

MAR 3 1998

MAR 31 1998

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

# FORM LM-2 LABOR ORGANIZATION ANNUAL REPORT

Form approved  
Office of Management  
and Budget  
No. 1215-0188  
Expires 11-30-99

**MUST BE USED BY LABOR ORGANIZATIONS WITH \$200,000 OR MORE IN TOTAL ANNUAL RECEIPTS AND LABOR ORGANIZATIONS UNDER 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. SUBMIT THIS REPORT IN DUPLICATE.**

**IMPORTANT**  
If a label is here, → peel off the top copy and place it in the same box on the second copy of the form.  
If label information is correct, leave items 4 through 8 blank.  
If label information is incorrect, complete items 4 through 8.

HOWARD BENNETT (2) 042-415  
TEAMSTERS AFL-CIO 01B  
LU 00294  
890 THIRD ST 12/97  
ALBANY, NY 12206

1. FILE NUMBER  
042-415

2. PERIOD COVERED	MO	DAY	YR
From	1	1	97
Through	12	31	97

3. If your organization ceased to exist and this is its terminal report, see Section XII of the instructions and check here:

4. AFFILIATION OR ORGANIZATION NAME  
International Brotherhood of Teamsters

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

6. DESIGNATION NUMBER  
294

7. UNIT NAME (if any)

9. Are your organization's records kept at its mailing address? (If "No," provide address in item 75.)  
Yes  No

8. MAILING ADDRESS  
(In care of) NAME AND TITLE OF PERSON  
Mr. Howard Bennett

NUMBER AND STREET  
890 Third St.

BUILDING AND ROOM NUMBER (if any)

CITY STATE ZIP CODE  
Albany, NY 12206

**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?

12. Have a political action committee (PAC) fund?

13. Acquire or dispose of any goods or property in any manner other than by purchase or sale?

14. Have an audit or review of its books and records by an outside accountant or by a parent body auditor/representative?

15. Discover any loss or shortage of funds or other property? (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?

17. Liquidate or reduce any liabilities without disbursement of cash?

(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? 3500

19. What is the date of your organization's next regular election of officers? 9 00  
Month Year

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? \$ 178,500

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	\$ min - 45 max per month (month, year, etc.)
(b) Initiation Fees	\$ 10 min - 400 max
(c) Transfer Fees	\$ n/a
(d) Work Permits	\$ _____ per _____ (month, year, etc.)

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 have changed, attach two new dated copies. If 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?

24. Did your organization have any contingent liabilities at the end of the reporting period?    
(If the answer to item 23 or 24 is "Yes," provide details in item 75.)

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.)

76. SIGNED: Daniel McComb PRESIDENT (If other title, see instructions) 77. SIGNED: John Bulzoni TREASURER (If other title, see instructions)

Date: (518) 489-5436 Telephone Number: 518 489-5436

**ENTER AMOUNTS IN DOLLARS ONLY**

FILE NUMBER  
042-415

COMPLETE SCHEDULES 1 THROUGH 15 BEFORE COMPLETING STATEMENTS A AND B

**STATEMENT A — ASSETS AND LIABILITIES**

ASSETS				LIABILITIES			
Item	From SCH #	Start of Reporting Period (A)	End of Reporting Period (B)	Item	From SCH #	Start of Reporting Period (C)	End of Reporting Period (D)
25. Cash .....		397,649	387,215	33. Accounts Payable .....			
26. Accounts Receivable ...				34. Loans Payable .....	8	-0-	-0-
27. Loans Receivable .....	1	-0-	-0-	35. Mortgages Payable .....			
28. U.S. Treasury Securities				36. Other Liabilities .....	4	83,613	95,956
29. Investments .....	2	25,000	25,000	37. TOTAL LIABILITIES .....		83,613	95,956
30. Fixed Assets .....	5	23,214	19,568				
31. Other Assets .....	3	425	-0-	38. NET ASSETS (Item 32 less Item 37) .....			
32. TOTAL ASSETS .....		446,288	431,783			362,675	335,827

