	\$0	\$0	\$0	\$0

SCHEDULE 2 - LOANS RECEIVABLE

FILE NUMBER: 003-105

List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to business enterprises regarless of amount. (A)		Loans Made During Period (C)	Pe	eceived During riod Other Than Cash (D)(2)	/ - \
Total of loans not listed above					
Total of all lines above	\$0	\$0	\$0	\$0	\$0
Totale will be automatically automad in	Item 24	Item 61	Item 45	Item 69	Item 24
Totals will be automatically entered in	Column (A)			with Explanation	Column (B)

SCHEDULE 3 - SALE OF INVESTMENTS AND FIXED ASSETS

FILE NUMBER: 003-105

Description (if land or buildings give location)	Cost	Book Value	Gross Sales Price	Amount Received
(A)	(B)	(C)	(D)	(E)
SALES OF INVESTMENTS	\$1,221,210	\$1,221,210	\$1,221,210	\$1,221,210
Total of all lines above	\$1,221,210	\$1,221,210	\$1,221,210	\$1,221,210
			Less Reinvestments	\$0
(The total from Net Sales Line	\$1,221,210			

SCHEDULE 4 - PURCHASE OF INVESTMENTS AND FIXED ASSETS

FILE NUMBER: 003-105

Description (if land or buildings, give location)	Cost	Book Value	Cash Paid
(A)	(B)	(C)	(D)
PURCHASE OF INVESTMENTS	\$772,686	\$772,686	\$772,686
Total of all lines above	\$772,686	\$772,686	\$772,686
	Less Reinvestments	\$0	
(The total from Net Purchases Line will be automatical	Net Purchases	\$772,686	

SCHEDULE 5 - INVESTMENTS

FILE NUMBER: 003-105

Description (A)	Amount (B)
Marketable Securities	
A. Total Cost	\$1,510,317
B. Total Book Value	\$1,510,317
C. List each marketable security which has a book value over \$5,000 and exceeds 5% of Line B.	
Other Investments	
D. Total Cost	
E. Total Book Value	
F. List each other investment which has a book value over \$5,000 and exceeds 5% of Line E. Also, list each subsidiary for which separate reports are attached.	
G. Total of Lines B and E (Total will be automatically entered in Item 26, Column(B))	\$1,510,317

SCHEDULE 6 - FIXED ASSETS

FILE NUMBER: 003-105

Description (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed (C)	Book Value (D)	Value (E)
A. Land (give location)	\$0		\$0	\$0
B. Buildings (give location)	\$0	\$0	\$0	\$0
C. Automobiles and Other Vehicles	\$39,549	\$25,431	\$14,118	\$14,118
D. Office Furniture and Equipment	\$91,383	\$80,908	\$10,475	\$10,475
E. Other Fixed Assets	\$50,110	\$50,109	\$1	\$1
F. Totals of Lines A through E (Column(D) Total will be automatically entered in Item 27, Column(B))	\$181,042	\$156,448	\$24,594	\$24,594

SCHEDULE 7 - OTHER ASSETS

FILE NUMBER: 003-105

Description	Book Value
(Á)	(B)
SECURITY DEPOSITS	\$28,753
PREPAID EXPENSES	\$18,359
INTEREST RECEIVABLE	\$12,635
DUE FROM AFFILIATE	\$11,734
Total (Total will be automatically entered in Item 28, Column(B))	\$71,481

SCHEDULE 8 - ACCOUNTS PAYABLE AGING SCHEDULE

FILE NUMBER: 003-105

Entity or Individual Name (A)	Total Account Payable (B)	90-180 Days Past Due (C)	180+ Days Past Due (D)	Liquidated Account Payable (E)
Total for all itemized accounts payable	\$0	\$0	\$0	\$0
Total from all other accounts payable	\$0	\$0	\$0	\$0
Totals (Total for Column(B) will be automatically entered in Item 30, Column(D))	\$0	\$0	\$0	\$0

SCHEDULE 9 - LOANS PAYABLE

FILE NUMBER: 003-105

Source of Loans Payable at Any Time During the Reporting Period (A)	Loans Owed at Start of Period (B)	Loans Obtained During Period (C)	Repayment During Period Cash (D)(1)	Repayment During Period Other Than Cash (D)(2)	Loans Owed at End of Period (E)
Total Loans Payable	\$0	\$0	\$0	\$0	\$0
Totals will be automatically entered in	Item 31	Item 44	Item 62	Item 69	Item 31
Totals will be automatically entered in	Column (C)			with Explanation	Column (D)

SCHEDULE 10 - OTHER LIABILITIES

FILE NUMBER: 003-105

Description (A)	Amount at End of Period (B)
Total Other Liabilities (Total will be automatically entered in Item 33, Column(D))	\$0

FILE NUMBER: 003-105

SCHEDULE 11 - ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

	(A) Name	(B) Title		(C) Status	Disbu (bef	(D) ss Salar rsemer fore any luctions	nts /	(E) Allowances Disbursed		for	(F) ursements r Official usiness	re	(G) Other urseme eported throug	ents not I in	7	(H) FOTAL
В	<mark>DE IANNI,A</mark> PRESIDENT C	RTHUR				\$176,	542	\$	0		\$1,315			\$0		\$177,857
ı	Schedule 15 Representatio	nal Activities	85 %	Schedule 16 Political Activ		1 %		nedule 17 ntributions	ľ	1 %	Schedule 1 General Ov		3 %	Schedule Administr		10 %
A B C	MURRAY , JA VICE PRESID C						\$0	\$	0		\$4,642			\$0		\$4,642
ı	Schedule 15 Representatio	nal Activities	85 %	Schedule 16 Political Activand Lobbying		1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr		10 %
A B C	GARAFOLA , SECRETARY- C						\$0	\$	0		\$2,168			\$0		\$2,168
I	Schedule 15 Representatio		85 %	Schedule 16 Political Activ and Lobbying		1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr		10 %
A B C	LO MONTE , CHAIR EXEC C		E				\$0	\$	0		\$6,240			\$0		\$6,240
I	Schedule 15 Representatio		85 %	Schedule 16 Political Activ and Lobbying		1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr		10 %
	RODAK,MA EXEC BD CE: C						\$0	\$	0		\$1,920			\$0		\$1,920
I	Schedule 15 Representatio		85 %	Schedule 16 Political Activ and Lobbying		1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr		10 %
В	HEDGECOKE EXECUTIVE (C						\$0	\$	0		\$899			\$0		\$899
I	Schedule 15 Representatio		85 %	Schedule 16 Political Activ and Lobbying		1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr		10 %
A B C	MARTINEZ , EXECUTIVE (C						\$0	\$	0		\$899			\$0		\$899
\vdash	Schedule 15 Representatio		85 %	Schedule 16 Political Activ and Lobbying	/ities	1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr		10 %
В	NATUSCH , E EXECUTIVE (C						\$0	\$	0		\$824			\$0		\$824
ı	Schedule 15 Representatio		85 %	Schedule 16 Political Activ and Lobbying	/ities	1 %		nedule 17 ntributions		1 %	Schedule 1 General O		3 %	Schedule Administr		10 %
	MANTELMAN EXECUTIVE (C						\$0	\$	0		\$2,161			\$0		\$2,161
L	Schedule 15 Representatio		85 %	Schedule 16 Political Activ and Lobbying	/ities	1 %		nedule 17 ntributions	Ĺ	1 %	Schedule 1 General O		3 %	Schedule Administr		10 %
	BASILE , STE EXECUTIVE (C		TOR				\$0	\$	0		\$5,097			\$0		\$5,097
ı	Schedule 15 Representatio			Schedule 16 Political Activ and Lobbying	/ities	1 %	Cor	nedule 17 ntributions	L	1 %	Schedule 1 General O	/erhead	3 %	Schedule Administr	ation	10 %
_	tal Officer Dis		3		-	\$176	,542	\$	0		\$26,165			\$0		\$202,707
_	ss Deduction				-				4			-				****
Ne	t Disburseme	ents														\$202,707

