U.S. Department of Labor 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: 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; of civil penalties as provided by 29 U.S.C. 439 or 440.

100	READ THE	INSTRUCTIONS CAREF	ULLY BEFORE PREPARI	NG THIS REPORT.	····
For Official Unit Property 10 7014	1. FILE NUMBER .013-225	2. PERIOD COVEREI MO E From 01/01/2 Through 12/31/2	DAY YEAR 2013	(b) TERMINAL - If your	s an amended report correcting a eck here: organization ceased to exist and this is its
4: AFFILIATION OR ORGANIZATION NAME ACTORS & ARTISTES AFL-CIO 5: DESIGNATION (Local: Lodge, etc.) BRANCH 7: UNIT, NAME (if any)			B. MAILING ADDRESS (Type or print in capital letters) First Name GUILD OF ITALIAN AMER. P.O. Box - Building and Room Number (if any) CANAL STREET STATION Number and Street		
ITALIAN ACTORS			PO BOX 123 City NEW YORK State NY		ZIP Code + 4 10013-0123
19, ADDITIONAL INFORMATION	l(Text [®] entëred will appear	on last page of form.	To enter comments,	press the "General Addition	nal Information" button.)
г 	y accompanying documents) has	been examined by the sig		of the undersigned's knowledge at	ll of the information submitted in this report not belief, true, correct, and complete. (If other title, see instructions.)

COMPLETE ITEMS 9 THROUGH 18

FILE NUMBER:

Enter Amounts in Dollars Only - Do Not Enter Cents	
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? (If the constitution and bylaws have changed, attach two new dated copies. If practices/	14. Enter the total value of your organization's assets at the end of the reporting period (cash, bank accounts, equipment, etc.). \$1.1,650
procedures have changed, see instructions:)	15. Enter the total liabilities (debts) of your organization at the end of the reporting period (unpaid bills; loans owed, etc.).
10. Did your organization change its rates of dues and fees during the reporting period? (If "Yes," report the new rates in Item 19 on page 1.)	owed, etc.).
Yes No X	16. Enter the total receipts of your organization during the reporting period (dues, fees, interest received, etc.). \$8,025
11. Did your organization discover any loss or shortage of funds or property during the reporting period? (If "Yes;" provide details in Item 19. Answer	(If \$10,000 or more, your organization must file Form LM-3 instead of this form.)
"Yes" even if there has been repayment or recovery.)	17. Enter the total disbursements made by your organization during the reporting period (per capita tax, \$6,280
12. Was your organization insured by a fidelity bond during the reporting	loans made, net/payment to officers, payments for office supplies, etc.).
period?	18. Enter the total payments to officers and employees
If "Yes," enter the maximum amount recoverable under the bond for loss caused by any person.	during the reporting period (gross salaries, lost time payments, allowances, expenses, etc.).
\$25,000	Please be sure to: • Enter your union's 6-digit file number in Item 1

reporting period?

13. How many members did your organization have at the end of the

If the answer to questions 9, 10, or 11 is "Yes," provide details in Item 19 (Additional Information) as explained in the instructions for each item.

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• Report a time period of no more than one year in Item 2.

Items 20 and 21:

end of your union's fiscal year.

· Have your union's president and treasurer sign the Form LM-4 in

• FILE ON TIME. Form LM-4 must be filed within 90 days after the

FILE NUMBER: 013-225