

How You Can Reach Us

At the Fund Office, we welcome your questions or requests for information. There are a number of ways to reach us.

DROP IN. We're located on the third floor at 417 Fifth Avenue, between 37th and 38th Streets.

CALL US. In New York, the number is 212-580-9092. The toll-free number is 1-800-456-FUND (3863).

SEND US A FAX.	
Our main fax number	212-787-3607
Benefits	212-730-7706
Contracts & Contributions	212-792-8322
Finance	212-792-8321
Pension	212-792-8323
Executive Director	212-792-8320

Please note that the Fund Office will be closed in observance of the following holidays:

EMAIL US via our Web site (www.iatsenbf.org).

Christmas Eve	Friday, December 24	
New Year's Day	Friday, December 31	
Martin Luther King Day	Monday, January 1	
President's Day	Monday, February 21	

Getting Better All the Time

We continually update and enhance our Web site. If you log on to www.iatsenbf.org, you can make Plan C self-payments, change your address, monitor employer contributions, review plan information and link to service vendors to find a doctor. You can even connect to Prudential to check on your retirement savings. Local unions also now have access to a separate portal to view and request reports about work in their area. Have a benefits question? Try the Web site. You may be surprised by how quickly and easily you can find the answer.

BEHIND THE SCENES

WINTER 2010/2011



VOLUME 5 ISSUE 1

FROM THE EXECUTIVE DIRECTOR

As 2010 draws to a close, we look back on a busy year—particularly with the passing of the comprehensive national health care reform known as the Affordable Care Act. Since President Obama signed it into law in March, federal agencies have been issuing detailed regulations that clarify how the new law will impact our Health & Welfare Plans. While many of the new rules won't take effect for several years, a few will become effective for both Plan A and Plan C as soon as we turn the page on the new year.

One of the first changes to take effect is the extension of benefits to children up to age 26. This applies to all children, regardless of where they live and whether or not they are students, married or financially dependent on you. Remember, you have until December 15, 2010, to submit your annual enrollment statement and proof of relationship (e.g., birth certificate, adoption papers) to reenroll any dependent under age 26 for coverage beginning January 1, 2011.

In addition, a couple of Plan provisions that limit benefits are being eliminated in 2011. First, the \$1 million cap on out-of-network lifetime benefits under Plan A and Plan C will go away. Starting next year, lifetime benefits for all covered services will be unlimited—whether you use inor out-of-network providers. (However, certain annual limits will apply until 2014.) In addition, if you're enrolled in Plan C-3, there's more good news. The \$2,000 limit on how much the Plan pays each year for prescription drugs is being eliminated.

For other good news, turn to page 2 of this issue of **Behind the Scenes**. You'll see that we expect to pretty much hold the line on CAPP charges for Health & Welfare Plan C through at least the third quarter of 2011.

As we remind all participants this time each year, please read all notices that you receive from the Fund. The more you know, the better you can manage your accounts and take advantage of your benefits. Of course, if you have questions, you can contact the Fund Office by email, phone or fax.

Happy holidays from all of us at the Fund Office. We wish you a healthy and prosperous new year.

Anne J. Zeisler

ANNUAL ENROLLMENT 2011

Plan C Annual Enrollment 2011 is underway, and you have until December 15 to review your options for coverage in 2011. If you haven't received your enrollment materials, contact the Fund Office immediately. All payments and/or changes for January must be received by the Fund Office no later than December 15, 2010.

We Apologize... if the new Health & Welfare Fund Plan C Summary Plan Description (SPD) was crammed into your mailbox. We combined two booklets into one for easier reference. So now you have all the information you need in one place. We even included a pocket in the back for rate letters and other important information you receive from the Fund Office.

Boomers...Listen Up!

Plan A and C both provide retiree health benefits to eligible participants. If you're eligible, you must request and complete an application.

If you're enrolled in retiree coverage under Plan C and you return to work for an employer that contributes to the Health & Welfare Fund, your retiree coverage will end if employer contributions made on your behalf equal at least one quarter of Plan C-3 single coverage. If you're in Plan A, your retiree benefits will end if you work at least 60 days in covered employment over six consecutive months.

If your retiree coverage ends, you will have to file a new application to restart it.