**STATEMENT B — RECEIPTS AND DISBURSEMENTS**

CASH RECEIPTS			CASH DISBURSEMENTS		
Item	From SCH #	AMOUNT	Item	From SCH #	AMOUNT
39. Dues .....		1,240,071	56. To Officers .....	9	396,308
40. Per Capita Tax .....			57. To Employees .....	10	78,196
41. Fees .....		103,712	58. Per Capita Tax .....		198,410
42. Fines .....		404	59. Fees, Fines, Assessments, etc. ....		44,695
43. Assessments .....			60. Office & Administrative Expense .....	13	168,596
44. Work Permits .....			61. Educational & Publicity Expense .....		17,472
45. Sale of Supplies .....		228	62. Professional Fees .....		94,595
46. Interest .....		15,468	63. Benefits .....	11	157,875
47. Dividends .....			64. Contributions, Gifts & Grants .....	12	1,281
48. Rents .....			65. Supplies for Resale .....		
49. Sale of Investments & Fixed Assets .....	6		66. Direct Taxes .....		41,519
50. Loans Obtained .....	8		67. Withholding Taxes .....		186,784
51. Repayments of Loans Made .....	1		68. Purchase of Investments & Fixed Assets .....	7	667
52. On Behalf of Affiliates for Transmittal to Them .....			69. Loans Made .....	1	
53. From Members for Disbursement on Their Behalf .....		13,422	70. Repayment of Loans Obtained .....	8	
54. Other Receipts .....	14	53,884	71. To Affiliates of Funds Collected on Their Behalf .....		
55. TOTAL RECEIPTS .....		1,427,189	72. On Behalf of Individual Members .....		13,442
			73. Other Disbursements .....	15	37,783
			74. TOTAL DISBURSEMENTS .....		1,437,623

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

Item Number	
11	Teamsters Local 294 - Albany Area Trucking & Allied Industries Health and Welfare Fund EIN # 14-1582160 and Pension Fund of Albany Area Trucking & Allied Industries Local 294 EIN #14-1401024 both at 19 Aviation Rd, Albany, NY 12206.
14	Stanley B. Eisenberg, CPA - Independent Accountant

If more space is needed to complete any of the schedules, continue on additional pages, using the same column headings used on the schedule, and enter the totals on the line provided for additional pages in each schedule.

**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. Name: _____ Purpose: _____ Security: _____ Terms of Repayment: _____					
2. Name: _____ Purpose: _____ Security: _____ Terms of Repayment: _____					
3. Totals from additional pages (if any)					
4. Totals of loans not listed above					
5. Totals of Lines 1 through 4	0	0	0	0	0
Enter the Totals from Line 5 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)**

Description (A)	Amount (B)
<b>Marketable Securities</b>	
1. Total Cost	
2. Total Book Value	
3. List each marketable security which has a book value over \$1,000 and exceeds 20% of Line 2. (a) _____ (b) _____ (c) _____ (d) _____	
<b>Other Investments</b>	
4. Total Cost	25,000
5. Total Book Value	25,000
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) <u>Labor Temple Bond</u> 25,000 (b) _____ (c) _____ (d) _____ (e) Total from additional pages (if any)	
7. Total of Lines 2 and 5	25,000
Enter the Total from Line 7 in ..... Item 29, Column (B)	

**SCHEDULE 3 — OTHER ASSETS**

Description (A)	Book Value (B)
1.	
2.	
3.	
4.	
5. Total from additional pages (if any)	
6. Total of Lines 1 through 5	0
Enter the Total from Line 6 in ..... Item 31, Column (B)	

**SCHEDULE 4 — OTHER LIABILITIES**

Description (A)	Amount at End of Period (B)
1. <u>Accrued Vacations</u>	95,956
2.	
3.	
4.	
5.	
6.	
7.	
8. Total from additional pages (if any)	
9. Total of Lines 1 through 8	95,956
Enter the Total from Line 9 in ..... Item 36, Column (D)	

**SCHEDULE 5 — FIXED ASSETS**

FILE NUMBER  
042-415

Description (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)
1. Land (give location):				
2. Totals from additional pages (if any)				
3. Buildings (give location):				
4. Totals from additional pages (if any)				
5. Automobiles and Other Vehicles				
6. Office Furniture and Equipment	46,349	32,241	14,108	14,108
7. Other Fixed Assets Lease hold Improvements	17,549	12,089	5,460	5,460
8. Totals of Lines 1 through 7	63,898	44,330	19,568	19,568
Enter the Total from Line 8, Column (D) in .....			↑	Item 30, Column (B) 19,568

