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	Ru	nnin'	Bear,	In	С.			
AUTHORITY)								1
PSC Number	49	91-3		S	e <mark>e</mark> Gener	al Instru	iction # 5	
See Gen	eral Instruction	#1			_			
Reporting Year	2021							
			mm/yyyy	to mm/yyy	y format			
	od (if other than ar year)	1		to		1		
CARRIER ADDRESS	499	Forest	Hill	Rd.				
	City Kalis	ipell	State	MT		Zip	59901	
NO YES NO	Check If the	answer to the a		PSC)? tion is NO to that sh	D do you	-	our official a	address
Carrier e-mail address	runnin bea	ur 11 egma	ail.com		optional			
	F	Person Completing	Report					2
Name		n Schu						
Phone Number	406 - 857 - 2327							
E-mail Address	<i>cunninbe</i>	ear 11 e g	mail.co	m	optional			
	Check One							
YES		ID THE CARRIE						
NO If NO See Gene instruction #3	ral T	ASSENGERS, H HE FILING PERI		D GOOD	S UK GA	RBAGE		
		Montana Pu Transportati 1701 Prospe Helena, MT	on Divisio ect Avenu	on le / PO B		01		

PSC #	499	STATISTICS IN CONTRACTOR OF CONTRACT,		
Year	202	.1		
			SCHEDULE 1	
			**	
			INCOME STATEMENT	
	Operat	ing Do	Vonuo	
1	Operat	1	tate Revenue	* 5 7110 25
1. 2.			ate Revenue	* 5, 749,25 695, 219, 78
	- C			693,219.10
3. 4.	Non-Regulated Revenue TOTAL REVENUE			65,455.50
т.	IUIA		ENCE	766,424.53
	Evenon			
5.	Expens		es—Officers & Supervisory Personnel	1
5.			es & Wages	
6.		Salarie	Clerical & Administrative	
o. 7.				
7. 8.			Drivers & Helpers	
8. 9.			Cargo Handlers Vehicle Repair & Service	
9. 10.			Other Labor	
10.	1	Other	Fringes	
11.		Other	Payroll Taxes	
12.			Workman's Compensation	
12.			Pension & Welfare Expenses	
15.		Operat	ting Supplies & Expenses	
14.		Opera	Fuel for Motor Vehicles	
14.			Vehicle Parts	
16.			Other Operating Supplies & Expenses	
17.			General Supplies & Expenses	
17.		Onoro	ting Taxes & Licenses	
18.		Opera	Gas, Fuel and Oil Taxes	
18.			Real Estate & Personal Property Taxes	
20.			Vehicle License & Registration Fees	
20.			Other Taxes	
22.		Insura		
23.			nunications & Utilities	
23. 24.			ciation & Amortization	
25.		Depre	Revenue Equipment	
23. 26.			Other	
20.		Purch	ased Transportation	
27.		<u>I urcia</u>	With Driver	
27.			Without Driver	
28. 29.			Other Purchased Transportation	
<i>LJ</i> .				
30.		Buildi	ng & Office Equipment Rents	
31.		Gain or Loss on Disposition of Operating Assets		
32.			Ilaneous Expenses	
52.		111500.	*	.
33.	TOTA	L EXP	ENSES	
	IUIA			
34.	NIET T	NCOM	E OR LOSS	

PSC #	4991-3			
Year	2021			
	SCHEDULE 2			
	BALANCE SHEET			
	(LIABILITIES)			
	CURRENT LIABILITIES			
26	Notes Payable & Matured Long Term Obligations			
27	Accounts Payable			
28	Wages Payable			
29	C.O.D.'s Unremitted			
30	Taxes Accrued	1		
31	Interest Accrued			
32	Matured Interest			
33	Other Current Liabilities			
34	TOTAL CURRENT LIABILITIE	CS		
	LONG TERM DEBT DUE WITHIN ONE YEAR	E		
35	Equipment Obligations and other Debt			
	LONG TERM DEBT DUE AFTER ONE YEAR			
36	Advances Payable			
37	Equipment Obligations			
38	Less reacquired and nominally issued			
39	Other Long Term Obligations			
40	Less reacquired and nominally issued	-		
41	TOTAL LONG TERM DEB	ſ		
10				
42	Total Deferred Credits			
43	Total Reserves			
	SHAREHOLDERS' (OR PROPRIETORS') EQUITY			
44.	Total Capital Stock			
45	Total Proprietors' Capital			
46	Total Retained Earnings			
47	TOTAL SHAREHOLDERS' (OR PROPRIETORS') EQUIT	Y		
48	TOTAL LIABILITIES & SHAREHOLDERS' (OR PROPRIETORS') EQUITY	7		
40	I CIAL LIABILITIES & SHAKEHOLDERS (OK I KOI KIETOKS / EQUIT)	<u> </u>		
	DO TOTAL ASSETS EQUAL TOTAL LIABILITIES & SHAREHOLDERS' (O PROPRIETORS) EQUITY? IF NOT PLEASE REVIEW AND MAKE CORRECTIONS	R		

