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MONT. P.S. COMMISSION

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 AUTHORITY)

Glacier Park, Inc.

PSC Number

268

See General Instruction # 5

See General Instruction # 1

Reporting Year

2019

Reporting Period (if other than calendar year)

mm/yyyy to mm/yyyy format

CARRIER ADDRESS

PO Box 147

City East Glacier Park State MT Zip 59434

Check

YES NO

Is the address shown above the carriers official address now on file at the PSC (address at which you now receive monthly notice and other materials from the PSC)?

Check

YES NO

If the answer to the above question is NO do you want your official address changed to that shown above?

Carrier e-mail address

G.Rodgers@pursuitcollection.com optional

Person Completing Report

Name Gary Rodgers

Phone Number 406-892-6711

E-mail Address optional

Check One

YES NO

IF NO See General Instruction #3

DID THE CARRIER TRANSPORT ANY REGULATED INTRASTATE PASSENGERS, HOUSEHOLD GOODS OR GARBAGE DURING THE FILING PERIOD?

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, registered in exactly the same company name, 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 not generating \$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 #			
Year			
SCHEDULE 1			
INCOME STATEMENT			
Operating Revenue			
1.	Intrastate Revenue		103,068. ⁰⁰
2.	Interstate Revenue		
3.	Non-Regulated Revenue		
4.	TOTAL REVENUE		103,068. ⁰⁰
Expenses			
5.	Salaries—Officers & Supervisory Personnel		
Salaries & Wages			
6.	Clerical & Administrative		
7.	Drivers & Helpers		102,544
8.	Cargo Handlers		
9.	Vehicle Repair & Service		92,261
10.	Other Labor		
Other Fringes			
11.	Payroll Taxes		12,686
12.	Workman's Compensation		
13.	Pension & Welfare Expenses		
Operating Supplies & Expenses			
14.	Fuel for Motor Vehicles		18,546
15.	Vehicle Parts		
16.	Other Operating Supplies & Expenses		2,758
17.	General Supplies & Expenses		
Operating Taxes & Licenses			
18.	Gas, Fuel and Oil Taxes		
19.	Real Estate & Personal Property Taxes		
20.	Vehicle License & Registration Fees		4,466
21.	Other Taxes		
22.	Insurance		15,000
23.	Communications & Utilities		6,176
Depreciation & Amortization			
25.	Revenue Equipment		56,006
26.	Other		
Purchased Transportation			
27.	With Driver		
28.	Without Driver		
29.	Other Purchased Transportation		
30.	Building & Office Equipment Rents		
31.	Gain or Loss on Disposition of Operating Assets		
32.	Miscellaneous Expenses		
33.	TOTAL EXPENSES		310,443
34.	NET INCOME OR LOSS		(207,375)

PSC #			
Year			
SCHEDULE 2			
BALANCE SHEET			
(ASSETS)			
<u>CURRENT ASSETS</u>			
1.		Cash & Working Funds	
2.		Special Deposits	
3.		Temporary Cash Investments	
4.		Notes Receivable	
5.		Accounts Receivable	
6.		Prepayments	
7.		Materials & Supplies	
8.		Other Current Assets	
9.		<u>TOTAL CURRENT ASSETS</u>	
<u>TANGIBLE PROPERTY</u>			
10.		Carrier Operating Property	121,457
11.		Less: Reserve for Depreciation	56,006
12.		Carrier Operating Property Leased to Others	
13.		Less: Reserve for Depreciation	
14.		Non-Carrier Operating Property	
15.		Less: Reserve for Depreciation	
16.		<u>TOTAL TANGIBLE PROPERTY</u>	177,463
<u>INTANGIBLE PROPERTY</u>			
17.		Organization, Franchises & Permits	
18.		Less: Reserve for Amortization	
19.		Other Intangible Property	
20.		Less: Reserve for Amortization	
21.		<u>TOTAL INTANGIBLE PROPERTY</u>	
22.		Total Investment Securities and Advances	
23.		Total Special Funds	
24.		Total Deferred Debits	
25.		<u>TOTAL ASSETS</u>	177,463

PSC #			
Year			
SCHEDULE 2			
BALANCE SHEET (LIABILITIES)			
<u>CURRENT LIABILITIES</u>			
26	Notes Payable & Matured Long Term Obligations		
27	Accounts Payable		
28	Wages Payable		
29	C.O.D.'s Unremitted		
30	Taxes Accrued		
31	Interest Accrued		
32	Matured Interest		
33	Other Current Liabilities		
34	TOTAL CURRENT LIABILITIES		
<u>LONG TERM DEBT DUE WITHIN ONE YEAR</u>			
35	Equipment Obligations and other Debt		
<u>LONG TERM DEBT DUE AFTER ONE YEAR</u>			
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 DEBT		
42	Total Deferred Credits		
43	Total Reserves		
<u>SHAREHOLDERS' (OR PROPRIETORS') EQUITY</u>			
44	Total Capital Stock		
45	Total Proprietors' Capital		
46	Total Retained Earnings		177,463
47	TOTAL SHAREHOLDERS' (OR PROPRIETORS') EQUITY		
48	TOTAL LIABILITIES & SHAREHOLDERS' (OR PROPRIETORS') EQUITY		
DO TOTAL ASSETS EQUAL TOTAL LIABILITIES & SHAREHOLDERS' (OR PROPRIETORS) EQUITY? IF NOT PLEASE REVIEW AND MAKE CORRECTIONS			

PSC #

Year

SCHEDULE 3

INTRASTATE OPERATING REVENUE

Complete the following Schedule reflecting intrastate operating revenue.

INTRASTATE REVENUE

Household Goods

Passengers

Class C

Class D (Garbage)

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) customers each month, go to Schedule 5.

**TOTAL
INTRASTATE
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

Customer listing must include at least 20 customers per month during each month of the calendar year

	January	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			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

PSC# 268
Year 2019

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
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			

20

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PSC # 268
Year 2019

**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 # 268
Year 2019


OATH

STATE OF Montana

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 these 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)

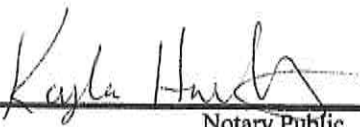
VP/General Manager

(Title)

SUBSCRIBED AND SWORN to before me this 10th day of March, 2020.

(SEAL)





Notary Public

In and for the State of Montana

Residing at Whitefish, MT

My Commission Expires Feb 24, 2022