

WORKSHEET INSTRUCTIONS

- 1 Fill in required information on cover sheet. Information will carry forward to other worksheets.
- 2 Enter financial information, worksheet will calculate totals.
- 3 **Always enter positive numbers.**
- 4 Print Workbook by selecting that option on the Excel print menu or print each sheet.
- 5 **Sign report and have report notarized.**
- 6 Mail report to Public Service Commission.
- 7 **Completed report can only be saved to your local computer.**

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, 'Check **no** in the appropriate box on Cover Sheet'. No further financial information is required. **However, the report must be signed and notarized.**
4. All annual report filings must be signed by an 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:**

Cover Sheet
Intrastate Revenue
Income Statement
Balance Sheet
Oath

Class D Carriers

7. Class D carriers not generating \$5,000 gross revenue from the Class D authority during the calendar year must complete: (Monthly Customer Listing)
8. Class D carriers **NOT MEETING** reporting requirements (\$5,000 in revenue or 20 customers per month) must complete: (Verified Statement)

Montana Public Service Commission

Motor Carrier Annual Report

Carrier Name
(EXACTLY AS
SHOWN ON
PSC
AUTHORITY)

Whitefish Trail Shuttle llc

PSC Number

9556	See General Instruction # 5
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See General Instruction # 1	
Reporting Year	2019
Reporting Period (if other than calendar year)	mm/yyyy to mm/yyyy format

CARRIER
OFFICIAL
ADDRESS (SHOW
AS ON FILE IN
COMMISSION
RECORDS)

525 Columbia Avenue

Carrier e-mail
address

info@whitefishshuttle.com

Person Completing Report

Name	Kurt Schram
Phone Number	406.212.0080
E-mail Address	kurt@whitefishshuttle.com

Check One

YES
NO

X

**WERE REGULATED INTRASTATE MOVEMENTS
CONDUCTED 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

Name	Whitefish Trail Shuttle llc	
PSC #	9556	
Year	2019	
INTRASTATE REVENUES		
	Household Goods	
	Passengers	\$38,095
	Class C	
	Class D (Garbage)	
	TOTAL INTRASTATE REVENUE	\$38,095
INCOME STATEMENT		
	Operating Revenue	
	Intrastate Revenue	\$38,095
	Interstate Revenue	
	Non-Regulated Revenue	
	TOTAL REVENUE	\$38,095
	Operating Expenses	
	Salaries & Wages	
	Salaries—Officers & Supervisory Personnel	
	Clerical & Administrative	
	Drivers & Helpers	\$2,823
	Cargo Handlers	
	Vehicle Repair & Service	
	Other Labor	\$450
	Fringes	
	Payroll Taxes	\$266
	Workman's Compensation	\$1,060
	Pension & Welfare Expenses	
	Operating Supplies & Expenses	
	Fuel for Motor Vehicles	\$2,724
	Vehicle Parts	\$2,134
	Other Operating Supplies & Expenses	\$13,358
	Operating Taxes & Licenses	
	Gas, Fuel and Oil Taxes	
	Real Estate & Personal Property Taxes	
	Vehicle License & Registration Fees	\$146
	Other Taxes	\$1,952
	Depreciation & Amortization	
	Revenue Equipment	\$4,110
	Other	
	Purchased Transportation	
	With Driver	
	Without Driver	
	Other Purchased Transportation	
	Office/General	
	Insurance	\$17,014
	Communications & Utilities	\$4,600
	Building & Office Equipment Rents	
	General Supplies & Expenses	\$12,604
	Miscellaneous Expenses	\$3,696
	Gain on Disposition of Operating Assets	
	Loss on Disposition of Operating Asset (enter as positive number)	
	TOTAL EXPENSES	\$66,938
	NET INCOME OR (LOSS)	(\$28,843)

