Montana Public Service Commission Motor Carrier Annual Report

Report must be filed on or before March 31st each year

All annual report filings must be signed by an owner or officer of the company and notarized by a notary public. (oath page)

Carrier Name (EXACTLY AS SHOWN ON PSC	Sı	ıhr Trans	port								
AUTHORITY)											-
PSC Number 541				S	ee Gener	al Inst	ruction # 5				
				1							
See Gen	eral In	struction #	1								
Reporting Year	2020)									
				_	mm/yyyy	to mm/yyy	y format	-			
Reporting Peri				,		to		,			
Calend	lar yea)		,		to		,			
CARRIER ADDRESS	#1 H	uffman Coเ	ırt								
	City	Great Falls			State	MT		Zip	59404		[
	Check	1 - 41	l		41		· c : _ : _ i i			l 4 4l	D 00
YES NO						carriers of ve monthly PSC)?	y notice				
	Check	I£ 41		411-		41 ! - NC	\				
YES NO	Oncon	if the ar	iswer to			tion is NC to that sh			your omic	al addr	ess
Carrier e-mail address	jean	@suhrtra	nsport.	.com			optional				
		Dore	son Comp	lotina D	onort						
Name	Je	an Fayde	-	neurig K	ероп						
Phone Number	4	06-727-3	200								
E-mail Address	E-mail Address jean@suhrtransport.com optional										
	Check	One									
YES	Y		THE CA	RRIER	RTRANSF	PORT ANY	REGUL	ATED	INTRAST	ATE	
NO						_D GOODS					
If NO See Gene instruction #			FILING	PERIC	DD?						
			Montar	a Dub	lic Sprvi	CA Comm	niccion				

Montana Public Service Commission Transportation Division 1701 Prospect Avenue / PO Box 202601 Helena, MT 59620-2601

GENERAL INSTRUCTIONS

Enclosed is the motor carrier annual report form prescribed by the Montana Public Service Commission. This report must be filed with the Montana Public Service Commission on or before MARCH 31st of each year following that which the report is made. Filing of an annual report by motor carriers is prescribed by Section 69-12-401, MCA. Failure to submit this report in full may jeopardize your operating authority.

- 1. Report should represent operations for the calendar year (January 1st to December 31st). If your company wishes to file on a fiscal year, a written request must be submitted to the Commission for approval. All subsequent reports must then be filed on the fiscal year end.
- 2. All data may be reported to the nearest whole dollar or whole number.
- 3. If there were no regulated intrastate moves during the filing period, a negative report may be filed. To file a negative report, complete the cover sheet and note that no regulated intrastate passengers or commodities were transported. No further financial information is required. Mail the completed cover sheet and signed and notarized oath page to the public service commission.
- 4. All annual report filings must be signed an by owner or officer of the company and notarized by a notary public.
- 5. If a company operates under more than one PSC number, <u>registered in exactly the same</u> <u>company name</u>, a combined report may be filed. However that fact should be clearly noted on the cover of the report.

6. ALL CARRIERS MUST COMPLETE:

Schedule 1 (Income Statement)
Schedule 2 (Balance Sheet)
Schedule 3 (Intrastate Revenue)

Oath

7. Class D carriers <u>not generating</u> \$5,000 gross revenue from the Class D authority during the calendar year must complete:

Schedule 4 (Monthly Customer Listing)

8 Class D carriers NOT MEETING reporting requirements listed in the above schedules must complete:

Schedule 5 (Verified Statement)