On Medicare? Plan C-MRP May Not Be an Option

If you are in Plan C and permanently stop working in covered employment (retire) after you become eligible for Medicare, Medicare will become your primary source of health insurance. In this situation, because Medicare qualifies as "other coverage," you are allowed to enroll in the Medical Reimbursement Program (Plan C-MRP) on a standalone basis. What's more, unlike other Plan C-MRP participants, you are not required to submit proof of other coverage each year. However, the \$150 annual administrative fee still applies.

However, if you continue to work (or return to work) after you become Medicare eligible, you may lose your eligibility for Plan C-MRP. That's because, under federal law, Medicare cannot be your primary source of health insurance if insurance is available through your employer or an employer-sponsored plan like ours. You lose your eligibility for Plan C-MRP during a coverage quarter if:

- employer contributions were made to your CAPP account during the three months known as the contribution test period, and
- your CAPP account balance is sufficient to cover the cost for one quarter of Plan C-3 single coverage.

If you are Medicare-eligible, the Fund tests your eligibility for Plan C-MRP each quarter. Your choices for coverage each quarter will depend on the results of the test. If you lose your eligibility for Plan C-MRP and fail to elect another Plan C option, you will be enrolled automatically in Plan C-3 single coverage. Be sure to review your statement each quarter to make sure you understand your options.

Plan C-MRP without Medicare

If you are enrolled in Plan C-MRP, you must provide valid proof each year between mid-November and December 15 that you have other medical coverage along with your Annual Enrollment statement. If you do not, you will be enrolled automatically for individual coverage in Plan C-2 or C-3 (depending on your CAPP account balance) and a \$150 administrative fee will be deducted from your account. If there's not enough funding in your CAPP account for Plan C-3 individual coverage, you will not have any coverage under Plan C.

CAPP Rates Hold Steady

Despite continuing increases nationwide in medical, hospital and prescription drug costs, CAPP charges for Plans C-1 and C-3 are not changing—at least through most of 2011. Plan C-2 charges will increase by \$45 for individual and family coverage starting April 1.

2011 QUARTERLY CAPP COST TO YOU

	Effective January 1, 2011	Effective April 1, 2011	Effective July 1, 2011
Plan C-1 Individual Family	3,549 (no change) 7,770 (no change)	\$3,549 (no change) \$7,770 (no change)	\$3,549 (no change) \$7,770 (no change)
Plan C-2 Individual Family	\$1,542 (no change) \$2,598 (no change)	\$1,587 \$2,643	\$1,587 (no change) \$2,643 (no change)
Plan C-3 Individual Family	\$1,086 (no change) \$2,058 (no change)	\$1,086 (no change) \$2,058 (no change)	\$1,086 (no change) \$2,058 (no change)

VACATION

Important Reminders

You have certain rights as a participant in Plan C that are protected by law. Here is a reminder of 1. your right to privacy with respect to health information, 2. a woman's rights related to a mastectomy and 3. a student child's right to extended coverage in the event of a medical leave of absence.

1. Privacy

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) established standards to guarantee the privacy of personal health information. The intent of HIPAA is to make sure that private health information that identifies (or could be used to identify) you is kept private. This individually identifiable health information is known as "protected health information" (PHI). Your health care plans will not use or disclose your protected health information without your written authorization except as necessary for treatment, payment, plan operations and plan administration, or as permitted or required by law. For details about the IATSE National Health & Welfare Fund's policy, you can find our Privacy Notice on our Web site at www.iatsenbf.org, or you can request a copy from the Fund Office.

2. Protections for Mastectomy Patients

The Women's Health and Cancer Rights Act of 1988 (WHCRA) includes important protections for mastectomy patients who elect breast reconstruction in connection with a mastectomy. Under WHCRA, group health

plans offering mastectomy coverage must also provide coverage for certain services relating to the mastectomy in a manner determined in consultation with the attending physician and the patient. Required coverage includes all stages of reconstruction of the breast on which the mastectomy was performed, surgery and reconstruction of the other breast to produce a symmetrical appearance, prostheses and treatment of physical complications of the mastectomy, including lymphedema. Coverage of breast reconstruction is subject to the same coinsurance and other plan provisions as other benefits under the plan.

3. Dependent Children in School

If a dependent child enrolled in Health & Welfare Plan A or Plan C is on a medically necessary leave of absence from a postsecondary school, coverage may be continued under the Plan for up to one year.