**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.				
2.				
3.				
4.				
5. Totals from additional pages (if any)				
6. Totals of Lines 1 through 5				
		7. Less Reinvestments		
		8. Net Sales		0
Enter the Total from Line 8 in .....			↑	Item 49

**SCHEDULE 7 — PURCHASE OF INVESTMENTS AND FIXED ASSETS**

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Cash Paid (D)
1. Office Furniture	667	667	667
2.			
3.			
4.			
5. Totals from additional pages (if any)			
6. Totals of Lines 1 through 5	667	667	667
		7. Less Reinvestments	
		8. Net Purchases	
			0
			667
Enter the Total from Line 8 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)	Repayments Made During Period		Loans Owed 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 Lines 1 through 4					
Enter the Totals from Line 5 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**

Name (List all persons who held office during the reporting period even if they received no salary or other disbursements.) (A)	Title (B)	Status (C)*	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)	
1.								
2.								
3.								
4.								
5.	(SEE ATTACHED SCHEDULE)							
6.								
7.								
8.								
9.								
10. Totals from additional pages (if any)			443,768	47,214	85,048		576,030	
11. Totals of Lines 1 through 10							576,030	
					12. Less Deductions		179,722	
					13. Net Disbursements		396,308	
Enter the Total from Line 13 in .....							↑ Item 56	
* Code for Column (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**

Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.) (A)	Position (B)	Name of Affiliated Organization (if applicable) (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)	
1.								
2.								
3.								
4.								
5.	(SEE ATTACHED SCHEDULE)							
6.								
7.								
8.								
9. Totals from additional pages (if any)			110,272	0	130	0	110,402	
10. Totals for all employees who, during the reporting period, received \$10,000 or less in total disbursements from your organization and any affiliates								
11. Totals of Lines 1 through 10				0	130	0	110,402	
					12. Less Deductions		32,206	
					13. Net Disbursements		78,196	
Enter the Total from Line 13 in .....							↑ Item 57	

**SCHEDULE 11 — BENEFITS**

Description (A)	To Whom Paid (B)	Amount (C)
1. OUT OF WORK BENEFITS	MEMBERS	275
2. PENSION PLAN	PENSION FUND 294 & NYS Teamsters	77,319
3. HEALTH & WELFARE PLAN	NYS TEAMSTERS CNCL HEALTH/HOSP	60,420
4. LOST TIME WAGES	MEMBERS	19,861
5.		
6.		
7.		
8.		
9.		
10. Total from additional pages (if any)		
11. Total of Lines 1 through 10		157,875
Enter the Total from Line 11 in .....		↑ Item 63

**SCHEDULE 12 — CONTRIBUTIONS, GIFTS & GRANTS**

Description (A)	Amount (B)
1. ORGANIZED CHARITIES	1281
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10. Total from additional pages (if any)	
11. Total of Lines 1 through 10	1281
Enter the Total from Line 11 in ..... ↑ Item 64	

**SCHEDULE 13 — OFFICE & ADMINISTRATIVE EXPENSE**

Description (A)	Amount (B)
1. MEETING & COMMITTEE EXPENSE	5,735
2. OUT OF TOWN TRAVEL	52,445
3. RENT	44,845
4. Supplies & Printing	21,563
5. Postage, Flowers, Cards	10,699
6. Telephone	22,165
7. Machine Main. & Leasing	2,124
8. Insurance	8,591
9. Office & Supply	429
10. Total from additional pages (if any)	
11. Total of Lines 1 through 10	168,596
Enter the Total from Line 11 in ..... ↑ Item 60	

**SCHEDULE 14 — OTHER RECEIPTS**

Description (A)	Amount (B)
1. Non Member Shop Fees	19,624
2. Collections Returned Checks	905
3. Collection Auto Allowance	4,680
4. Collection Care Program	988
5. Collection of Strike Benefits	2,468
6. Rec. From Affiliates	12,963
7. Reimbursement of Expenses	12,256
8.	
9.	
10. Total from additional pages (if any)	
11. Total of Lines 1 through 10	53,884
Enter the Total from Line 11 in ..... ↑ Item 54	