PSC #	541		T	
Year	2020			
			SCHEDULE 1	
			INCOME STATEMENT	
	Operation	ng Rev	renue	
1.			te Revenue	77889
2.			te Revenue	467820
3.	1	Non-Re	egulated Revenue	146329
4.	TOTAL			2009008
	Expense	es		
5.			s—Officers & Supervisory Personnel	347116
			s & Wages	
6.			Clerical & Administrative	49056
7.			Drivers & Helpers	316912
8.			Cargo Handlers	313312
9.			Vehicle Repair & Service	56
10.			Other Labor	40210
	(Other F	Fringes	
11.			Payroll Taxes	168705
12.			Workman's Compensation	92394
13.			Pension & Welfare Expenses	
		Operati	ng Supplies & Expenses	
14.		-	Fuel for Motor Vehicles	70911
15.			Vehicle Parts	12340
16.			Other Operating Supplies & Expenses	122392
17.			General Supplies & Expenses	280607
	<u>(</u>	Operati	ng Taxes & Licenses	
18.			Gas, Fuel and Oil Taxes	3424
19.			Real Estate & Personal Property Taxes	2946
20.			Vehicle License & Registration Fees	12537
21.			Other Taxes	-159
22.		Insuran		127015
23.			nications & Utilities	50172
24.]	Deprec	iation & Amortization	
25.			Revenue Equipment	18240
26.			Other	
]	Purchas	sed Transportation	
27.			With Driver	550
28.			Without Driver	12951
29.			Other Purchased Transportation	
30.	1	Buildin	g & Office Equipment Rents	
31.			Loss on Disposition of Operating Assets	
32.			aneous Expenses	202945
J2.		141100011	анеона Биренаса	202940
33.	TOTAL	EXPE	NSES	1970361
34.	NET IN	COME	E OR LOSS	38647

PSC #	541		
Year	2020	1	
		SCHEDULE 2	
		BALANCE SHEET	
		(ASSETS)	
	CURRENT AS	<u>SSETS</u>	
1.		z Working Funds	455788
2.		Deposits	
3.		rary Cash Investments	
4.	Notes 1	Receivable	
5.	Accoun	nts Receivable	66677
6.	Prepay	ments	
7.	Materia	als & Supplies	
8.	Other (Current Assets	7030
9.		TOTAL CURRENT ASSETS	529495
	TANGIBLE P	ROPERTY	
10.		Operating Property	1530896
11.		Less: Reserve for Depreciation	1240739
12.	Carrier Operating Property Leased to Others		
13.		Less: Reserve for Depreciation	
14.	Non-C	arrier Operating Property	782321
15.	2,532	Less: Reserve for Depreciation	364329
16.		TOTAL TANGIBLE PROPERTY	708149
	INTANCIDII	PRODERTY	
17.	INTANGIBLE	zation, Franchises & Permits	
18.	Organi	Less: Reserve for Amortization	
19.	Other I	intangible Property	
20.	Other	Less: Reserve for Amortization	
21.		TOTAL INTANGIBLE PROPERTY	
41.		TOTAL INTANGIBLE PROPERTY	
22.	Total I	nvestment Securities and Advances	276288
23.		pecial Funds	
24.		Deferred Debits	1236
25	TOTAL ACCE	NTTG.	
25.	TOTAL ASSE	<u>.15</u>	1515168

PSC#	541	1	
Year	2020		
		SCHEDULE 2	
		BALANCE SHEET	
		(LIABILITIES)	
	CURRENT LIA		
26		yable & Matured Long Term Obligations	
27	Accounts		
28	Wages Pa		
29		Unremitted	
30	Taxes Ac		
31	Interest A		
32	Matured		
33	Other Cu	rrent Liabilities	
34		TOTAL CURRENT LIABILITIES	19880
		DEBT DUE WITHIN ONE YEAR	
35	Equipme	nt Obligations and other Debt	
	7 0310 0000		
		DEBT DUE AFTER ONE YEAR	
36	Advances	·	
37	Equipme	nt Obligations	
38	0.1	Less reacquired and nominally issued	
39	Other Lo	ng Term Obligations	271705
40		Less reacquired and nominally issued	
41		TOTAL LONG TERM DEBT	
40	T . 1 D .		
42		ferred Credits	
43	Total Res	serves	
	SHAREHOLD	ERS' (OR PROPRIETORS') EQUITY	
44.		oital Stock	216289
45		prietors' Capital	
46		ained Earnings	1007294
47	10001100	TOTAL SHAREHOLDERS' (OR PROPRIETORS') EQUITY	1223583
		(0	
48	TOTAL LIABI	LITIES & SHAREHOLDERS' (OR PROPRIETORS') EQUITY	1515168
		, , , , , , , , , , , , , , , , , , , ,	
	DO TOTAL AS	SSETS EQUAL TOTAL LIABILITIES & SHAREHOLDERS' (OR	
	PROPRI	ETORS) EQUITY? IF NOT PLEASE REVIEW AND MAKE	
		CORRECTIONS	