In order to be eligible for this extension of coverage, the Plan must be provided with a written certification from the child's treating physician that:

- the child is suffering from a serious illness or injury, and
- the leave of absence from the postsecondary institution is medically necessary.

Coverage may continue for up to one year from the first day of the medically necessary leave unless the dependent child would otherwise lose coverage (e.g., because he or she reaches age 25).

If you have any questions about any of your rights, contact the Fund Office.

Check In for Time Off

Since the work you're performing now in 2010 counts toward the vacation benefit check you'll receive next May, it's a good idea to make sure your time is being reported correctly. Simply log on to our Web site (www.iatsenbf.org) and check your work history.

And, if you haven't already signed up for direct deposit

for your vacation benefit check, you can download a form that authorizes the

Fund to send your benefit check directly to your bank account. You'll need to provide your bank name, account number and bank routing number.

Just for Fun

See if you can match the song with the movie in which it was performed. Answers appear below.

- 1. Baby It's Cold Outside
- 2. Somewhere in My Memory
- 3. Silver Bells
- 4. One More Sleep 'Til Christmas
- 5. What's This?
- 6. All I Want For Christmas Is You

- A. The Lemon Drop Kid
- B. Love Actually
- C. The Muppet Christmas Carol
- D. Elf
- E. Home Alone
- F. The Nightmare Before Christmas





PUMP UP YOUR SAVINGS

Now that the 401(k) Plan has been merged into the Annuity Fund, administrative fees for former 401(k) Plan participants are reduced significantly. Consider increasing your salary deferral by the amount of the savings. Your take-home pay will remain the same, and vou'll be building income for the future. To make a change in how much you're deferring, log on to www.prudential.com/online /retirement or call Prudential toll-free at 1-877-778-2100.

The 401(k) Feature of the IATSE Annuity Plan

This is an important notice for participants receiving an employer contribution of at least 3% of compensation.

Individuals employed under Pink Contracts between IATSE and the League of American Theatres and Producers (the "Pink Contract") and certain other agreements providing for 401(k) participation are eligible to participate in the 401(k) feature of the IATSE Annuity Plan, which permits you to make tax-deferred contributions to the Plan. For the 2011 Plan year, you may contribute up to 85% of your salary (subject to certain limitations) earned while you are a participant in the 401(k) portion of the Annuity Plan on a tax-deferred basis, subject to the IRS maximum (\$16,500 for 2011). This contribution, called a deferred salary contribution, is completely voluntary and does not affect your employer's obligation to contribute to the Annuity Fund. If you are age 50 or older as of December 31, 2011, you may contribute up to an additional \$5,500 in 2011, as a catch-up contribution for a total maximum allowable deferral of \$22,000.

Note: Salary, as currently defined in the Pink Contract, does not include overtime, penalties, per diem or any other additional payments.

You may elect to start or change these contributions at any time while you are employed under the Pink Contract or other agreement providing for Annuity Plan 401(k) participation. Any change will take effect as soon as practicable after the Fund Office receives a revised Deferred Salary Agreement.

PARTICIPATION

Participation in the Annuity Plan's 401(k) option is available to Plan participants whose employers contribute at least 3% of compensation to the Annuity Fund on their behalf, as required by a collective bargaining or participation agreement, provided that the employer has agreed in its collective bargaining or participation agreement to participate in the Annuity Plan's 401(k) option.

Currently, the Pink Contract requires contributing employers to contribute an amount in excess of 3% of salary (as defined above) to the Annuity Fund on behalf of eligible employees. Other employers participating in the 401(k) feature contribute to the Annuity Fund (either weekly or monthly) the amounts set forth in the applicable contract, which will be no less than 3% of compensation. This employer contribution is called a non-elective contribution. Both your deferred salary contribution and the employer's non-elective contribution are 100% immediately vested and non-forfeitable and are subject to a combined annual limit set each year by the IRS (for example, \$49,000 in 2011). Catch-up contributions for those who are age 50 or older as of December 31, 2011, are not included in the combined annual limit.

Other participants employed under certain collective bargaining agreements in the motion picture industry may be eligible for salary deferrals even though their employer does not contribute 3% or more of compensation. This notice does not apply to such participants. Please review the Summary Plan Description or contact the Fund Office for more information.

