

FORM LM-2 LABOR ORGANIZATION ANNUAL REPORT

MUST BE USED BY LABOR ORGANIZATIONS WITH \$200,000 OR MORE IN TOTAL ANNUAL RECEIPTS AND LABOR ORGANIZATIONS IN TRUSTEESHIP

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 E	1. FILE NUMBER 004 - 156	2. PERIOD COVERED MO DAY YEAR From 01 01 2002 Through 12 31 2002	3. (a) AMENDED — If this is an amended report correcting a previously filed report, check here: <input type="checkbox"/> (b) TERMINAL — If your organization ceased to exist and this is its terminal report, see Section XII of the instructions and check here: <input type="checkbox"/> (c) SUBSIDIARY — If this is a report for a subsidiary organization of your union as defined in Section X of the instructions, check here: <input type="checkbox"/>
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4. AFFILIATION OR ORGANIZATION NAME ENGINEERS, OPERATING, AFL-CIO		8. MAILING ADDRESS First Name M I C H A E L A Last Name C A R N E Y P.O. Box · Building and Room Number (if any) Number and Street 3 3 1 - 3 3 7 W E S T 4 4 T H S T R E E T City N E W Y O R K State ZIP Code + 4 N Y 1 0 0 3 6 -	
5. DESIGNATION (Local, Lodge, etc.) LU	6. DESIGNATION NUMBER 94		
7. UNIT NAME (if any)			
9. Are your organization's records kept at its mailing address? (If "No," provide address in Item 75.) Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			

75. ADDITIONAL INFORMATION	
Item Number	SEE ATTACHED

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 VII on Penalties in the instructions.)

76. SIGNED: <u><i>[Signature]</i></u> PRESIDENT	77. SIGNED: <u><i>[Signature]</i></u> TREASURER
<u><i>3-3-03</i></u> Date	<u><i>3-3-03</i></u> Date
<u><i>212-245-7040</i></u> Telephone Number	<u><i>2122457040</i></u> Telephone Number

(If other title, see instructions.)

03-086-022 (004156)
 * 0 0 4 1 5 6 *

During the Reporting Period Did Your Organization:

- 10. Have a "subsidiary organization" as defined in Section X of the instructions? Yes No
- 11. Create or participate in the administration of a trust or other fund or organization, as defined in the instructions, which provides benefits for members or their beneficiaries? Yes No
- 12. Have a political action committee (PAC) fund? Yes No
- 13. Acquire or dispose of any goods or property in any manner other than by purchase or sale? Yes No
- 14. Have an audit or review of its books and records by an outside accountant or by a parent body auditor/representative? Yes No
- 15. Discover any loss or shortage of funds or other property? Yes No
(Answer "Yes" even if there has been repayment or recovery.)
- 16. Have any officer who was paid \$10,000 or more by your organization and also received \$10,000 or more as an officer or employee of another labor organization or of an employee benefit plan? Yes No
- 17. Liquidate or reduce any liabilities without disbursement of cash? Yes No

(If the answer to any of the above questions is "Yes," provide details in Item 75 as explained in the instructions for each item.)

- 18. How many members did your organization have at the end of the reporting period? 5 7 7 6
- 19. What is the date of your organization's next regular election of officers? MO 0 8 YEAR 2 0 0 4
- 20. What is the maximum amount recoverable under your organization's fidelity bond for a loss caused by any officer or employee of your organization? \$ 5 0 0 0 0 0

21. What are your organization's rates of dues and fees? *(Enter a minimum and maximum if more than one rate applies for any line.)*

Rates of Dues and Fees	
(a) Regular Dues/Fees	\$ <u>SEE #75</u> per <u>SEE #75</u> <i>(Month, Year, etc.)</i>
(b) Initiation Fees	\$ <u>SEE #75</u>
(c) Transfer Fees	\$ <u>SEE #75</u>
(d) Work Permits	\$ <u>SEE #75</u> per <u>SEE #75</u> <i>(Month, Year, etc.)</i>

- 22. 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
(If the constitution and bylaws or practices/procedures have changed, see the instructions.)
- 23. Were any of your organization's assets pledged as security or encumbered in any other way at the end of the reporting period? Yes No
- 24. Did your organization have any contingent liabilities at the end of the reporting period? Yes No

(If the answer to Item 23 or 24 is "Yes," provide details in Item 75.)