SCHEDULE 12 - DISBURSEMENTS TO EMPLOYEES

FILE NUMBER: 003-105

	(A) Name	(B) Title	(C) Other Payer	(D) Gross Salary Disbursements (before any deductions)		ents ny	(E) Allowances Disbursed		(F) Disbursements for Official Business		(G) Other Disbursements not reported in (D) through (F)		ted in	(H) TOTA	ιL
A B C		NNI , STEVEN E ORGANIZER		\$73,945)	\$0	\$1,345				\$0	\$	75,290	
I	Schedule 15 Representation	nal Activities	Schedule 16 80 % Political Activi and Lobbying		1 1 %		dule 17 ributions	1	٧/۵	Schedule 18 General Over	head	3 %	Schedule Administ		15 %
A B C	EATON , NICH ORGANIZER NONE	HOLAS			\$9	9,750									\$9,750
I	Schedule 15 Representation	ıal Activities	Schedule 16 80 % Political Activi and Lobbying		1 1 %		dule 17 ributions	1	%	Schedule 18 General Over	head	3 %	Schedule Administ		15 %
	OTALS RECEIV 0,000 OR LESS		LOYEES MAKING												\$0
1	Schedule 15 Representation	nal Activities	Schedule 16 Political Activ	ities a	nd Lob	bying	Sched Contrib			Schedu Genera		rhead		nedule 19 ninistration	
-	tal Employee [nts		\$83	,695	\$	0		\$1,345			\$(\$	85,040
F	ss Deductions							+							
Ne	t Disbursemer	nts												\$	85,040

SCHEDULE 13 - MEMBERSHIP STATUS

FILE NUMBER: 003-105

Category of Membership	Number	Voting Eligibility					
(A)	(B)	(C)					
ELIGIBLE VOTING MEMBERS	331	Yes					
Members (Total of all lines above)	331						
Agency Fee Payers*	0						
Total Members/Fee Payers	331						
*Agency Fee Payers are not considered members of the labor organization.							

DETAILED SUMMARY PAGE - SCHEDULES 14 THROUGH 19

\$0
\$0
\$28,033
\$28,033
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

SCHEDULE 15 REPRESENTATIONAL ACTIV	ITIES
Named Payee Itemized Disbursements	\$66,761
Named Payee Non-itemized Disbursements	\$13,108
3. To Officers	\$172,300
4. To Employees	\$68,032
5. All Other Disbursements	\$2,411
6. Total Disbursements	\$322,612
SCHEDULE 16 POLITICAL ACTIVITIES AND LO	BBYING
Named Payee Itemized Disbursements	\$0
Named Payee Non-itemized Disbursements	\$0
3. To Officers	\$2,027
4. To Employees	\$851
5. All Other Disbursements	\$0
6. Total Disbursement	\$2,878

Form LM-2 (Revised 2010)

SCHEDULE 17 CONTRIBUTIONS, GIFTS & GRANTS					
Named Payee Itemized Disbursements	\$0				
Named Payee Non-itemized Disbursements	\$0				
3. To Officers	\$2,027				
4. To Employees	\$851				
5. All Other Disbursements	\$375				
6. Total Disbursements	\$3,253				

FILE NUMBER: 003-105

SCHEDULE 18 GENERAL OVERHEAD				
Named Payee Itemized Disbursements	\$86,335			
Named Payee Non-itemized Disbursements	\$81,461			
3. To Officers	\$6,082			
4. To Employees	\$2,552			
5. All Other Disbursements	\$33,598			
6. Total Disbursements	\$210,028			
SCHEDULE 19 UNION ADMINISTRATION				
Named Payee Itemized Disbursements	\$0			
Named Payee Non-itemized Disbursements	\$0			
3. To Officers	\$20,271			
4. To Employees	\$12,757			
5. All Other Disbursements	\$650			
6. Total Disbursements	\$33,678			

SCHEDULE 14 - OTHER RECEIPTS

There was no data found for this schedule.

SCHEDULE 15 - REPRESENTATIONAL ACTIVITIES

FILE NUMBER: 003-105

Name and Address (A)			
BRYAN CAVE LLP	Purpose	Date	Amount
	(C)	(D)	(E)
1290 AVENUE OF THE AMERICAS	ARBITRATION EXPENSE	06/19/2014	\$5,362
NEW YORK	ARBITRATION EXPENSE	08/19/2014	\$8,266
NY	Total Itemized Transactions with this Payee/Payer		\$13,628
10104	Total Non-Itemized Transactions with this Payee/Pa	ayer	\$5,001
Type or Classification (B)	Total of All Transactions with this Payee/Payer	for This Schedule	\$18,629
VARIOUS ARBITRATIONS			
Name and Address	Purpose	Date	Amount
(A)	(C)	(D)	(E)
LEVY RATNER PC	LEGAL FEES	10/03/2013	\$6,684
	LEGAL FEES	11/07/2013	\$7,493
80 EIGHTH AVENUE	LEGAL FEES	12/10/2013	\$6,769
NEW YORK	LEGAL FEES	01/07/2014	\$6,899
NY	LEGAL FEES	02/14/2014	\$6,677
10011-5126	LEGAL FEES	03/02/2014	\$6,434
Type or Classification	LEGAL FEES	04/08/2014	\$6,050
(B)	LEGAL FEES	05/08/2014	\$6,127
LEGAL FEES	Total Itemized Transactions with this Payee/Payer	\$53,133	
	Total Non-Itemized Transactions with this Payee/Pa	ayer	\$712
	Total of All Transactions with this Payee/Payer		\$53,845
Name and Address (A) VERIZON (AND VERIZON WIRELESS)			
15124 `	Purpose	Date	Amount
	(C)	(D)	(E)
ALBANY	Total Itemized Transactions with this Payee/Payer		
NY	Total Non-Itemized Transactions with this Payee/Pa	\$7,395	
12212	Total of All Transactions with this Payee/Payer	\$7,395	
Type or Classification (B)			
TELEPHONE AND COMMUNICATIONS			

SCHEDULE 16 - POLITICAL ACTIVITIES AND LOBBYING

FILE NUMBER 003-105

There was no data found for this schedule.