PS	C # ₅₄₁
Υ	ear 2020
The resp	one control figure
	SCHEDULE 3
	INTRASTATE OPERATING REVENUE
Complete the follo	owing Schedule reflecting intrastate operating revenue.
	INTRASTATE REVENUE
Household Good	
nousenoia Good	77889
Doggongong	
Passengers	
Class C	
Class	
Class D (Garba	ge)
Class D (Garba,	
Class D carriers	NOT HAVING \$5,000 gross revenue from Class D transportation go to Schedule 4
Class D carriers	not generating \$5,000 gross revenue From Class D transportation or serving
twenty (20) custon	ners each month, go to Schedule 5.
	ters each mentil, go to seneative et
TOTAL	77889
INTRASTATE	
REVENUE	
REVENUE	
	Note: Total Intrastate Revenue must equal the intrastate revenue amount
	shown on Line 1, Schedule 1, Income Statement.

PSC#	
Year	

SCHEDULE 4 MONTHLY CUSTOMER LISTING FOR CLASS D SERVICE

	January	at least 20 customers per month during 6 February	March
1	•		
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
	April	May	June
1	April	May	June
2	April	May	June
2 3	April	May	June
2 3 4	April	May	June
2 3 4 5	April	May	June
2 3 4 5 6 —	April	May	June
2 3 4 5 6 7	April	May	June
2 3 4 5 6 7 8	April	May	June
2 3 4 5 6 7 8 9	April	May	June
2 3 4 5 6 7 8 9 10	April	May	June
2 3 4 5 6 7 8 9 110 111	April	May	June
2 3 4 5 6 7 8 9 110 111 112	April	May	June
2	April	May	June
2	April	May	June
2	April	May	June
2	April	May	June
2	April	May	June
2	April	May	June

PSC#	
Year	

SCHEDULE 4 cont.

_	July	August	September
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
	October	November	December
	October	November	December
20	October	November	December
20	October	November	December
20 1 2	October	November	December
20 1 2 3	October	November	December
20 1 2 3 4	October	November	December
1 2 3 4 5	October	November	December
1 2 3 4 5 6	October	November	December
1 2 3 4 5 6 7	October	November	December
20 20 3 4 5 6 7 8 9 10	October	November	December
20	October	November	December
20 20 3 4 5 6 7 8 9 10	October	November	December
20 1 2 3 4 5 6 7 8 9 10 11	October	November	December
20 1 2 3 4 5 6 7 8 9 10 11 12	October	November	December
20 1 2 3 4 5 6 7 8 9 10 11 12 13	October	November	December
20 1 2 3 4 5 6 7 8 9 10 11 12 13 14	October	November	December
20 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	October	November	December
1 2 3 4 5 6 7 8 9 110 111 112 113 114 115 116	October	November	December

\mathbf{a}		

PSC #	
Year	

SCHEDULE 5 VERIFIED STATEMENT

Schedule 5 must be completed by Class D carriers who did not generate \$5,000 gross revenue from Class D operations and did not serve twenty (20) customers for each month of the calendar year.

The verified statement will be reviewed by the Commission and a determination made whether the certificate should be cancelled.

STATEMENT:

PSC #	
	тн
STATE OF Montana	
	SS.
County of Cascade	
I, the undersigned President that the foregoing return has been prepared, under my dire motor carrier; that I have carefully examined the same and of the business and affairs of said motor carrier in respect best of my knowledge, information and belief; and I furthe gross earnings or receipts herein set forth except those sho figures contained in thee foregoing return embrace all of the period for which said return is filed.	declare the same to be a complete and correct statement to each and every matter and thing therein set forth, to the r say that no deductions were made before stating the wn in the foregoing accounts; and that the accounts and
	(Signature of owner/officer/authorized representative)
	(Title)
SUBSCRIBED AND SWORN to before me this	s, 20
(SEAL)	Notary Public
	In and for the State of
	Residing at
	My Commission Expires