Your Right to a Pension Statement

If you participate in the IATSE National Pension Fund, your benefit grows over time as you continue to work in covered employment. When you receive your pension, the amount will be determined by the pension credits you've earned, your employers' contributions and your age at retirement. If you want to know the pension credits you've already earned, simply send a written request for a pension benefit statement to the Fund Office. (Sorry, no phone calls for this request.)

Hardship Made a Little Easier

In the event of a financial hardship (such as needing money for the purchase of a principal residence, tuition for higher education, major medical expenses, preventing eviction and other circumstances as defined by the IRS), you may be able to withdraw a portion of your Annuity Fund balance. Available funds include your own salary deferrals and certain employer contributions received by the Fund on or after January 1, 2010. Employer contributions available for withdrawal depend on whether your collective bargaining agreement allows salary deferrals and/or require a 3% employer contribution. No salary deferrals or employer contributions received by the Fund prior to January 1, 2010, are eligible for a hardship withdrawal.

Distribution of Account

You are eligible to receive a distribution from the Annuity Plan if:

- you retire on or after normal retirement age (65),
- you separate from service with all contributing employers (there is a two-month waiting period if you are between age 55 and 65 and a six-month waiting period if you are under age 55) and have not returned to service with a contributing employer, or
- you are permanently and totally disabled (as defined by the Plan).

You may also withdraw salary deferrals at age 59-1/2 even if you are still employed. The Fund also allows hardship withdrawals of certain monies contributed to and received by the Fund on or after January I, 2010; the 3% non-elective contribution is not eligible for hardship withdrawal.

Note: You are not eligible for a distribution if you cease to be eligible to make deferred salary contributions but you remain employed by a contributing employer to this Plan.

If you die, the Plan will distribute the balance of your account as a death benefit under the rules of the Plan

For more information about contributions or how to make deferrals, refer to your Summary Plan Description (available online at www.iatsenbf.org or from the Fund Office).

Reminder: Participation in the Annuity Plan's 40I(k) feature is voluntary. Whether or not you participate, your employer must continue to make any non-elective contributions required by the collective bargaining agreement.



If you're receiving a pension, this is the time of year to make sure that your information and our records are up

to date. Here are a few reminders of what you need to know (and do).

- You must complete the annual Pension Verification Form that you received from us. Sign it, have it notarized and return it to us immediately. Otherwise, your pension will be put on hold.
- Are you receiving a pension and still working? If so, you must notify the Fund Office about any work you're doing for which contributions are made to the National Funds under a collective bargaining agreement.
- If you want, you can change the amount of tax that is being withheld from your pension by notifying the Fund Office.
- 4. If you're under age 65 and receiving a disability benefit from the Pension Fund, you must submit proof each year that you continue to be disabled.
- 5. If you're eligible for Medicare, you should have received a letter about your prescription drug coverage and whether it is considered creditable coverage. There's no need to take immediate action, but you may need the letter in the future, so put it in a safe place.

Supporting Cast

Here's a list of the organizations that support and administer our programs. You can find contact information in the SPDs or link to their Web sites from ours (www.iatsenbf.org).

Hospital and Health

Empire Blue Cross Blue Shield Triple-S (Puerto Rico only)

Prescription DrugCaremark

Calcillai

Vision

Davis Vision

Dental

Delta Dental A.S.O./S.I.D.S.

Medical Reimbursement Program (Plan C) A.S.O./S.I.D.S.

Physical Exam and Hearing Aid Benefit A.S.O./S.I.D.S.

Life Insurance ULLICO

Annuity Prudential



Board of Trustees

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Health & Welfare Fund (H&W) Pension Fund (PF) Annuity Fund (AF)	Matthew D. Loeb Brian J. Lawlor James B. Wood Daniel E. DiTolla John V. McNamee, Jr. Patricia A. White Michael F. Miller, Jr. (H&W only) Ronald Kutak (PF and AF only)	Christopher Brockmeyer Howard S. Welinsky Carol A. Lombardini Dean Ferris Paul Libin Sean T. Quinn Keith Halpern	
Vacation Fund	James B. Wood Ronald Kutak	Christopher Brockmeyer Keith Halpern	
	EXECUTIVE DIRECTOR		

EXECUTIVE DIRECTOR
Anne J. Zeisler

We've summarized important plan rules in this newsletter, but we don't intend for these summaries to replace or amend the official plan documents of each of the plans. We will follow the rules of the official plan documents if those rules differ from the summaries in this newsletter.