SCHEDULE 17 - CONTRIBUTIONS, GIFTS & GRANTS

FILE NUMBER: 003-105

There was no data found for this schedule.

SCHEDULE 18 - GENERAL OVERHEAD

FILE NUMBER: 003-105

Name and Address	Purpose	Date	Amount
(A) AM PROPERTY HOLDING	(C)	(D)	(E)
AM PROPERTY HOLDING	RENT	10/01/2013 11/01/2013	\$5,11
52 SEVENTH AVENUE	RENT	12/01/2013	\$5,11 \$5,11
IEW YORK	RENT	01/02/2014	\$5,1
IY	RENT	02/03/2014	\$5,1°
0001	RENT	03/03/2014	
Type or Classification	RENT	04/01/2014	\$5,1° \$3,2°
(B)			
RENT	RENT RENT	05/01/2014	\$3,2
	RENT	06/02/2014 07/01/2014	\$3,2
		07/01/2014	\$3,2
	Total Itemized Transactions with this Payee/Payer		\$43,7
	Total Non-Itemized Transactions with this Payee/Pa		\$6,6
	Total of All Transactions with this Payee/Payer for	or This Schedule	\$50,38
Name and Address			
(A)	_		
BIH COMPUTER SERVICES			
265	Purpose	Date	Amount
ANIAL OMINIK	(C)	(D)	(E)
ANALOMINK	Total Itemized Transactions with this Payee/Payer		` '
A 8320	Total Non-Itemized Transactions with this Payee/Pa	yer	\$28,2
	Total of All Transactions with this Payee/Payer for		\$28,2
Type or Classification			, -,
(B)	_		
SYSTEM UPGRADES AND COMPUTER			
SUPPORT			
Name and Address			
(A)	_		
BUTWIN INSURANCE GROUP	Purpose	Date	Amount
	(C)	(D)	(E)
0 CUTTERMILL ROAD	INSURANCE- LIABILITY ÉTC	05/06/2014	\$13,2
GREAT NECK	Total Itemized Transactions with this Payee/Payer		\$13,2
NY	Total Non-Itemized Transactions with this Payee/Pa	ver	, -,
1021-3104	Total of All Transactions with this Payee/Payer for	or This Schedule	\$13,2
Type or Classification	Total of All Transactions with this Payour ayor is	or rino concuano	Ψ10,2
(B)			
NSURANCE			
Name and Address			
(A)			
PRINTING PUBLISHING AND MEDIA			
WORKERS			
	Purpose	Date	Amount
352 SEVENTH AVENUE		(D)	
DOL OF A LIMITAN FINOE	(C)	(-)	(E)
NEW YORK	Total Itemized Transactions with this Payee/Payer		(E)
NEW YORK			(E) \$35,5
NEW YORK NY 10001	Total Itemized Transactions with this Payee/Payer	yer	\$35,5
NEW YORK NY 10001 Type or Classification	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa	yer	\$35,5
NEW YORK NY 10001	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa	yer	\$35,5
NEW YORK NY 10001 Type or Classification (B)	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa	yer	\$35,5
NEW YORK NY 10001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa	yer	\$35,5
NEW YORK NY 10001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa	yer	\$35,5
NEW YORK NY 0001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL SERVICES	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa	yer	\$35,5
NEW YORK NY 0001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL SERVICES Name and Address (A)	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa	yer	\$35,5
NEW YORK NY 0001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL SERVICES Name and Address (A)	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa	yer	\$35,5
NEW YORK NY 10001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL SERVICES Name and Address (A) RAMIREZ ASSET MANAGEMENT	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa Total of All Transactions with this Payee/Payer for the Total of All Transactions with the Total of All Transac	yer or This Schedule	\$35,5 \$35,5
NEW YORK NY 0001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL SERVICES Name and Address (A) RAMIREZ ASSET MANAGEMENT IT BRAODWAY	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa Total of All Transactions with this Payee/Payer for the second	yer or This Schedule	\$35,5 \$35,5
NEW YORK NY 10001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL SERVICES Name and Address (A) RAMIREZ ASSET MANAGEMENT SI BRAODWAY NEW YORK	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa Total of All Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Purpose (C) Total Itemized Transactions with this Payee/Payer	yer or This Schedule Date (D)	\$35,5 \$35,5 Amount (E)
NEW YORK NY NO001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL SERVICES Name and Address (A) RAMIREZ ASSET MANAGEMENT ST BRAODWAY NEW YORK	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa Total of All Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Payer (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Paye	per Date (D)	\$35,5 \$35,5 Amount (E)
NEW YORK NY NO001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL SERVICES Name and Address (A) RAMIREZ ASSET MANAGEMENT ST BRAODWAY NEW YORK NY 10006	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa Total of All Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Purpose (C) Total Itemized Transactions with this Payee/Payer	per Date (D)	\$35,5 \$35,5 Amount (E)
NEW YORK NY 10001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL SERVICES Name and Address (A) RAMIREZ ASSET MANAGEMENT S1 BRAODWAY NEW YORK NY 10006 Type or Classification	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa Total of All Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Payer (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Paye	per Date (D)	\$35,5 \$35,5 Amount (E)
NEW YORK NY 0001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL SERVICES Name and Address (A) RAMIREZ ASSET MANAGEMENT ST BRAODWAY NEW YORK NY 10006 Type or Classification (B)	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa Total of All Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Payer (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Paye	per Date (D)	\$35,5 \$35,5 Amount (E)
NEW YORK NY 0001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL SERVICES Name and Address (A) RAMIREZ ASSET MANAGEMENT SI BRAODWAY NEW YORK NY 10006 Type or Classification (B) NVESTMENT MANAGEMENT FEES	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa Total of All Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Payer (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Paye	per Date (D)	\$35,5 \$35,5 Amount (E)
NEW YORK NY NO001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL SERVICES Name and Address (A) RAMIREZ ASSET MANAGEMENT ST BRAODWAY NEW YORK NY NO006 Type or Classification (B) NVESTMENT MANAGEMENT FEES Name and Address	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa Total of All Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Payer (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Paye	per Date (D)	\$35,5 \$35,5
NEW YORK NY NO001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL SERVICES Name and Address (A) RAMIREZ ASSET MANAGEMENT ST BRAODWAY NEW YORK NY 10006 Type or Classification (B) NVESTMENT MANAGEMENT FEES Name and Address (A)	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa Total of All Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Payer (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Paye	per Date (D)	\$35,5 \$35,5 Amount (E)
JEW YORK JY 0001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL SERVICES Name and Address (A) RAMIREZ ASSET MANAGEMENT SI BRAODWAY JEW YORK JY 0006 Type or Classification (B) NVESTMENT MANAGEMENT FEES Name and Address (A) JS BANK	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa Total of All Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total with the Payee/Payer for Total with this Payee/Payer for Total with the Payee/Payer for Total with this Payee/Payer	Date (D) yer or This Schedule	\$35,5 \$35,5 \$35,5 Amount (E) \$5,0 \$5,0
JEW YORK JY 0001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL SERVICES Name and Address (A) RAMIREZ ASSET MANAGEMENT SI BRAODWAY JEW YORK JY 0006 Type or Classification (B) NVESTMENT MANAGEMENT FEES Name and Address (A) JS BANK	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa Total of All Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Purpose	Date (D) yer or This Schedule	\$35,5 \$35,5 Amount (E) \$5,0 \$5,0
JEW YORK JY 0001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL SERVICES Name and Address (A) RAMIREZ ASSET MANAGEMENT JEW YORK JY 0006 Type or Classification (B) NVESTMENT MANAGEMENT FEES Name and Address (A) JS BANK 10870	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa Total of All Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer for Total of All Tran	Date (D) yer or This Schedule	\$35,5 \$35,5 \$35,5 Amount (E) \$5,0 \$5,0
NEW YORK NY 10001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL SERVICES Name and Address (A) RAMIREZ ASSET MANAGEMENT ST BRAODWAY NEW YORK NY 10006 Type or Classification (B) NVESTMENT MANAGEMENT FEES Name and Address (A) US BANK 10870 ST PAUL	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Pa Total of All Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total Itemized Transactions with this Payee/Payer for Total Itemized Transactions with this Payee/Payer for Total Itemized Transactions with this Payee/Payer	Date (D) yer or This Schedule Date (D) yer or This Schedule	\$35,5 \$35,5 \$35,5 Amount (E) \$5,0
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NEW YORK NY 10001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL SERVICES Name and Address (A) RAMIREZ ASSET MANAGEMENT ST BRAODWAY NEW YORK NY 10006 Type or Classification (B) NVESTMENT MANAGEMENT FEES Name and Address (A) US BANK 10870 ST PAUL MN 155170 Type or Classification (B) NVESTMENT MANAGEMENT FEE	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total Itemized Transactions with this Payee/Payer Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for Total of All Trans	Date (D) yer or This Schedule Date (D) yer or This Schedule	\$35,5 \$35,5 \$35,5 Amount (E) \$5,0 \$5,0 \$6,0
NEW YORK NY 10001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL SERVICES Name and Address (A) RAMIREZ ASSET MANAGEMENT ST BRAODWAY NEW YORK NY 10006 Type or Classification (B) NVESTMENT MANAGEMENT FEES Name and Address (A) ST PAUL MN 15170 Type or Classification (B) NY 15170 Type or Classification	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Purpose	Date (D) yer Date (D) yer Date (D) yer This Schedule	\$35,5 \$35,5 \$35,5 Amount (E) \$5,0 \$5,0 \$6,0
NEW YORK NY 10001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL SERVICES Name and Address (A) RAMIREZ ASSET MANAGEMENT S1 BRAODWAY NEW YORK NY 10006 Type or Classification (B) NVESTMENT MANAGEMENT FEES Name and Address (A) ST PAUL MN 155170 Type or Classification (B) NVESTMENT MANAGEMENT FEE Name and Address (A) NVESTMENT MANAGEMENT FEE Name and Address (A)	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total Itemized Transactions with this Payee/Payer Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for Total of All Trans	Date (D) yer or This Schedule Date (D) yer or This Schedule	\$35,5 \$35,5 \$35,5 Amount (E) \$5,0 \$5,0 \$6,0 \$6,0
NEW YORK NY 10001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL SERVICES Name and Address (A) RAMIREZ ASSET MANAGEMENT ST BRAODWAY NEW YORK NY 10006 Type or Classification (B) NVESTMENT MANAGEMENT FEES Name and Address (A) ST PAUL MN 15170 Type or Classification (B) NY 15170 Type or Classification	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Purpose (C) Purpose (C)	Date (D) yer Date (D) yer Date (D) yer This Schedule	\$35,5 \$35,5 \$35,5 \$35,5 Amount (E) \$5,0 \$5,0 \$6,0
IEW YORK IY 00001 Type or Classification (B) REIMBURSEMENT FOR CLERICAL IERVICES Name and Address (A) RAMIREZ ASSET MANAGEMENT 1 BRAODWAY IEW YORK IY 00006 Type or Classification (B) NVESTMENT MANAGEMENT FEES Name and Address (A) IS BANK 0870 IT PAUL IN 5170 Type or Classification (B) NVESTMENT MANAGEMENT FEE Name and Address (A) IN Type or Classification (B) NVESTMENT MANAGEMENT FEE Name and Address (A)	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer for Total of All Transactions with this Payee/Payer for Purpose	Date (D) Date (D) yer or This Schedule Date (D) yer or This Schedule Date (D) yer or This Schedule	\$35,5 \$35,5 \$35,5 Amount (E) \$5,0 \$5,0 \$6,0 Amount (E)