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PSC #	499	-3		
Year	207	the second war was a provide the second s		
			SCHEDULE 2	
			BALANCE SHEET	
			(ASSETS)	
	CURRI	NT ASSETS		
1.		Cash & Working Funds		
2.		Special Deposit		
3.		Femporary Cas		4-
4.		Notes Receivab		
5.		Accounts Recei	vable	
6.		Prepayments		
7.		Materials & Su	pplies	
8.		Other Current A	Assets	
9.			TOTAL CURRENT ASSETS	
	TANCI	BLE PROPER	TV	
10.	TANGI	Carrier Operation		
11.				
12.		Less: Reserve for Depreciation		
12.		Carrier Operating Property Leased to Others		
13.		Less: Reserve for Depreciation		
14.		Non-Carrier Operating Property Less: Reserve for Depreciation		
16.		Less.	TOTAL TANGIBLE PROPERTY	
	INTAN	GIBLE PROP	ERTY	
17.	Organization, Franchises & Permits			
18.		Less: Reserve for Amortization		
19.	Other Intangible Property			
20.			Less: Reserve for Amortization	
21.			TOTAL INTANGIBLE PROPERTY	
22.		Fotal Investmen	nt Securities and Advances	/
23.	Total Special Funds			
24.		Total Deferred		
25.	TOTAL	ASSETS	•	he.

PSC #	¢
Yea	
[] [*] Normal care lands to a	
	SCHEDULE 3
	INTRASTATE OPERATING REVENUE
complete the follow	ing Schedule reflecting intrastate operating revenue.
	INTRASTATE REVENUE
Household Goods	#5,749.25
Passengers	
Class C	
Class D (Garbage)	
C lass D carriers not	generating \$5,000 gross revenue From Class D transportation or serving
Class D carriers not wenty (20) customer FOTAL INTRASTATE	
C lass D carriers not wenty (20) customer FOTAL	generating \$5,000 gross revenue From Class D transportation or serving s each month, go to Schedule 5.
Class D carriers not wenty (20) customer FOTAL NTRASTATE	generating \$5,000 gross revenue From Class D transportation or serving as each month, go to Schedule 5. 5,749.25 Note: Total Intrastate Revenue must equal the intrastate revenue amount
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PSC #	4991-3	
Year	2021	

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 # <u>4991-3</u> Year <u>2021</u>

OATH

STATE OF MON TANA

SS.

County of FLATHEAD

I, the undersigned of the motor carrier, above named, on my oath say that the foregoing return has been prepared, under my direction, from the original books, papers and record of said motor carrier; that I have carefully examined the same and declare the same to be a complete and correct statement of the business and affairs of said motor carrier in respect to each and every matter and thing therein set forth, to the best of my knowledge, information and belief; and I further say that no deductions were made before stating the gross earnings or receipts herein set forth except those shown in the foregoing accounts; and that the accounts and figures contained in thee foregoing return embrace all of the financial operations of said motor carrier during the period for which said return is filed.

(Signature of owner/officer/authorized representative)

resident

SUBSCRIBED AND SWORN to before me this ______ day of _____, 20 72.

KYLIE HEWITT

NOTARY PUBLIC for the State of Montana Residing at Kalispell, Montana

My Commission Expires January 28, 2026

(SEAL)

EHEW

Notary Public

In and for the State of Montana

Residing at Kalisper

My Commission Expires January 25, 2026