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

FORM LM-4 LABOR ORGANIZATION ANNUAL REPORT

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

Form Approved
Office of Management and Budget
No. 1215-0188
Expires: 11-30-2002

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: 019-208

2. PERIOD COVERED (MO DAY YEAR)
From 01 01 2001
Through 12 31 2001

3. (a) AMENDED — If this is an amended report correcting a previously filed report, check here:
(b) TERMINAL — If your organization ceased to exist and this is its terminal report, see Section X of the instructions and check here:

JAYE RYKUNYK (4) 019-208
HOTEL EMPL, RESTAURANT EMPL AFL-CIO 331
STC MINNESOTA
312 CENTRAL AVE. #444
MINNEAPOLIS, MN 55414 12/2001

8. MAILING ADDRESS *(Type or print in capital letters.)*
First Name
Last Name
P.O. Box • Building and Room Number *(if any)*
Number and Street
City
State ZIP Code + 4

4. AFFILIATION OR ORGANIZATION NAME

5. DESIGNATION *(Local, Lodge, etc.)*

6. DESIGNATION NUMBER

7. UNIT NAME *(if any)*

19. ADDITIONAL INFORMATION *(If more space is needed, attach additional pages properly identified.)*

Item Number

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

20. SIGNED: Carol J. Carlson — PRESIDENT *(If other title, see instructions.)*
5/21/02 — Date
(218) 728-6861 — Telephone Number

21. SIGNED: [illegible] — TREASURER *(If other title, see instructions.)*
2-18-02 — Date
612 379 -4730x13 — Telephone Number

Enter Amounts in Dollars Only — Do Not Enter Cents

FILE NUMBER: 019-208

Complete Items 9 through 18.

9. During the reporting period, did your organization have any changes in its constitution and bylaws (other than rates of dues and fees) or in practices/procedures listed in the instructions? ..... Yes [ ] No [X]
(If the constitution and bylaws have changed, attach two new dated copies. If practices/procedures have changed, see the instructions.)

10. Did your organization change its rates of dues and fees during the reporting period? ..... Yes [ ] No [X]
(If "Yes," report the new rates in Item 19 on page 1.)

11. Did your organization discover any loss or shortage of funds or property during the reporting period? ..... Yes [ ] No [X]
(If "Yes," provide details in Item 19 on page 1. Answer "Yes" even if there has been repayment or recovery.)

12. Was your organization insured by a fidelity bond during the reporting period? ..... Yes [X] No [ ]

If "Yes," enter the maximum amount recoverable under the bond for loss caused by any person. $ 5000

13. How many members did your organization have at the end of the reporting period? approx. 6022

14. Enter the total value of your organization's assets at the end of the reporting period (cash, bank accounts, equipment, etc.). $ 5364

15. Enter the total liabilities (debts) of your organization at the end of the reporting period (unpaid bills, loans owed, etc.). $ 0

16. Enter the total receipts of your organization during the reporting period (dues, fees, interest received, etc.). *(If $10,000 or more, your organization must file Form LM-2 or LM-3 instead of this form.)* $ 8202

17. Enter the total disbursements made by your organization during the reporting period (per capita tax, loans made, net payments to officers, payments for office supplies, etc.). $ 7993

18. Enter the total payments to officers and employees during the reporting period (gross salaries, lost time payments, allowances, expenses, etc.). $ 852

Please be sure to:

- *Enter your union's 6-digit file number in Item 1.*
- *Report a time period of no more than one year in Item 2.*
- *Have your union's president and treasurer sign the Form LM-4 in Items 20 and 21.*
- ***FILE ON TIME.** Form LM-4 must be filed within 90 days after the end of your union's fiscal year.*