STATEMENT A - ASSETS AND LIABILITIES

FILE NUMBER: **0 0 4 - 1 5 6**

Complete Schedules 1 Through 15 Before Completing Statement A

Enter Amounts in Dollars Only -- Do Not Enter Cents

	ASSETS		Start of Reporting Period (A)	End of Reporting Period (B)
	Item	From SCH #		
ASSETS	25. Cash.....		5 2 1 3 8 3	3 8 2 0 0 6
	26. Accounts Receivable.....		0	0
	27. Loans Receivable.....	1	0	0
	28. U.S. Treasury Securities.....		1 1 2 8 1 3 1	1 2 5 7 0 8 4
	29. Investments.....	2	3 5 1 2 0 0	4 2 0 9 0 3
	30. Fixed Assets.....	5	4 4 5 6 6	4 9 9 3 7
	31. Other Assets.....	3	6 6 7 0	1 0 6 5 2 7
	32. TOTAL ASSETS.....		2 0 5 1 9 5 0	2 2 1 6 4 5 7
LIABILITIES	LIABILITIES		Start of Reporting Period (C)	End of Reporting Period (D)
	Item	From SCH #		
	33. Accounts Payable.....		0	0
	34. Loans Payable.....	8	0	0
	35. Mortgages Payable.....		0	0
	36. Other Liabilities.....	4	2 1 7 3 6	1 4 9 1 4
37. TOTAL LIABILITIES.....		2 1 7 3 6	1 4 9 1 4	
38. NET ASSETS (Item 32 less Item 37).....		2 0 3 0 2 1 4	2 2 0 1 5 4 3	

STATEMENT B - RECEIPTS AND DISBURSEMENTS

FILE NUMBER: **004 - 156**

Complete Schedules 1 Through 15 Before Completing Statement B

Enter Amounts in Dollars Only -- Do Not Enter Cents

CASH RECEIPTS		From SCH #	AMOUNT	CASH DISBURSEMENTS		From SCH #	AMOUNT
Item				Item			
39. Dues.....			3 2 6 4 6 4 7	56. To Officers.....	9		1 8 3 4 8 7
40. Per Capita Tax.....			0	57. To Employees.....	10		1 1 6 3 0 8 2
41. Fees.....			1 3 4 9 6 8	58. Per Capita Tax.....			6 7 2 9 5 9
42. Fines.....			0	59. Fees, Fines, Assessments, etc.			0
43. Assessments.....			0	60. Office & Administrative Expense....	13		2 9 3 8 1 2
44. Work Permits.....			0	61. Educational & PublicityExpense...			0
45. Sale of Supplies.....			1 1 0 0	62. Professional Fees.....			1 5 6 9 7 6
46. Interest.....			7 5 0 5 8	63. Benefits.....	11		6 7 0 4 9 0
47. Dividends.....			3 3 8 3	64. Contributions, Gifts & Grants.....	12		1 8 2 2 4 3
48. Rents.....			0	65. Supplies for Resale.....			7 7 5
49. Sale of Investments & Fixed Assets.....	6		1 4 3 4 0 5 7	66. Direct Taxes.....			1 1 4 3 8 5
50. Loans Obtained.....	8		0	67. Withholding Taxes.....			6 5 9 9 0 8
51. Repayments of Loans Made.....	1		0	68. Purchase of Investments & Fixed Assets.....	7		1 6 4 7 7 0 7
52. On Behalf of Affiliates for Transmittal to Them.....			0	69. Loans Made.....	1		0
53. From Members for Disbursement on Their Behalf.....			0	70. Repayment of Loans Obtained.....	8		0
54. Other Receipts.....	14		8 7 8 5 0 7	71. To Affiliates of Funds Collected on Their Behalf.....			0
				72. On Behalf of Individual Members...			0
				73. Other Disbursements.....	15		1 8 5 2 7 3
55. TOTAL RECEIPTS.....			5 7 9 1 7 2 0	74. TOTAL DISBURSEMENTS			5 9 3 1 0 9 7

Enter Amounts in Dollars Only -- Do Not Enter Cents

SCHEDULE 1 – LOANS RECEIVABLE

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 regardless of amount. (A)	Loans Outstanding at Start of Period (B)	Loans Made During Period (C)	Repayments Received During Period		Loans Outstanding at End of Period (E)
			Cash (D)(1)	Other Than Cash (D)(2)	
1.					
2.					
3.					
4. Totals from additional pages (if any)					
5. Totals of loans not listed above	0	0	0	0	0
6. Totals of Lines 1 through 5	0	0	0	0	0
The totals from Line 6 are entered in..... Item 27 Item 69 Item 51 Item 75 Item 27 Column (A) with Explanation Column (B)					

