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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)

Triple S Disposal, Inc.

PSC Number

4066

See General Instruction # 5

See General Instruction # 1

Reporting Year

2018

Reporting Period (if other than calendar year)

mm/yyyy to mm/yyyy format

CARRIER ADDRESS

10006 Coz 342
PO Box 22

City

Savage

State

MT

Zip

54262

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

triples@midrivers.com

optional

Person Completing Report

Name

Rebecca Miller

Phone Number

406-776-2500

E-mail Address

triples@midrivers.com

optional

Check One

YES NO

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

If NO See General instruction #3

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

Triple S Disposal, Inc.
Balance Sheet
As of December 31, 2018

	<u>Dec 31, 18</u>
ASSETS	
Current Assets	
Checking/Savings	
Triple S Disposal, Inc.	16,722.44
Total Checking/Savings	16,722.44
Accounts Receivable	
Accounts Receivable	139,056.95
Total Accounts Receivable	139,056.95
Other Current Assets	
Undeposited Funds	1,213.55
Total Other Current Assets	1,213.55
Total Current Assets	156,992.94
Fixed Assets	
Equipment	859,904.62
Accumulated Depreciation	-421,804.14
Total Fixed Assets	438,100.48
TOTAL ASSETS	<u>595,093.42</u>
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	1,349.43
Total Accounts Payable	1,349.43
Total Current Liabilities	1,349.43
Long Term Liabilities	
First Interstate Loan	25,592.63
Business Loan #5430	380,713.34
Richland Economic Development L	2,197.98
Total Long Term Liabilities	408,503.95
Total Liabilities	409,853.38
Equity	
Capital Stock	10,000.00
Retained Earnings	66,349.60
Shareholder Distributions	-20,245.34
Net Income	129,135.78
Total Equity	185,240.04
TOTAL LIABILITIES & EQUITY	<u>595,093.42</u>

Triple S Disposal, Inc.
Profit & Loss
January through December 2018

	Jan - Dec 18
Ordinary Income/Expense	
Income	
Land Fill Fee	67,803.25
Red Box	115,560.00
Richland County Contract	76,140.24
Roll Off	130,481.85
Total Income	389,985.34
Gross Profit	389,985.34
Expense	
Capital One	5,500.00
License	563.68
Advertising and Promotion	1,453.60
Automobile Expense	6,280.66
Bank Service Charges	6.80
Business Licenses and Permits	25.00
Department of Revenue	7,051.07
Equipment Rental	2,163.00
federal deposit	23,428.95
fuel	43,755.96
IFTA	3,157.54
Insurance Expense	
Life and Disability Insurance	310.08
Insurance Expense - Other	14,203.68
Total Insurance Expense	14,513.76
Land Fill Expense	42,524.00
Miscellaneous Expense	1,080.00
MT State Fund	4,906.01
Office Supplies	6,503.19
parts	6,277.59
Rent Expense	7,200.00
Repairs and Maintenance	9,708.64
supplies	397.15
Taxes - Property	647.15
Telephone Expense	1,013.77
Unemployment Insurance Division	136.00
Utilities	63.96
wages	48,551.37
work Clothes	112.00
Total Expense	237,020.85
Net Ordinary Income	152,964.49
Other Income/Expense	
Other Income	
personal contribution	2,091.29
Total Other Income	2,091.29
Other Expense	
PIGS	2,000.00
Ask My Accountant	2,170.00
draw	21,750.00
Total Other Expense	25,920.00
Net Other Income	-23,828.71
Net Income	129,135.78

TRIPLE S DISPOSAL, INC.
Payroll Summary
 January through December 2018

	BROCK A MILLER			KEITH CARLSON		
	Hours	Rate	Jan - De...	Hours	Rate	Jan - De...
Employee Wages, Taxes and Adjustments						
Gross Pay						
Officer Wages			0.00			0.00
Hourly	2,080	13.00	26,320.00	80	17.50	1,400.00
Overtime (x1.5) hourly		19.50	0.00	24	26.25	630.00
Total Gross Pay	2,080		26,320.00	104		2,030.00
Adjusted Gross Pay	2,080		26,320.00	104		2,030.00
Taxes Withheld						
Federal Withholding			-2,042.00			-195.00
Medicare Employee			-381.64			-29.44
Social Security Employee			-1,631.84			-125.86
MT - Withholding			-1,047.00			-90.00
Medicare Employee Addl Tax			0.00			0.00
Total Taxes Withheld			-5,102.48			-440.30
Deductions from Net Pay						
Rent Deduction			0.00			-300.00
Utilities Deduction			0.00			-100.00
Total Deductions from Net Pay			0.00			-400.00
Additions to Net Pay						
Cash Advance			0.00			-240.00
Total Additions to Net Pay			0.00			-240.00
Net Pay	2,080		21,217.52	104		949.70
Employer Taxes and Contributions						
Federal Unemployment			42.00			12.18
Medicare Company			381.64			29.44
Social Security Company			1,631.84			125.86
MT - Unemployment			0.00			0.00
MT - Admin. Fund Tax			34.22			2.64
Total Employer Taxes and Contributions			2,089.70			170.12

