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)

<table>
<thead>
<tr>
<th>Carrier Name (EXACTLY AS SHOWN ON PSC AUTHORITY)</th>
<th>Craig J Mangis dba Malta Transfer</th>
</tr>
</thead>
</table>

| PSC Number | 1446 | See General Instruction # 5 |

**See General Instruction # 1**

<table>
<thead>
<tr>
<th>Reporting Year</th>
<th>2015</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Reporting Period (if other than calendar year)</th>
<th>mm/yyyy to mm/yyyy format</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>CARRIER ADDRESS</th>
<th>118 S 1st St West</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>Malta</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>State</th>
<th>MT</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Zip</th>
<th>59538</th>
</tr>
</thead>
</table>

**Check**

<table>
<thead>
<tr>
<th>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)?</th>
</tr>
</thead>
</table>

| YES | NO |

**Check**

<table>
<thead>
<tr>
<th>If the answer to the above question is NO do you want your official address changed to that shown above?</th>
</tr>
</thead>
</table>

| YES | NO |

**Carrier e-mail address**

| optional |

**Person Completing Report**

| Name | Mangis |

| Phone Number | 406-654-1720 |

| E-mail Address | optional |

**Check One**

| YES | NO |

<table>
<thead>
<tr>
<th>DID THE CARRIER TRANSPORT ANY REGULATED INTRASTATE PASSENGERS, HOUSEHOLD GOODS OR GARBAGE DURING THE FILING PERIOD?</th>
</tr>
</thead>
</table>

Montana Public Service Commission  
Transportation Division  
1701 Prospect Avenue / PO Box 202601  
Helena, MT 59620-2601
<table>
<thead>
<tr>
<th>Operating Revenue</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Intrastate Revenue</td>
<td></td>
</tr>
<tr>
<td>2. Interstate Revenue</td>
<td></td>
</tr>
<tr>
<td>3. Non-Regulated Revenue</td>
<td></td>
</tr>
<tr>
<td>4. TOTAL REVENUE</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Expenses</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>5. Salaries—Officers &amp; Supervisory Personnel</td>
<td></td>
</tr>
<tr>
<td>Salaries &amp; Wages</td>
<td></td>
</tr>
<tr>
<td>6. Clerical &amp; Administrative</td>
<td></td>
</tr>
<tr>
<td>7. Drivers &amp; Helpers</td>
<td></td>
</tr>
<tr>
<td>8. Cargo Handlers</td>
<td></td>
</tr>
<tr>
<td>9. Vehicle Repair &amp; Service</td>
<td></td>
</tr>
<tr>
<td>10. Other Labor</td>
<td></td>
</tr>
<tr>
<td>Other Fringes</td>
<td></td>
</tr>
<tr>
<td>11. Payroll Taxes</td>
<td></td>
</tr>
<tr>
<td>12. Workman’s Compensation</td>
<td></td>
</tr>
<tr>
<td>13. Pension &amp; Welfare Expenses</td>
<td></td>
</tr>
<tr>
<td>Operating Supplies &amp; Expenses</td>
<td></td>
</tr>
<tr>
<td>14. Fuel for Motor Vehicles</td>
<td></td>
</tr>
<tr>
<td>15. Vehicle Parts</td>
<td></td>
</tr>
<tr>
<td>16. Other Operating Supplies &amp; Expenses</td>
<td></td>
</tr>
<tr>
<td>17. General Supplies &amp; Expenses</td>
<td></td>
</tr>
<tr>
<td>Operating Taxes &amp; Licenses</td>
<td></td>
</tr>
<tr>
<td>18. Gas, Fuel and Oil Taxes</td>
<td></td>
</tr>
<tr>
<td>19. Real Estate &amp; Personal Property Taxes</td>
<td></td>
</tr>
<tr>
<td>20. Vehicle License &amp; Registration Fees</td>
<td></td>
</tr>
<tr>
<td>21. Other Taxes</td>
<td></td>
</tr>
<tr>
<td>Insurance</td>
<td></td>
</tr>
<tr>
<td>22. Communications &amp; Utilities</td>
<td></td>
</tr>
<tr>
<td>Depreciation &amp; Amortization</td>
<td></td>
</tr>
<tr>
<td>23. Revenue Equipment</td>
<td></td>
</tr>
<tr>
<td>24. Other</td>
<td></td>
</tr>
<tr>
<td>Purchased Transportation</td>
<td></td>
</tr>
<tr>
<td>25. With Driver</td>
<td></td>
</tr>
<tr>
<td>26. Without Driver</td>
<td></td>
</tr>
<tr>
<td>27. Other Purchased Transportation</td>
<td></td>
</tr>
<tr>
<td>Building &amp; Office Equipment Rents</td>
<td></td>
</tr>
<tr>
<td>28. Gain or Loss on Disposition of Operating Assets</td>
<td></td>
</tr>
<tr>
<td>29. Miscellaneous Expenses</td>
<td></td>
</tr>
<tr>
<td>30. Other</td>
<td></td>
</tr>
<tr>
<td>31. NO regulated moves during this period</td>
<td></td>
</tr>
<tr>
<td>32. NET INCOME OR LOSS</td>
<td></td>
</tr>
</tbody>
</table>
OATH

STATE OF Montana

County of Phillips

I, the undersigned Mary A. Mange 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.

(Signature of owner/officer/authorized representative)

[Signature]

VP/Sec.

>Title

SUBSCRIBED AND SWORN to before me this ______ day of ________, 20__. 

(SEAL)

Notary Public

In and for the State of

Residing at

My Commission Expires