SCHEDULE 2 - INVESTMENTS

(OTHER THAN U.S. TREASURY SECURITIES)

FILE NUMBER: 004 - 156

SCHEDULE 3 - OTHER ASSETS

Description (A)	Amount (B)
Marketable Securities	
1. Total Cost	4 1 5 0 8 8
2. Total Book Value	4 2 0 9 0 3
3. List each marketable security which has a book value over \$1,000 and exceeds 20% of Line 2.	
(a) None	0
(b)	
(c)	
(d)	
Other Investments	
4. Total Cost	0
5. Total Book Value	0
6. List each other investment which has a book value over \$1,000 and exceeds 20% of Line 5. Also list each subsidiary for which separate reports are attached.	
(a) None	0
(b)	
(c)	
(d)	
(e) Total from additional pages (if any)	
7. Total of Lines 2 and 5	4 2 0 9 0 3
The total from Line 7 is entered in Item 29, Column (B)	

Description (A)	Book Value (B)
1. LOANS & EXCHANGES	7 8 8 2
2. DUE FROM RELATED ORGANIZATIONS	9 8 6 4 5
3.	
4.	
5.	
6. Total from additional pages (if any)	
7. Total of Lines 1 through 6	1 0 6 5 2 7
The total from Line 7 is entered in Item 31, Column (B)	

SCHEDULE 4 - OTHER LIABILITIES

Description (A)	Amount at End of Period (B)
1. APPLICANTS DEPOSITS	3 3 1 0
2. DUE TO RELATED ORGANIZATIONS	1 1 6 0 4
3.	
4.	
5.	
6. Total from additional pages (if any)	
7. Total of Lines 1 through 6	1 4 9 1 4
The total from Line 7 is entered in Item 36, Column (D)	

SCHEDULE 5 - FIXED ASSETS

FILE NUMBER: 004 - 156

Description (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)
1. Land (give location): None	0		0	0
2. Totals from additional pages (if any)				
3. Buildings (give location): None	0	0	0	0
4. Totals from additional pages (if any)				
5. Automobiles and Other Vehicles	3 5 0 0 0	3 5 0 0 0	0	0
6. Office Furniture and Equipment	2 3 3 4 7 3	1 9 1 2 6 2	4 2 2 1 1	4 2 2 1 1
7. Other Fixed Assets	2 0 4 2 4	1 2 6 9 8	7 7 2 6	7 7 2 6
8. Totals of Lines 1 through 7	2 8 8 8 9 7	2 3 8 9 6 0	4 9 9 3 7	4 9 9 3 7
The total from Line 8, Column (D) is entered in.....				Item 30, Column (B)

SCHEDULE 6 - SALE OF INVESTMENTS AND FIXED ASSETS

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. SALE OF MARKETABLE SECURITIES	14 46 555	14 46 555	1 43 405 7	1 43 405 7
2.				
3.				
4.				
5. Totals from additional pages (if any)				
6. Totals of Lines 1 through 5	14 46 555	14 46 555	1 43 405 7	1 43 405 7
	7. Less Reinvestments			0
	8. Net Sales			1 4 3 4 0 5 7
The total from Line 8 is entered in				Item 49

SCHEDULE 7 – PURCHASE OF INVESTMENTS AND FIXED ASSETS

FILE NUMBER: 004 - 156

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Cash Paid (D)
1. MARKETABLE SECURITIES	1619394	1619394	1619394
2. OFFICE EQUIPMENT	28313	28313	28313
3.			
4.			
5. Totals from additional pages (if any)			
6. Totals of Lines 1 through 5	1647707	1647707	1647707
7. Less Reinvestments			0
8. Net Purchases			1647707

The total from Line 8 is entered in Item 68

SCHEDULE 8 -- LOANS PAYABLE

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 Made During Period		Loans Owed at End of Period (E)
			Cash (D)(1)	Other Than Cash (D)(2)	
1. None	0	0	0	0	0
2.					
3.					
4.					
5. Totals from additional pages (if any)					
6. Totals of Lines 1 through 5	0	0	0	0	0

The total from Line 6 is entered in Item 34 Column (C) Item 50 Item 70 Item 75 with Explanation Item 34 Column (D)