003-105 (LM2) 09/30/2014

NEW YORK	Purpose	Date	Amount
NY	(C)	(D)	(E)
10001	AUDIT - 990- LM-2	12/17/2013	\$14,700
Type or Classification	AUDIT WORK	07/01/2014	\$14,700
(B)	Total Itemized Transactions with this Payee/Payer	\$29,400	
AUDITOR	Total Non-Itemized Transactions with this Payee/Page 1		
Form LM-2 (Revised 2010)	for This Schedule	\$29,400	

SCHEDULE 19 - UNION ADMINISTRATION

FILE NUMBER: 003-105

There was no data found for this schedule.

SCHEDULE 20 - BENEFITS

FILE NUMBER: 003-105

Description	To Whom Paid	Amount
(A)	(B)	(C)
401 K	NY TYPO 401 K	\$51,355
WELFARE CONTRIBUTIONS	PRINTING PUBLISHERS & MEDIA WORKERS	\$22,991
Total of all lines above (Total will be automatically entered in Item 55.)		\$74,346

69. ADDITIONAL INFORMATION SUMMARY

FILE NUMBER: 003-105

Question 10: THE UNION PAYS BENEFITS TO THE CWA LOCAL 14156-PRINTERS PUBLISHERS AND MEDIA WORKERS BENEFIT FUND. THE FUND IS LOCATED AT 352 SEVENTH AVENUE- ROOM 601, NEW YORK, NY 10001

Question 12: AUDIT PERFORMED BY THE CPA FIRM OF VOLK & VALANE LLC, LOCATED AT 39 WEST 32ND STREET, SUITE 1600-B, NEW YORK, NY 10001.