Name	Whitefish Trail Shuttle llc	
PSC #	9556	
Year	2019	
	BALANCE SHEET	
	(ASSETS)	
	<u>CURRENT ASSETS</u>	
	Cash & Working Funds	\$21,599
	Special Deposits	
	Temporary Cash Investments	
	Notes Receivable	
	Accounts Receivable	
	Prepayments	
	Materials & Supplies	
	Other Current Assets	
	TOTAL CURRENT ASSETS	<u>\$21,599</u>
	<u>TANGIBLE PROPERTY</u>	
	Carrier Operating Property	\$76,096
	Less: Reserve for Depreciation (enter positive numbers only)	\$4,110
	Carrier Operating Property Leased to Others	
	Less: Reserve for Depreciation (enter positive numbers only)	
	Non-Carrier Operating Property	
	Less: Reserve for Depreciation (enter positive numbers only)	
	TOTAL TANGIBLE PROPERTY	<u>\$71,986</u>
	<u>INTANGIBLE PROPERTY</u>	
	Organization, Franchises & Permits	
	Less: Reserve for Amortization (enter positive numbers only)	
	Other Intangible Property	
	Less: Reserve for Amortization (enter positive numbers only)	
	TOTAL INTANGIBLE PROPERTY	
	Other Accounts	
	Investment Securities and Advances	
	Special Funds	
	Deferred Debits	
	Total Other	
	TOTAL ASSETS	\$93,585

Name	Whitefish Trail Shuttle llc	
PSC #	9556	
Year	2019	
	BALANCE SHEET	
	(LIABILITIES)	
	<u>CURRENT LIABILITIES</u>	
	Notes Payable & Matured Long Term Obligations	
	Accounts Payable	
	Wages Payable	
	C.O.D.'s Unremitted	
	Taxes Accrued	
	Interest Accrued	
	Matured Interest	
	Other Current Liabilities	\$27,779
	TOTAL CURRENT LIABILITIES	\$27,779
	<u>LONG TERM DEBT DUE WITHIN ONE YEAR</u>	
	Equipment Obligations and other Debt	
	<u>LONG TERM DEBT DUE AFTER ONE YEAR</u>	
	Advances Payable	
	Equipment Obligations	\$25,134
	Less reacquired and nominally issued (enter positive number only)	
	Other Long Term Obligations	
	Less reacquired and nominally issued (enter positive number only)	
	TOTAL LONG TERM DEBT	\$25,134
	<u>Other</u>	
	Total Deferred Credits	
	Total Reserves	
	TOTAL OTHER	
	<u>SHAREHOLDERS' (OR PROPRIETORS') EQUITY</u>	
	Capital Stock	
	Proprietors' Capital	
	Retained Earnings	\$48,893
	TOTAL SHAREHOLDERS' (OR PROPRIETORS') EQUITY	\$48,893
	TOTAL LIABILITIES & SHAREHOLDERS'	
	<u>(OR PROPRIETORS') EQUITY</u>	\$101,805
	TOTAL ASSETS	\$93,585
	DO TOTAL ASSETS EQUAL TOTAL LIABILITIES & SHAREHOLDERS' (OR PROPRIETORS) EQUITY? IF NOT PLEASE REVIEW AND MAKE CORRECTIONS.	

Name	Whitefish Trail Shuttle llc		
PSC#	9556		
YEAR	2019		
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			

Class D Carrier

Customer listing

Name	Whitefish Trail Shuttle llc		
PSC#	9556		
Year			
MONTHLY CUSTOMER LISTING FOR CLASS D SERVICE			
Customer listing must include at least 20 customers per month during each month of the calendar year.			
	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			
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12			
13			
14			
15			
16			
17			
18			
19			

Class D Carrier

Customer listing

20			
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Class D Carrier

Customer listing

Name	Whitefish Trail Shuttle llc
PSC#	9556
YEAR	2019

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:

Name	Whitefish Trail Shuttle llc
PSC#	9556
YEAR	2019

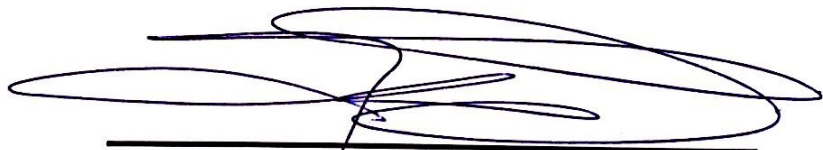
OATH

STATE OF Montana

SS.

County of Flathead

I, the undersigned representative 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 records 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.




 (Signature of owner/officer/authorized representative)

Owner

 (Title)

SUBSCRIBED AND SWORN to before me this 16th day of November 2020

(SEAL)



 Notary Public

In and for the State of _____

Residing at _____

My Commission Expires _____