SCHEDULE 9 - ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

FILE NUMBER: 004 - 156

(A) Name <small>(List all persons who held office during the reporting period even if they received no salary or other disbursements.)</small>		Status (C)*	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Title <small>(Enter title of officer, such as PRESIDENT or TREASURER.)</small>							
1.	CARNEY MICHAEL BUS MGR/PRES	C	1 9 9 2 1 0	1 2 8 0 0	1 3 3 9 2	2 1 9 7	2 2 7 5 9 9
2.	BROWN KUBA VICE PRES	C	0	2 4 0 0	0	0	2 4 0 0
3.	COSTELLO THOMAS FINCL SECRETARY	C	0	2 4 0 0	0	0	2 4 0 0
4.	HART THOMAS RECORDING SECTY	C	0	2 4 0 0	0	0	2 4 0 0
5.	GRILLO JOSEPH AUDITOR	C	0	2 4 0 0	0	0	2 4 0 0
6.	FASSULO ANTHONY AUDITOR	C	0	2 4 0 0	0	0	2 4 0 0
7.	GADELETTA MICHAEL AUDITOR	C	0	2 4 0 0	0	0	2 4 0 0
8. Totals from additional pages (if any)			0	1 4 4 0 0	0	0	1 4 4 0 0
9. Totals of Lines 1 through 8			1 9 9 2 1 0	4 1 6 0 0	1 3 3 9 2	2 1 9 7	2 5 6 3 9 9
					10. Less Deductions	7 2 9 1 2	
The total from Line 11 is entered in Item 56					11. Net Disbursements	1 8 3 4 8 7	

*Code for Status (C): past officer - P; continuing officer - C; new officer during the reporting period - N.

(If any officer was not elected at a regular election in accordance with your organization's constitution and bylaws, explain in Item 75.)

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES

FILE NUMBER: 004 - 156

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
BIDO MARIA 1. OFFICE MANAGER	7 7 0 0 0	0	9 2 5	7 1 1	7 8 6 3 6
MUELLER MAUREEN 2. CLERK	3 8 9 2 8	0	0	4	3 8 9 3 2
MACINNES PATRICIA 3. CLERK	6 3 9 1 5	0	0	1 6 5	6 4 0 8 0
MACCO RAYMOND 4. BUS REP	1 3 7 3 6 8	1 0 4 0 0	6 7 3 9	9 1 5	1 5 5 4 2 2
MUSIELLO MARYANN 5. CLERK	5 3 8 9 4	0	0	1 0 3	5 3 9 9 7
6. Totals from additional pages (if any)	1 2 8 4 7 6 5	5 5 6 0 0	2 5 0 1 3	8 9 5 2	1 3 7 4 3 3 0
7. Totals for all employees who, during the reporting period, received \$10,000 or less in total disbursements from your organization and any affiliates	0	0	0	0	0
8. Totals of Lines 1 through 7	1 6 5 5 8 7 0	6 6 0 0 0	3 2 6 7 7	1 0 8 5 0	1 7 6 5 3 9 7
			9. Less Deductions	6 0 2 3 1 5	
The total from Line 10 is entered in Item 57			10. Net Disbursements	1 1 6 3 0 8 2	

SCHEDULE 11 - BENEFITS

FILE NUMBER: 004 - 156

Description (A)	To Whom Paid (B)	Amount (C)
1. PENSION BENEFITS	IUOE GENERAL PENSION FUND	1 0 5 8 8 4
2. PENSION BENEFITS	IUOE CENTRAL PENSION FUND	1 6 1 6 0 2
3. ANNUITY BENEFITS	IUOE LCL 94 ANNUITY FUND	2 6 4 4 0 4
4. WELFARE BENEFITS	IUOE LCL 94 WELFARE FUND	1 1 4 7 3 7
5. Total from additional pages (if any)		2 3 8 6 3
6. Total of Lines 1 through 5		6 7 0 4 9 0
The total from Line 6 is entered in Item 63		

SCHEDULE 12 - CONTRIBUTIONS, GIFTS & GRANTS

Description (A)	Amount (B)
1. ADS, TICKETS, DONATIONS	1 8 2 2 4 3
2.	
3.	
4.	
5.	
6.	
7. Total from additional pages (if any)	
8. Total of Lines 1 through 7	1 8 2 2 4 3
The total from Line 8 is entered in Item 64	