**SCHEDULE 15 — OTHER DISBURSEMENTS**

Description (A)	Amount (B)
1. Auto Allowance Withheld	4680
2. Dues Withheld	4416
3. Savings withheld	16048
4. Refund on Dues	8050
5. Checks Uncollected & Returned	980
6. Strike Expenses	3609
7.	
8.	
9.	
10. Total from additional pages (if any)	
11. Total of Lines 1 through 10	37,783
Enter the Total from Line 11 in ..... ↑ Item 73	

TEAMSTER LOCAL - 294 - 042-415-12/97

MAR 31 1998

INTERNATIONAL BROTHERHOOD OF TEAMSTERS  
 CHAUFFEURS, WAREHOUSEMEN AND HELPERS OF AMERICA  
 LOCAL UNION 294  
 890 THIRD STREET  
 ALBANY, NEW YORK 12206

SCHEDULE OF DISBURSEMENTS TO OFFICERS  
 FOR THE CALENDAR YEAR ENDED DECEMBER 31, 1997

(ATTACHED TO FORM LM-2 FOR THE CALENDAR YEAR 1997)

<u>OFFICER NAME</u>	<u>OFFICER TITLE</u>	<u>STATS</u>	<u>GROSS SALARY</u>	<u>EXPENSE ALLOWANCE</u>	<u>EXPENSES AND REIMBURS. EXPENSES</u>	<u>TOTAL DISBURSED</u>
Howard Bennett	President	C	84,968	-0-	15,119	100,087
John Bulgaro	Sec. Treas.	C	74,256	-0-	13,313	87,569
John Kearney	Bus. Agent	C	71,136	-0-	11,964	83,100
Dave McComb	Bus. Agent	C	71,136	-0-	15,626	86,762
Kevin Hunter	Rec. Sec.	C	71,136	-0-	15,623	86,759
Thomas Baum	Bus. Agent	C	71,136	-0-	11,898	83,034
Lawrence Yevoli	Vice Pres.	C	-0-	9,396	502	9,898
Richard Shade	Rec. Sec.	C	-0-	9,396	-0-	9,396
John Gottstein	Sgt. at Arms	C	-0-	1,800	-0-	1,800
Joseph Ready	Trustee	C	-0-	9,396	903	10,299
Gerald Menz	Trustee	P	-0-	783	-0-	783
John R. Mahan	Trustee	N	-0-	9,396	100	9,496
Robert Dipace	Trustee	N	-0-	7,047	-0-	7,047
TOTALS.....			<u>443,768</u>	<u>47,214</u>	<u>85,048</u>	<u>576,030</u>

TEAMSTERS LOCAL 294-042-415-12/97

816

INTERNATIONAL BROTHERHOOD OF TEAMSTERS  
CHAUFFEURS, WAREHOUSEMEN AND HELPERS OF AMERICA  
LOCAL UNION 294  
890 THIRD STREET  
ALBANY, NEW YORK 12206

SCHEDULE OF DISBURSEMENTS TO EMPLOYEES  
FOR THE CALENDAR YEAR ENDED DECEMBER 31, 1997

(ATTACHED TO FORM LM-2 FOR THE CALENDAR YEAR 1997)

<u>EMPLOYEE NAME</u>	<u>EMPLOYEE TITLE</u>	<u>STATUS</u>	<u>GROSS SALARY</u>	<u>EXPENSE ALLOWANCE</u>	<u>EXPENSES AND REIMBURS. EXPENSES</u>	<u>TOTAL DISBURSED</u>
Kathleen Harkins	Employee	C	41,981	-0-	130	42,111
Darlene Oaks	Employee	C	32,747	-0-	-0-	32,747
Henrietta Larson	Employee	C	32,959	-0-	-0-	32,959
Michelle Hunter	Employee	C	<u>2,585</u>	<u>-0-</u>	<u>-0-</u>	<u>2,585</u>
TOTALS.....			<u>110,272</u>		<u>130</u>	<u>110,402</u>