Schedule 13, Row1:LISTED ARE THE MEMBERS ELIGIBLE TO VOTE, THERE ARE CURRENTLY NO AGENCY FEE PAYERS ONLY FULL VOTING MEMBERS

Schedule 13, Row1: Form LM-2 (Revised 2010)

Frequently Asked Questions | Freedom of Information Act | Privacy & Security Statement | Disclaimers | Customer Survey | Important Web Site Notices

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April 18, 2019 DOL Home > OLMS > Public Disclosure Home > Search Criteria > Report

Printable View

FORM LM-2 LABOR ORGANIZATION ANNUAL **REPORT**

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

MUST BE USED BY LABOR ORGANIZATIONS WITH \$250,000 OR MORE IN TOTAL ANNUAL RECEIPTS AND LABOR ORGANIZATIONS IN TRUSTEESHIP

Form Approved Office of Management and Budget No. 1245-0003 Expires: 08-31-2016

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 Fro	PERIOD COVERED om 10/01/2014 rough 09/30/2015	(b)	AMENDED - Is this an amended HARDSHIP - Filed under the har TERMINAL - This is a terminal re	rdship procedures:	No No No
4. AFFILIATION OR ORGANIZATION NAME 8. MAILING ADDRESS (Type or print in capital letters)						
COMMUNICATIONS WORKERS AFL-CIO			First Name	Last Name		
5. DESIGNATION (Local, Lodge, etc.) 6. DESIGNATION NBR		NBR	ARTHUR	DELANNI		
LOCAL UNION 14156			P.O Box - Building and Room Number			
7. UNIT NAME (if any)		ROOM 601				
				Number and Street		
				352 SEVENTH AVENUE		
Are your organization's records kept at its mailing address? Yes			City NEW YORK			
			State NY	ZIP Code + 4 10001		

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 information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned individual's knowledge and belief, true, correct and complete (See Section V on penalties in the instructions.)
70. SIGNED: Arthur De lanni Pl
Date: Dec 30, 2015 Telephone Number: 212-533-2000 PRESIDENT 71. SIGNED: Louis Garafalo T 00 Date: Dec 30, 2015 Telephone Number: 212-967-2305 TREASURER

ITEMS 10 THROUGH 21

10. During the reporting period did the labor organization create or participate in the administration of a trust or a fund or organization, as defined in the instructions, which provides benefits for members or beneficiaries?

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

11(b). During the reporting period did the labor organization have a subsidiary organization as defined in Section X of these Instructions?

12. 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?

13. 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.)

14. What is the maximum amount recoverable under the labor organization's fidelity bond for a loss caused by any officer, employee or agent of the labor organization who handled union funds?

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

. 16. Were any of the labor organization's assets pledged as security or encumbered in any way at the end of the reporting period?

17. Did the labor organization have any contingent liabilities at the end of the reporting period?

18. During the reporting period did the labor organization have any changes in its constitution or bylaws, other than rates of dues and fees, or in practices/procedures listed in the instructions?

19. What is the date of the labor organization's next regular election of officers?

Form LM-2 (Revised 2010)

FILE NUMBER: 003-105 20. How many members did the labor organization have at the end of the reporting period?

328

21. What are the labor organization's rates of dues and fees?

Rates of Dues and Fees						
Dues/Fees	Amount		Unit	Minimum	Maximum	
(a) Regular Dues/Fees	.69 OF SCALE	per	MONTH	550	900	
(b) Working Dues/Fees		per				
(c) Initiation Fees	300	per	START	300	300	
(d) Transfer Fees		per				
(e) Work Permits		per				

\$500,000

No

Yes

No

No

Yes

No

No

No

No

11/2017

FILE NUMBER: 003-105

STATEMENT A - ASSETS AND LIABILITIES



ASSETS	Schedule Number	Start of Reporting Period (A)	End of Reporting Period (B)
22. Cash		\$31,093	\$24,172
23. Accounts Receivable	1		\$0
24. Loans Receivable	2		
25. U.S. Treasury Securities		\$1,094,175	\$1,129,604
26. Investments	5	\$1,510,317	\$816,171
27. Fixed Assets	6	\$24,594	\$142,980
28. Other Assets	7	\$71,481	\$66,609
29. TOTAL ASSETS		\$2,731,660	\$2,179,536

LIABILITIES

LIABILITIES	Schedule Number	Start of Reporting Period (A)	End of Reporting Period (B)
30. Accounts Payable	8		
31. Loans Payable	9		
32. Mortgages Payable		\$0	\$0
33. Other Liabilities	10		\$208,379
34. TOTAL LIABILITIES		\$0	\$208,379

|--|

STATEMENT B - RECEIPTS AND DISBURSEMENTS

FILE NUMBER: 003-105

CASH RECEIPTS	SCH	AMOUNT	CASH DISBURSEMENTS			AMOUNT
36. Dues and Agency Fees		\$134,757	50. Representational Activities			\$341,716
37. Per Capita Tax		\$0	51. Political Activities and Lo	bbying	16	\$2,771
38. Fees, Fines, Assessments, Work Permits		\$0	52. Contributions, Gifts, and	Grants	17	\$3,146
39. Sale of Supplies		\$0	53. General Overhead		18	\$133,043
40. Interest					19	\$32,895
41. Dividends		Ψ20,7 11 \$0	55. Benefits		20	\$74,658
42. Rents		Φ0	56. Per Capita Tax			\$13,341
42. Rents 43. Sale of Investments and Fixed Assets	2	ΦE7E 000	57. Strike Benefits			\$0
43. Sale of investments and Fixed Assets 44. Loans Obtained	9	\$575,000	58. Fees, Fines, Assessmen	58. Fees, Fines, Assessments, etc.		
44. Loans Obtained 45. Repayments of Loans Made	2		59. Supplies for Resale			\$0
46. On Behalf of Affiliates for Transmittal to Them		\$65.141	60. Purchase of Investments and Fixed Assets			\$109,750
47. From Members for Disbursement on Their		φ00, 14 i	61. Loans Made		2	
Behalf			62. Repayment of Loans Obtained		9	
48. Other Receipts	14	\$31,578	63. To Affiliates of Funds Col	63. To Affiliates of Funds Collected on Their Behalf		
49. TOTAL RECEIPTS		\$843,187	Benair 64. On Behalf of Individual M			\$65,141 \$54,747
				iembers		
			65. Direct Taxes			\$18,900
			66. Subtotal			\$850,108
			67. Withholding Taxes and P	ayroll Deductions		, , , , , , ,
			67a. Total Withheld	\$64,722		
			67b. Less Total Disbursed	\$64,722		
			67c. Total Withheld But Not Disbursed			
			68. TOTAL DISBURSEMEN	TS		\$850,108

SCHEDULE 1 - ACCOUNTS RECEIVABLE AGING SCHEDULE

FILE NUMBER: 003-105

Entity or Individual Name (A)	Total Account Receivable (B)	90-180 Days Past Due (C)	180+ Days Past Due (D)	Liquidated Account Receivable (E)
Total of all itemized accounts receivable	\$0	\$0	\$0	\$0
Totals from all other accounts receivable				
Totals (Total of Column (B) will be automatically entered in Item 23, Column(B))	\$0	\$0	\$0	\$0

SCHEDULE 2 - LOANS RECEIVABLE

FILE NUMBER: 003-105

List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to business enterprises regarless of amount. (A)		Loans Made During Period (C)	' '	Received During eriod Other Than Cash (D)(2)	Loans Outstanding at End of Period (E)
Total of loans not listed above					
Total of all lines above	\$0	\$0	\$	50 \$0	\$0
Totals will be automatically entered in	Item 24 Column (A)	Item 61	Item 45	Item 69 with Explanation	Item 24 Column (B)

SCHEDULE 3 - SALE OF INVESTMENTS AND FIXED ASSETS

FILE NUMBER: 003-105

Description (if land or buildings give location)	Cost	Book Value	Gross Sales Price	Amount Received
(A)	(B)	(C)	(D)	(E)
SALE OF INVESTMENTS IN DEFENSE FUND	\$575,000	\$575,000	\$575,000	\$575,000
Total of all lines above	\$575,000	\$575,000	\$575,000	\$575,000
	\$0			
(The total from Net Sales Line	\$575,000			