SCHEDULE 13 - OFFICE & ADMINISTRATIVE EXPENSE

Description (A)	Amount (B)
1. RENT	6 6 7 9 2
2. TELEPHONE	3 4 0 5 3
3. OFFICE SUPPLIES	2 8 6 9 3
4. PRINTING & POSTAGE	5 8 5 1 8
5. COMPUTER EXPENSE	1 7 5 3 5
6. OUTSIDE SERVICES	1 9 3 4 7
7. Total from additional pages (if any)	6 8 8 7 4
8. Total of Lines 1 through 7	2 9 3 8 1 2
The total from Line 8 is entered in Item 60	

SCHEDULE 14 - OTHER RECEIPTS

Description (A)	Amount (B)
1. REIMBURSED FROM AFFILIATES	8 3 7 5 5 7
2. APPLICANTS DEPOSITS RECEIVED	2 2 6 0 0
3. OTHER INCOME	5 7 0 4
4. MISCELLANEOUS REFUNDS	1 2 6 4 6
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	
14.	
15.	
16. Total from additional pages (if any)	
17. Total of Lines 1 through 16	8 7 8 5 0 7
The total from Line 17 is entered in Item 54	

SCHEDULE 15 - OTHER DISBURSEMENTS

Description (A)	Amount (B)
1. REIMBURSEMENTS TO AFFILIATES	1 8 7 3 5
2. REFUNDS TO MEMBERS	1 1 9 3 3
3. MEETINGS AND NEGOTIATIONS	3 3 1 6 2
4. CONVENTIONS AND CONFERENCES	3 3 3 6 9
5. APPLICANTS DEPOSITS REFUNDED	1 7 5 0 0
6. HOLIDAY	1 5 7 6 0
7. PIPE BAND & OTHER EXPENSES	3 8 9 4 9
8. OTHER WITHHOLDINGS	1 5 8 6 5
9.	
10.	
11.	
12.	
13.	
14.	
15.	
16. Total from additional pages (if any)	
17. Total of Lines 1 through 16	1 8 5 2 7 3
The total from Line 17 is entered in Item 73	

ORGANIZATION NAME:
ENGINEERS, OPERATING, AFL-CIO

FILE NUMBER: **004 - 156**

ENDING DATE OF PERIOD COVERED:
12/31/2002

SCHEDULE 9 – ALL OFFICERS AND DISBURSEMENTS TO OFFICERS (continued)

(A) Name <small>(List all persons who held office during the reporting period even if they received no salary or other disbursements.)</small>		Status (C)*	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Title <small>(Enter title of officer, such as PRESIDENT or TREASURER.)</small>							
ZIMMER	ROBERT	C	0	2 4 0 0	0	0	2 4 0 0
CONDUCTOR							
KRAMER	JOHN	C	0	2 4 0 0	0	0	2 4 0 0
TREASURER							
ESTRADA	JESUS	C	0	2 4 0 0	0	0	2 4 0 0
TRUSTEE							
GARCIA	EDWARD	C	0	2 4 0 0	0	0	2 4 0 0
TRUSTEE							
REDDEN	JOHN	C	0	2 4 0 0	0	0	2 4 0 0
GUARD							
DRUMMOND	KELLY	C	0	2 4 0 0	0	0	2 4 0 0
TRUSTEE							

ORGANIZATION NAME: ENGINEERS, OPERATING, AFL-CIO
ENDING DATE OF PERIOD COVERED: 12/31/2002

FILE NUMBER: **004 - 156**

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
BROWN BUS REP KUBA	1 8 6 4 9 4	1 0 4 0 0	5 8 8 7	1 3 8 6	2 0 4 1 6 7
COSTELLO BUS REP THOMAS	1 4 7 6 8 6	1 0 4 0 0	6 6 3 7	1 4 2 6	1 6 6 1 4 9
HART BUS REP THOMAS	1 3 7 3 6 8	1 0 4 0 0	4 4 0 7	1 0 3 7	1 5 3 2 1 2
GADELETTA BUS REP MICHAEL	1 3 7 3 6 8	1 0 4 0 0	1 8 0 6	1 0 4 6	1 5 0 6 2 0
KRAMER BUS REP JOHN	1 3 7 3 6 8	1 0 4 0 0	4 0 0 9	1 6 5 3	1 5 3 4 3 0