SUMMARY ANNUAL REPORTS



Set forth below are summary annual statements for each of four* IATSE National Benefit Funds summarizing the information in the Funds' annual statements for 2009. For your convenience we are including the summary for the four Funds in this newsletter. However, the fact that the Funds are included does not mean that you participate in all four Funds. Most participants do not. Eligibility and participation in each of the Funds are governed by the rules of the Funds. For further information, consult the Summary Plan Description or contact the Funds Office.

*Note: The 2009 Annual Funding Notice for the IATSE National Pension Fund (mailed in April 2010) replaces the summary annual report disclosure requirement for this Fund. Please contact the Fund Office if you need a copy of the 2009 Annual Funding Notice.

What follows are summary annual reports (SARs) covering January 1, 2009 through December 31, 2009 for the following:

IATSE 401(k) Fund, EIN 74-3038452, Plan No. 001

IATSE National Health & Welfare Fund, EIN 23-7333434, Plan No. 501

IATSE National Vacation Fund, EIN 23-7345994, Plan No. 501

IATSE Annuity Fund, EIN 13-3088691, Plan No. 001

Each annual report has been filed with the Employee Benefits Security Administration, U.S. Department of Labor, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

IATSE 401(k) Fund

Notice of Merger. Effective December 31, 2009, the IATSE 401(k) Fund was merged into the IATSE Annuity Fund, EIN 13-3088691, Plan No. 001. Accordingly, all of the net assets, including the participants in the plan, were transferred to the successor entity.

Basic Financial Statement. Benefits under the plan were provided through insurance and a trust fund. Plan expenses were \$286,218. These expenses included \$114,231 in administrative expenses and \$171,987 in benefits paid to participants and beneficiaries. A total of 0 persons were participants in or beneficiaries of the plan at the end of the plan year.

The value of plan assets, after subtracting liabilities of the plan, was \$0 as of December 31, 2009, compared to \$2,442,907 as of January 1, 2009. During the plan year, the plan experienced a decrease in its net assets of \$2,442,907. This decrease includes unrealized appreciation and depreciation in the value of plan assets; that is, the difference between the value of the plan's assets at the end of the year and the value of the assets at the beginning of the year, or the cost of assets acquired during the year. The plan had total income of \$742,997, including employee contributions of \$389,701, earnings from investments of \$349,546 and other income of \$3,750.

IATSE National Health & Welfare Fund

The Board of Trustees of the IATSE National Health & Welfare Fund has committed itself to pay certain health benefit claims incurred under the terms of the plan.

Insurance Information. As of December 31, 2009, the plan had contracts with Union Labor Life Insurance Company, Harvard Pilgrim Health Care, Inc., Davis Vision, Inc., Kaiser Foundation Health Plans Inc., Triple-S, Inc., Cooperativa De Seguros De Vida De PR, Delta Dental of New York and Empire Blue Cross Blue Shield to pay HMO, vision, life insurance, temporary disability, health, prescription drug, PPO, stop-loss, mental health and dental claims incurred under the terms of the plan. The total premiums paid for the plan year ended December 31, 2009, were \$1,500,732.

Basic Financial Statement. The value of plan assets, after subtracting liabilities of the plan, was \$66,337,929 as of December 31, 2009, compared to \$46,746,135 as of January 1, 2009. During the plan year, the plan experienced an increase in its net assets of \$19,591,794. This increase includes unrealized appreciation and depreciation in the value of plan assets; that is, the difference between the value of the plan's assets at the end of the year and the value of the assets at the beginning of the year, or the cost of assets acquired during the year. During the plan year, the plan had total income of \$93,370,300, including employer contributions of \$75,147,102, employee contributions of \$12,822,360, realized gains of \$1,662,213 from the sale of assets, earnings from investments of \$3,732,084 and other income of \$6,541.

Plan expenses were \$78,143,087. These expenses included \$5,529,902 in administrative expenses and \$72,613,185 in benefits paid to or for participants and beneficiaries.