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TRIPLE S DISPOSAL, INC.
Payroll Summary
 January through December 2018

	KIP A DENOWH			REBECCA D MILLER		
	Hours	Rate	Jan - De...	Hours	Rate	Jan - De...
Employee Wages, Taxes and Adjustments						
Gross Pay						
Officer Wages			0.00			36,164.64
Hourly	385.5	17.00	6,553.50			0.00
Overtime (x1.5) hourly	31.75	25.50	809.63			0.00
Total Gross Pay	417.25		7,363.13			36,164.64
Adjusted Gross Pay	417.25		7,363.13			36,164.64
Taxes Withheld						
Federal Withholding			-623.00			-9,357.66
Medicare Employee			-106.77			-524.39
Social Security Employee			-456.51			-2,242.21
MT - Withholding			-318.00			-4,540.38
Medicare Employee Addl Tax			0.00			0.00
Total Taxes Withheld			-1,504.28			-16,664.64
Deductions from Net Pay						
Rent Deduction			0.00			0.00
Utilities Deduction			0.00			0.00
Total Deductions from Net Pay			0.00			0.00
Additions to Net Pay						
Cash Advance			0.00			0.00
Total Additions to Net Pay			0.00			0.00
Net Pay	417.25		5,858.85			19,500.00
Employer Taxes and Contributions						
Federal Unemployment			42.00			42.00
Medicare Company			106.77			524.39
Social Security Company			456.51			2,242.21
MT - Unemployment			0.00			0.00
MT - Admin. Fund Tax			9.57			41.60
Total Employer Taxes and Contributions			614.85			2,850.20

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TRIPLE S DISPOSAL, INC.
Payroll Summary
 January through December 2018

	ROGER W WARNER			TOTAL		
	Hours	Rate	Jan - De...	Hours	Rate	Jan - De...
Employee Wages, Taxes and Adjustments						
Gross Pay						
Officer Wages			0.00			36,164.64
Hourly	121.75	17.00	2,069.75	2,667.25		36,343.25
Overtime (x1.5) hourly	10.25	25.50	261.38	66.00		1,701.01
Total Gross Pay	132		2,331.13	2,733.25		74,208.90
Adjusted Gross Pay	132		2,331.13	2,733.25		74,208.90
Taxes Withheld						
Federal Withholding			-119.00			-12,336.66
Medicare Employee			-33.80			-1,076.04
Social Security Employee			-144.53			-4,600.95
MT - Withholding			-96.00			-6,091.38
Medicare Employee Addl Tax			0.00			0.00
Total Taxes Withheld			-393.33			-24,105.03
Deductions from Net Pay						
Rent Deduction			0.00			-300.00
Utilities Deduction			0.00			-100.00
Total Deductions from Net Pay			0.00			-400.00
Additions to Net Pay						
Cash Advance			0.00			-240.00
Total Additions to Net Pay			0.00			-240.00
Net Pay	<u>132</u>		<u>1,937.80</u>	<u>2,733.25</u>		<u>49,463.87</u>
Employer Taxes and Contributions						
Federal Unemployment			13.99			152.17
Medicare Company			33.80			1,076.04
Social Security Company			144.53			4,600.95
MT - Unemployment			0.00			0.00
MT - Admin. Fund Tax			3.03			91.06
Total Employer Taxes and Contributions			<u>195.35</u>			<u>5,920.22</u>

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	32 full Time D Customers		
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 # _____
Year _____

OATH

STATE OF _____

SS.

County of _____

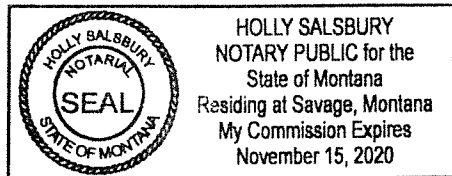
I, the undersigned _____ of the motor carrier, above named, on my oath say that the foregoing return has been prepared, under my direction, from the original books, papers and record of said motor carrier; that I have carefully examined the same and declare the same to be a complete and correct statement 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 the foregoing return embrace all of the financial operations of said motor carrier during the period for which said return is filed.

Rebecca D. Miller
(Signature of owner/officer/authorized representative)

Pres, Sec + Treas
(Title)

SUBSCRIBED AND SWORN to before me this 13 day of March, 2019.

(SEAL)



Holly Salsbury
Notary Public

In and for the State of MT

Residing at Savage

My Commission Expires Nov. 15, 2020