SCHEDULE 4 - PURCHASE OF INVESTMENTS AND FIXED ASSETS

FILE NUMBER: 003-105

Description (if land or buildings, give location)	Cost	Book Value	Cash Paid
(A)	(B)	(C)	(D)
DEPOSIT ON BUILDING -1460 MORRIS AVENUE- UNION, NJ	\$109,750	\$109,750	\$109,750
Total of all lines above	\$109,750	\$109,750	\$109,750
	Less Reinvestments	\$0	
(The total from Net Purchases Line will be automatica	Net Purchases	\$109,750	

SCHEDULE 5 - INVESTMENTS

FILE NUMBER: 003-105

Description (A)	Amount (B)
Marketable Securities	
A. Total Cost	\$816,171
B. Total Book Value	\$816,171
C. List each marketable security which has a book value over \$5,000 and exceeds 5% of Line B.	
LSV ASSET MGMT	\$100,930
Other Investments	
D. Total Cost	
E. Total Book Value	
F. List each other investment which has a book value over \$5,000 and exceeds 5% of Line E. Also, list each subsidiary for which separate reports are attached.	
G. Total of Lines B and E (Total will be automatically entered in Item 26, Column(B))	\$816,171

SCHEDULE 6 - FIXED ASSETS

FILE NUMBER: 003-105

Description (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed (C)	Book Value (D)	Value (E)
A. Land (give location)	\$0		\$0	\$0
B. Buildings (give location)				
Building 1: 1460 MORRIS AVENUE, UNION, NJ DEPOSIT	\$109,750	\$0	\$109,750	\$109,750
C. Automobiles and Other Vehicles	\$39,549	\$17,606	\$21,943	\$21,943
D. Office Furniture and Equipment	\$91,383	\$80,097	\$11,286	\$11,286
E. Other Fixed Assets	\$50,110	\$50,109	\$1	\$50,110
F. Totals of Lines A through E (Column(D) Total will be automatically entered in Item 27, Column(B))	\$290,792	\$147,812	\$142,980	\$193,089

SCHEDULE 7 - OTHER ASSETS

FILE NUMBER: 003-105

Description	Book Value
(A)	(B)
SECURITY DEPOSIT	\$28,752
DUE FROM WELFARE FUND	\$19,761
UNEXPIRED INSURANCE	\$18,064
EXHANGES	\$32
Total (Total will be automatically entered in Item 28, Column(B))	\$66,609

SCHEDULE 8 - ACCOUNTS PAYABLE AGING SCHEDULE

FILE NUMBER: 003-105

Entity or Individual Name (A)	Total Account Payable (B)	90-180 Days Past Due (C)	180+ Days Past Due (D)	Liquidated Account Payable (E)
Total for all itemized accounts payable	\$0	\$0	\$0	\$0
Total from all other accounts payable	\$0	\$0	\$0	\$0
Totals (Total for Column(B) will be automatically entered in Item 30, Column(D))	\$0	\$0	\$0	\$0

SCHEDULE 9 - LOANS PAYABLE

FILE NUMBER: 003-105

Source of Loans Payable at Any Time During the Reporting Period (A)	Loans Owed at Start of Period (B)	Loans Obtained During Period (C)	Repayment During Period Cash (D)(1)	Repayment During Period Other Than Cash (D)(2)	Loans Owed at End of Period (E)
Total Loans Payable	\$0	\$0	\$0	\$0	\$0
Totals will be automatically entered in	Item 31	Item 44	Item 62	Item 69	Item 31
Totals will be automatically entered in	Column (C)			with Explanation	Column (D)

SCHEDULE 10 - OTHER LIABILITIES

FILE NUMBER: 003-105

Description	Amount at End of Period
(A)	(B)
EXCHANGE ACCOUNT & INTERFUND EXPENSE REIMBURSEMENT	\$208,379
Total Other Liabilities (Total will be automatically entered in Item 33, Column(D))	\$208,379

SCHEDULE 11 - ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

			_			(D)		(E)	_		(F)		(G)			(H)	
	(A) Name	(B) Title	4	(C) Status	Gros Disbu (bef	s Salar rsemer ore any uctions	its	Allowances Disbursed		for	ursements Official usiness	re	Other	ents not I in	Т	OTA	L
В	DE IANNI,AI PRESIDENT C	RTHUR				\$163,	625	\$0	0		\$768			\$0		\$16	64,393
ш	Schedule 15 Representatio	nal Activities	85 % F	Schedule 16 Political Activand Lobbying		1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr			10 %
В	MURRAY, JA VICE-PRESID C						\$0	\$(0					\$4,994		\$	\$4,994
ш	Schedule 15 Representatio	nal Activities	85 % F	Schedule 16 Political Activ and Lobbying		1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr			10 %
В	GARAGOLA , SECRETARY- C		R				\$0	\$(0		\$2,554			\$0		\$	\$2,554
ı	Schedule 15 Representatio		85 % F	Schedule 16 Political Activand Lobbying		1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr			10 %
В	LO MONTE , CHAIR- EXEC C						\$0	\$(0		\$3,448			\$0		\$	\$3,448
	Schedule 15 Representatio		85 % F	Schedule 16 Political Activ and Lobbying		1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr			10 %
В	RODAK,MA EXEC BD SEC C						\$0	\$(0		\$1,690			\$0		\$	\$1,690
l	Schedule 15 Representatio		85 % F	Schedule 16 Political Activ and Lobbying		1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr			10 %
В	HEDGECOKE EXECUTIVE (C		NIE				\$0	\$(0		\$897			\$0			\$897
ш	Schedule 15 Representatio	nal Activities	85 % F	Schedule 16 Political Activand Lobbying		1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr			10 %
В	MARTINEZ , . EXECUTIVE (C						\$0	\$(0		\$823			\$0			\$823
ш	Schedule 15 Representatio	nal Activities	85 % F	Schedule 16 Political Activand Lobbying		1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr			10 %
В	NATUSCH , E EXECUTIVE (C						\$0	\$(0		\$748			\$0			\$748
l	Schedule 15 Representatio		85 % F	Schedule 16 Political Activand Lobbying		1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr			10 %
В	MANTLEMAN EXECUTIVE (C						\$0	\$(0		\$1,435			\$0		\$	\$1,435
	Schedule 15 Representatio	nal Activities	85 % F	Schedule 16 Political Activand Lobbying		1 %		nedule 17 ntributions		1 %	Schedule 1 General Ov		3 %	Schedule Administr			10 %
В	BASILE , STE EXEC COMM C						\$0	\$0	0		\$5,836			\$0		\$	\$5,836
	Schedule 15 Representatio	nal Activities	85 % F	Schedule 16 Political Activand Lobbying		1 %		nedule 17 ntributions	j.	1 %	Schedule 1 General Ov		3 %	Schedule Administr			10 %
То	tal Officer Dis	bursements				\$163	,625	\$	0		\$18,199			\$4,994		\$18	36,818
-	ss Deduction								_[
Ne	t Disburseme	nts							ſ							\$18	36,818