Effective January 1, 2010, the Treasurer and Ticket Sellers Local 751 Health Fund was merged into this plan. Net assets and benefit obligations transferred to this plan through December 31, 2009, amounted to \$4,364,581.

IATSE National Vacation Fund

The Board of Trustees of the IATSE National Vacation Fund has committed itself to pay vacation benefits as provided under the terms of the plan.

Basic Financial Statement. The value of plan assets, after subtracting liabilities of the plan, was \$3,722,693 as of December 31, 2009, compared to \$3,519,087 as of January 1, 2009. During the plan year, the plan experienced an increase in its net assets of \$203,606. This increase includes unrealized appreciation and depreciation in the value of plan assets; that is, the difference between the value of the plan's assets at the end of the year and the value of the assets at the beginning of the year, or the cost of assets acquired during the year. During the plan year, the plan had total income of \$3,778,442, including employer contributions of \$3,764,800, realized losses of \$(37,867) from the sale of assets and earnings from investments of \$51,509.

Plan expenses were \$3,574,836. These expenses included \$240,326 in administrative expenses and \$3,334,510 in benefits paid to participants and beneficiaries.

IATSE Annuity Fund

Basic Financial Statement. Benefits under the plan are provided through insurance and a trust fund. Plan expenses were \$13,836,703. These expenses included \$1,776,511 in administrative expenses and \$12,060,192 in benefits paid to participants and beneficiaries. A total of 55,166 persons were participants in or beneficiaries of the plan at the end of the plan year, although not all of these persons had yet earned the right to receive benefits.

The value of plan assets, after subtracting liabilities of the plan, was \$339,195,148 as of December 31, 2009, compared to \$283,834,452 as of January 1, 2009. During the plan year, the plan experienced an increase in its net assets of \$55,360,696. This increase includes

unrealized appreciation and depreciation in the value of plan assets; that is, the difference between the value of the plan's assets at the end of the year and the value of the assets at the beginning of the year, or the cost of assets acquired during the year. The plan had total income of \$66,297,713, including employer contributions of \$35,570,398, employee contributions of \$2,214,592, rollover contributions of \$61,873, earnings from investments of \$28,138,694 and other income of \$312,156.

Effective December 31, 2009, the IATSE 401(k) Fund was merged into this plan. Net assets and benefit obligations transferred to this plan amounted to \$2,899,686.

Your Rights to Additional Information

You have the right to receive a copy of the full annual report for any of the Funds, or any part thereof, on request. The items listed below are included in the reports:

	401(k) Fund	Health & Welfare Fund	Vacation Fund	Annuity Fund
An accountant's report	Х	Х	Х	X
Financial information	Х	Х	Х	X
Information on payments to service providers	Х	Х	Х	X
Assets held for investment		Х	Х	X
Insurance information, including sales commissions paid by insurance carriers	Х	X		Х
Information regarding any common or collective trusts, pooled separate accounts, master trusts or 103-12 investment entities in which the plan participates	x	х		x
Transactions in excess of 5% of the plan assets		Х	Х	

To obtain a copy of a full annual report, or any part thereof, write or call the office of the Executive Director, IATSE National Benefit Funds, 417 Fifth Avenue, 3rd Floor, New York, NY 10016, (212) 580-9092. The charge to cover copying costs will be:

- 401(k) Fund: \$7.00 for the full annual report or \$0.25 per page for any part thereof
- Health & Welfare Fund: \$16.50 for the full annual report or \$0.25 per page for any part thereof
- Vacation Fund: \$5.00 for the full annual report or \$0.25 per page for any part thereof
- Annuity Fund: \$8.00 for the full annual report or \$0.25 per page for any part thereof.

Other Information

You also have the right to receive from the Fund Office, on request and at no charge, a statement of the assets and liabilities of the plans and accompanying notes, or a statement of income and expenses of the plans and accompanying notes, or both. If you request a copy of the full annual report, these two statements and accompanying notes will be included as part of that report. The charges to cover copying costs given above do not include a charge for the copying of these portions of the report because these portions are furnished without charge.

You also have the legally protected right to examine the annual report at the main office of the Funds at 417 Fifth Avenue, 3rd Floor, New York, NY 10016 and at the U.S. Department of Labor in Washington, D.C., or to obtain a copy from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, Room N-1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.



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