ORGANIZATION NAME:
ENGINEERS, OPERATING, AFL-CIO

FILE NUMBER: 004 - 156

ENDING DATE OF PERIOD COVERED:
12/31/2002

SCHEDULE 10 – DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
ORZANO ARTHUR ADMINISTRATOR	1 1 7 8 7 4	0	0	1 2 3 0	1 1 9 1 0 4
FARRUGIA KIMBERLY CLERK	4 6 1 6 5	0	0	4	4 6 1 6 9
CARNEY TARA CLERK	4 0 8 6 0	0	0	1	4 0 8 6 1
CREASEY DIANE BOOKKEEPER	6 6 7 2 6	0	7 3 3	1 0 1 5	6 8 4 7 4
FANTINE CAROL CLERK	4 2 8 5 4	0	0	8	4 2 8 6 2

ORGANIZATION NAME:
ENGINEERS, OPERATING, AFL-CIO

ENDING DATE OF PERIOD COVERED:
12/31/2002

FILE NUMBER: **004 - 156**

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
MACCO DATA PROCESSING RICHARD	8 8 6 2 5	0	0	0	8 8 6 2 5
REDDEN ORGANIZER JACK	2 3 7 5 0	3 6 0 0	1 5 3 4	3 6	2 8 9 2 0
CORRAO CLERK LORRAINE	4 3 2 2 9	0	0	5 2	4 3 2 8 1
FISLER CLERK KATHRYN	6 8 3 9 8	0	0	5 8	6 8 4 5 6

ORGANIZATION NAME:
ENGINEERS, OPERATING, AFL-CIO

FILE NUMBER: **0 0 4 - 1 5 6**

ENDING DATE OF PERIOD COVERED:
12/31/2002

75. ADDITIONAL INFORMATION

Item Number	
14	SCHULTHEIS AND PANETTIERI, AN INDEPENDENT ACCOUNTING FIRM, AUDITS THE BOOKS AND RECORDS OF THE ORGANIZATION

ORGANIZATION NAME:
ENGINEERS, OPERATING, AFL-CIO

FILE NUMBER: **0 0 4 - 1 5 6**

ENDING DATE OF PERIOD COVERED:
12/31/2002

75. ADDITIONAL INFORMATION (continued)

Item Number	
11	<p>THE IUOE LOCAL 94 COMMERCIAL UNION EMPLOYEES WELFARE FUND, 337 WEST 44TH STREET, NEW YORK, NY, EIN #13-6674743, PLAN #501, PROVIDES MEDICAL BENEFITS FOR ALL ELIGIBLE PARTICIPANTS AND DEPENDENTS</p> <p>THE IUOE LOCAL 94 COMMERCIAL UNION EMPLOYEES TRAINING PROGRAM, 337 WEST 44TH STREET, NEW YORK, NY , EIN #13-3056021 PROVIDES TRAINING TO ELIGIBLE PARTICIPANTS</p> <p>THE IUOE LOCAL 94 ANNUITY FUND, 337 WEST 44TH STREET, NEW YORK, NY, EIN #13-6817367 PROVIDES ANNUITY BENEFITS TO ELIGIBLE PARTICIPANTS.</p> <p>THE IUOE LOCAL 94 SCHOLARSHIP FUND, 337 WEST 44TH STREET, NEW YORK, NY, EIN #13-3872320 PROVIDES SCHOLARSHIP BENEFITS TO ELIGIBLE PARTICIPANTS</p>

ORGANIZATION NAME:
ENGINEERS, OPERATING, AFL-CIO

FILE NUMBER: 004 - 156

ENDING DATE OF PERIOD COVERED:
12/31/2002

75. ADDITIONAL INFORMATION (continued)

Item Number	
21	<p>REGULAR DUES, FEES, AND OTHEWR PERIODIC PAYMENTS ARE REQUIRED TO REMAIN AS A MEMBER OF THE REPORTING LABOR ORGANIZATION:</p> <p>WORKING MEMBERS PAY MONTHLY DUES AS FOLLOWS:</p> <p>40 HOURS PER WEEK - HOURLY RATE * 2.25% 37.5 HOURS PER WEEK - HOURLY RATE * 2.12% 35 HOURS PER WEEK - HOURLY RATE * 1.98%</p> <p>THE MAXIMUM AMOUNT OF MONTHLY DUES IS \$62. THE MINIMUM AMOUNT PAID BY NON-WORKING MEMBERS IS \$14 PER MONTH.</p> <p>INITIATION FEES VARY FROM A MAXIMUM OF \$700 TO A MINIMUM OF \$100</p>