SCHEDULE 12 - DISBURSEMENTS TO EMPLOYEES

FILE NUMBER: 003-105

	(A) Name	(B) Title	(C) Other Payer	Disb (be	(D) ess Sala urseme efore ar duction	ents ny	(E) Allowances Disbursed		fo	(F) bursements or Official Business	no	(G) Disbu t repor) throu		(H) TOTA	L
	DE IANNI , ST ORGANIZER NONE	EVEN			\$88	3,544		\$0		\$1,843			\$0	\$	90,387
ı	Schedule 15 Representation	nal Activities	Schedule 16 80 % Political Activi and Lobbying		1 7 %		dule 17 ributions	1	٧/ ١٠	Schedule 18 General Over	head	3 %	Schedule Administ		15 %
	TALS RECEIV 0,000 OR LESS		LOYEES MAKING												\$0
I	Schedule 15 Representatior	nal Activities	Schedule 16 Political Activ	ities a	nd Lobl	oying	Sched Contrib			Schedu Genera		head		nedule 19 ministration	
То	tal Employee I	Disburseme	nts		\$88,	544	\$	0		\$1,843			\$(\$	90,387
Le	ss Deductions	3				_		\perp							
Ne	t Disburseme	nts												\$	90,387

SCHEDULE 13 - MEMBERSHIP STATUS

FILE NUMBER: 003-105

Category of Membership	Number	Voting Eligibility			
(A)	(B)	(C)			
ELIGIBLE VOTING MEMBERS	328	Yes			
Members (Total of all lines above)	328				
Agency Fee Payers*					
Total Members/Fee Payers	328				
*Agency Fee Payers are not considered members of the labor organization.					

DETAILED SUMMARY PAGE - SCHEDULES 14 THROUGH 19

SCHEDULE 14 OTHER RECEIPTS	
Named Payer Itemized Receipts	\$26,474
Named Payer Non-itemized Receipts	\$0
All Other Receipts	\$5,104
4. Total Receipts	\$31,578

SCHEDULE 15 REPRESENTATIONAL ACTIV	ITIES
Named Payee Itemized Disbursements	\$51,680
Named Payee Non-itemized Disbursements	\$44,788
3. To Officers	\$158,797
4. To Employees	\$72,310
5. All Other Disbursements	\$14,141
6. Total Disbursements	\$341,716
SCHEDULE 16 POLITICAL ACTIVITIES AND LO	BBYING
Named Payee Itemized Disbursements	\$0
Named Payee Non-itemized Disbursements	\$0
3. To Officers	\$1,867
4. To Employees	\$904
5. All Other Disbursements	\$0
6. Total Disbursement	\$2,771

Form LM-2 (Revised 2010)

SCHEDULE 17 CONTRIBUTIONS, GIFTS & GRANTS					
Named Payee Itemized Disbursements	\$0				
Named Payee Non-itemized Disbursements	\$0				
3. To Officers	\$1,867				
4. To Employees	\$904				
5. All Other Disbursements	\$375				
6. Total Disbursements	\$3,146				

FILE NUMBER: 003-105

SCHEDULE 18 GENERAL OVERHEAD	
Named Payee Itemized Disbursements	\$36,674
Named Payee Non-itemized Disbursements	\$59,309
3. To Officers	\$5,605
4. To Employees	\$2,712
5. All Other Disbursements	\$28,743
6. Total Disbursements	\$133,043
SCHEDULE 19 UNION ADMINISTRATION	1
Named Payee Itemized Disbursements	\$0
Named Payee Non-itemized Disbursements	\$0
3. To Officers	\$18,682
4. To Employees	\$13,558
5. All Other Disbursements	\$655
6. Total Disbursements	\$32,895

FILE NUMBER: 003-105

SCHEDULE 14 - OTHER RECEIPTS

Name and Address			
(A)	_		
BRIDGEPORT CWA LOCAL	Purpose	Date	Amount
	(C)	(D)	(E)
	CASH BALANCE AT MERGER	03/10/2015	\$4,465
BRIDGEPORT	Total Itemized Transactions with this Payee/Payer		\$4,465
СТ	Total Non-Itemized Transactions with this Payee/Pa		
Type or Classification (B)	Total of All Transactions with this Payee/Payer	for This Schedule	\$4,465
CASH TRANSFER AT MERGER			
Name and Address (A)			
PHILADELPHIA CWA LOCAL	Purpose	Date	Amount
	(C)	(D)	(E)
	TRANSFER AT MERGER	12/18/2014	\$8,460
PHILADELPHIA	Total Itemized Transactions with this Payee/Payer		\$8,460
PA	Total Non-Itemized Transactions with this Payee/Pa	aver	
Type or Classification (B)	Total of All Transactions with this Payee/Payer		\$8,460
CASH TRANSFER AT MERGER			
Name and Address (A)			
PRINTING PUBLISHERS AND MEDIA	Purpose	Date	Amount
WORKERS BNFT	(C)	(D)	(E)
	EXPENSE REIMBUSEMENT	02/19/2015	\$4,516
352 SEVENTH AVENUE	EXPENSE REIMBUSEMENT	03/24/2015	\$4,517
NEW YORK	EXPENSE REIMBUSEMENT	04/16/2015	\$4,516
NY	Total Itemized Transactions with this Payee/Payer		\$13,549
10001	Total Non-Itemized Transactions with this Payee/Pa	aver	
Type or Classification (B)	Total of All Transactions with this Payee/Payer		\$13,549
EXPENSE REIMBURSEMENTS			

SCHEDULE 15 - REPRESENTATIONAL ACTIVITIES

Name and Address			
(A) BRYAN CAVE LLP	_		
BRIAN CAVE LLP	Purpose	Date	Amount
1290 AVENUE OF THE AMERICAS	(C)	(D)	(E)
NEW YORK	Total Itemized Transactions with this Payee/Payer	(5)	(=)
NY	Total Non-Itemized Transactions with this Payee/Pa	aver	\$13,995
10104	Total of All Transactions with this Payee/Payer		\$13,995
Type or Classification	Total of All Transactions with this raycon ayer	ioi iiiis ociicadie	ψ10,550
(B)			
ARBITRATION			
Name and Address	Purpose	Date	Amount
(A)	(C)	(D)	(E)
LEVY RATNER PC	LEGAL FEES AND EXPENSES	03/19/2015	\$14,192
	LEGAL FEES AND EXPENSES	06/02/2015	\$11,588
80 EIGHTH AVENUE	LEGAL FEES AND EXPENSES	01/29/2015	\$12,127
NEW YORK	LEGAL FEES AND EXPENSES	07/21/2015	\$7,305
NY	LEGAL FEES AND EXPENSES	08/26/2015	\$6,468
10011-5126	Total Itemized Transactions with this Payee/Payer	00/20/2013	\$51,680
Type or Classification	Total Non-Itemized Transactions with this Payee/Payer	over	\$19,793
(B)	Total of All Transactions with this Payee/Payer		\$71,473
LEGAL FEES	Total of All Transactions with this Payee/Payer	IOI THIS Scriedule	φ11, 4 13
Name and Address			
(A)			
RAMIREZ ASSET MANAGEMENT	_		
	Purpose	Date	Amount
61 BROADWAY ROOM 2924	(C)	(D)	(E)
NEW YORK NY	Total Itemized Transactions with this Payee/Payer		#5.000
10006	Total Non-Itemized Transactions with this Payee/P		\$5,000
Type or Classification	Total of All Transactions with this Payee/Payer	for This Schedule	\$5,000
(B)			
INVESTMENT ADVISORY FEES			
Name and Address			
(A)			
US BANK			
70870	Purpose	Date	Amount
10070	(C)	(D)	(E)
ST PAUL	Total Itemized Transactions with this Payee/Payer	(5)	(=)
MN	Total Non-Itemized Transactions with this Payee/Pa	aver	\$6.000
55170-9703	Total of All Transactions with this Payee/Payer		\$6,000
Type or Classification (B)	rotal of All Halloudillo man allo i ayour ayor	ioi riiio concuulo	ψ0,000
INVESTMENT ADVISORY SERVICES	-		
HAND THE HAIL AD VIOLET OF VIOLES			

