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

FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

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



This report is mandatory under P.L. 88-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440. Required of persons, including Labor Relations Consultants and Other Individuals and Organizations, Under Section 203(b) of the Labor-Management Reporting and Disclosure Act of 1959, as amended. (LMRDA)

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

647683

OLMSOF	
1. File Number: C- 00322	
Person Filing	
Name and mailing address (include ZIP Code):	3. Any other address where records necessary to verify this report are kept:
Name Peter A List	Name
Title Founder & CEO	Title
Organization Kulture Consulting, LLC	Organization
-	B.O. Box Bida, Boom No. if any
P.O. Box, Bidg., Room No., if any	P.O. Box, Bldg., Room No., if any
Street P.O. Box 2877	Street
City Pawleys Island	City
State South Carolina ZIP Code + 4 29585	State ZIP Code + 4
4. Date fiscal year ends: 5. Type of person:	
Dec / 17 a. Individual b. Partnership	c. Corporation d. Other (Specify): LLC
Nature of Agreement or Arrangement	
6. Full name and address of employer with whom made (include ZIP Code):	7. Date entered into: 2 / 6 / 2017
Name	Name of person(s) through whom made:
Organization J.B. Hunt Transport, Inc.	Name Mark Jostad
Trade Name, if any	
P.O. Box, Bidg., Room No., if any	Name
Street 615 J.B. Hunt Corporate Drive	Name
City Lowell	Name
State Arkansas ZIP Code + 4 72745	Name
Signatures	
Each of the undersigned declares, under penalty of perjury and other 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.)	A
13. Signed President	14. Signed Molesander Treasurer
(If other title, see instructions)	Other (Specify) (I other tue, see instructions)
Founder & CEO	Manager of Administration
	<u>-</u>
On 4/14/2017 843-314-0383	On 4/14/2017 843-314-0383
Date Telephone Number	Date Telephone Number

Filer Peter List Kulture Consulting, LLC	File Number C- 00322	
9. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly:		
a. To persuade employees to exercise or not to exercise, or persuade employees as to the manner of exercising, the right to organize and bargain collectively through representatives of their own choosing.		
b. To supply an employer with information concerning the activities of employees or a labor organization in connection with a labor dispute involving such employer, except information for use solely in conjunction with an administrative or arbitral proceeding or a criminal or civil judicial proceeding.		
10. Terms and conditions (Explain in detail; see instructions. Written agreements must be attached.):		
Company was employed on a per hour basis with no formal written agreement relative to duration or amount of hours to be performed. Fee schedule based on a per hour rate.		
Specific Activities to be Performed		
11. For each activity, separately list in detail the information required (See instructions):		
a. Nature of activity:		
Conducted Employee Relations meetings with management.		
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11.b. Period during which performed:	11.c. Extent performed:	
February 2017	Completed	
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:	
Name Ronn English	Name	
Organization Kulture Consulting, LLC	Organization Kulture Consulting, LLC	
P.O. Box, Bldg., Room No., if any	P.O. Box, Bidg., Room No., if any	
Street P.O. Box 2877	Street P.O. Box 2877	
City Pawleys Island	City Pawleys Island	
State South Carolina ZIP Code + 4 29585	State South Carolina ZIP Code + 4 29585	
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:	
Managers employed by the employer located at the San Bernadino, CA, facility NO PETITION	Union Unknown - NO PETITION	
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