SCHEDULE 16 - POLITICAL ACTIVITIES AND LOBBYING

FILE NUMBER 003-105

There was no data found for this schedule.

SCHEDULE 17 - CONTRIBUTIONS, GIFTS & GRANTS

FILE NUMBER: 003-105

There was no data found for this schedule.

SCHEDULE 18 - GENERAL OVERHEAD

FILE NUMBER: 003-105

Name and Address			
(A) A.M. PROPERTY HOLDINGS			
A.W. PROPERTY HOLDINGS	Purpose	Date	Amount
352 SEVENTH AVENUE	(C)	(D)	(E)
NEW YORK	Total Itemized Transactions with this Payee/Payer		***
NY 10001	Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for		\$39,67 \$39,67
Type or Classification	Total of All Transactions with this Payee/Payer for	This Schedule	Ф39,0 ;
(B)			
RENT AND ELECTRIC Name and Address			
(A)			
BIH COMPUTER SERVICES			
265	Purpose	Date	Amount
ANALOMINK	(C) Total Itemized Transactions with this Payee/Payer	(D)	(E)
PA	Total Non-Itemized Transactions with this Payee/Payer	r	\$7,8
18320	Total of All Transactions with this Payee/Payer for		\$7,83
Type or Classification			
(B) COMPUTER AND NETWORK SUPPOR	PT PT		
Name and Address	VI .		
(A)			
BUTWIN INSURANCE	Purpose	Date	Amount
CO CULTEDANIA DOSS 444	(C)	(D)	(E)
60 CUTTERMILL ROAD -414 GREAT NECK	INSURANCE	05/19/2015	\$14,20
NY	Total Itemized Transactions with this Payee/Payer		\$14,20
11021-3104	Total Non-Itemized Transactions with this Payee/Paye		044.0
Type or Classification	Total of All Transactions with this Payee/Payer for	inis Schedule	\$14,20
(B)			
INSURANCE POLICIES Name and Address			
(A)			
CANNON FINANCIAL			
	Purpose	Date	Amount
14904 CHICAGO	(C) Total Itemized Transactions with this Payee/Payer	(D)	(E)
IL	Total Non-Itemized Transactions with this Payee/Payer	r	\$4,77
60693	Total of All Transactions with this Payee/Payer for		\$4,77
Type or Classification		,	
(B)			
COPIER RENTAL Name and Address			
(A)			
DELETED SHEET	Purpose	Date	Amount
	(C)	(D)	(E)
NEW YORK	Total Itemized Transactions with this Payee/Payer	. ,	. ,
NY	Total Non-Itemized Transactions with this Payee/Paye	er .	
Type or Classification	Total of All Transactions with this Payee/Payer for	This Schedule	Ç
(B)			
DELETED SHEET			
Name and Address (A)			
TRAVELERS INSURANCE			
660317	Purpose	Date	Amount
DALLAG	(C)	(D)	(E)
DALLAS TX	INSURANCE Total Itemized Transactions with this Payee/Payer	09/08/2015	\$7,77 \$7,77
75266	Total Non-Itemized Transactions with this Payee/Payer	r	\$7,71
Type or Classification	Total of All Transactions with this Payee/Payer for		\$7,8
(B)		,	
INSURANCE (2,004 FOR WELFARE			
PLAN) Name and Address			
(A)			
VERIZON			
15124	Purpose	Date	Amount
	(C)	(D)	(E)
ALD AND	Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Paye	ır.	\$6,97
ALBANY NY 12212-5124		This Schedule	ፍር ወን
	Total of All Transactions with this Payee/Payer for	This Schedule	\$6,97
NY 12212-5124 Type or Classification (B)		This Schedule	\$6,9
NY 12212-5124 Type or Classification		This Schedule	\$6,9

003-105 (LM2) 09/30/2015

(A)	Purpose	Date	Amount
VOLK AND VALANE LLC	(C)	(D)	(E)
	AUDIT OF FYE 9-30-14	12/16/2014	\$13,200
39 WEST 32ND STREET 1600-B	LM-2 FOR F-Y-E 9-30-14	12/16/2014	\$1,500
New York	Total Itemized Transactions with this Payee/Payer		\$14,700
NY	Total Non-Itemized Transactions with this Payee/Payer		
10001	Total of All Transactions with this Payee/Payer f	for This Schedule	\$14,700
Type or Classification	, ,		· · · · · · · · · · · · · · · · · · ·
(B)			
AUDITOR- ACCOUNTANT -990 PREP			
Form LM-2 (Revised 2010)	_		

SCHEDULE 19 - UNION ADMINISTRATION

FILE NUMBER: 003-105

There was no data found for this schedule.

SCHEDULE 20 - BENEFITS

FILE NUMBER: 003-105

Description	To Whom Paid	Amount
(A)	(B)	(C)
WELFARE CONTRIBUTIONS	PRINTING PUBLISHERS & MEDIA WORKERS BNFT FUND	\$23,275
PENSION CONTRIBUTIONS	CWA/ITU NEGOTIATED PENSION	\$30,260
401 K	NY TYPO 401 K	\$21,123
Total of all lines above (Total will be automatically entered in Item 55.)	\$74,658	

69. ADDITIONAL INFORMATION SUMMARY

FILE NUMBER: 003-105

Question 12: AUDIT PERFORMED BY THE CPA FIRM OF VOLK & VALANE LLC ID # 20-5094634 39 WEST 32ND STREET SUITE 1600-B NEW YORK, NY 10001

Question 10: : THE UNION PAYS EMPLOYEE BENEFITS INTO THE CWA LOCAL 14156- PRINTERS PUBLISHERS AND MEDIA WORKERS BENEFIT FUND, WHICH IS LOCATED AT 352 SEVENTH AVENUE- SUITE 601-NEW YORK, NY 10001

Schedule 13, Row1:

Schedule 13, Row1:

Schedule 13, Row1:

Schedule 13, Row1:ELIGIBLE VOTING MEMBERS 328 Form LM-2 (Revised 2010)

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