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

Dotz Pianos

PSC Number

9233

See General Instruction # 5

See General Instruction # 1

Reporting Year

2015

Reporting Period (if other than calendar year)

mm/yyyy to mm/yyyy format

CARRIER ADDRESS

1012 W. Susie X

City MISSOULA State MT Zip 59801

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

optional

Person Completing Report

Name Rolie Dotz

Phone Number 406-544-2637

E-mail Address Dotz@Montana.net

optional

Check One

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

NO [ ] If NO See General instruction #3

Montana Public Service Commission
Transportation Division
1701 Prospect Avenue / PO Box 202601
Helena, MT 59620-2601
## SCHEDULE 1

### INCOME STATEMENT

#### Operating Revenue
1. Intrastate Revenue
2. Interstate Revenue
3. Non-Regulated Revenue
4. **TOTAL REVENUE**: 39,542.

#### Expenses
5. Salaries—Officers & Supervisory Personnel
6. Salaries & Wages
7. Clerical & Administrative
8. Drivers & Helpers
9. Cargo Handlers
10. Vehicle Repair & Service
11. Other Labor
12. Other Fringes
13. Payroll Taxes
14. Workman’s Compensation
15. Pension & Welfare Expenses
16. Operating Supplies & Expenses
17. Fuel for Motor Vehicles
18. Vehicle Parts
19. Other Operating Supplies & Expenses
20. General Supplies & Expenses
21. Operating Taxes & Licenses
22. Gas, Fuel and Oil Taxes
23. Real Estate & Personal Property Taxes
24. Vehicle License & Registration Fees
25. Other Taxes
26. Insurance
27. Communications & Utilities
28. Depreciation & Amortization
29. Revenue Equipment
30. Other
31. Purchased Transportation
32. With Driver
33. Without Driver
34. Other Purchased Transportation
35. Building & Office Equipment Rents
36. Gain or Loss on Disposition of Operating Assets
37. Miscellaneous Expenses
38. **TOTAL EXPENSES**: 32,413.

39. **NET INCOME OR LOSS**: 7,129.
<table>
<thead>
<tr>
<th>PSC #</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SCHEDULE 2**

**BALANCE SHEET**

**ASSETS**

**CURRENT ASSETS**

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. **TOTAL CURRENT ASSETS**

**TANGIBLE PROPERTY**

10. Carrier Operating Property
11. **Less:** Reserve for Depreciation
12. Carrier Operating Property Leased to Others
13. **Less:** Reserve for Depreciation
14. Non-Carrier Operating Property
15. **Less:** Reserve for Depreciation
16. **TOTAL TANGIBLE PROPERTY**

**INTANGIBLE PROPERTY**

17. Organization, Franchises & Permits
18. **Less:** Reserve for Amortization
19. Other Intangible Property
20. **Less:** Reserve for Amortization
21. **TOTAL INTANGIBLE PROPERTY**

22. Total Investment Securities and Advances
23. Total Special Funds
24. Total Deferred Debits
25. **TOTAL ASSETS**

6,400

48,400
<table>
<thead>
<tr>
<th></th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>26</td>
<td>Notes Payable &amp; Matured Long Term Obligations</td>
</tr>
<tr>
<td>27</td>
<td>Accounts Payable</td>
</tr>
<tr>
<td>28</td>
<td>Wages Payable</td>
</tr>
<tr>
<td>29</td>
<td>C.O.D.'s Unremitted</td>
</tr>
<tr>
<td>30</td>
<td>Taxes Accrued</td>
</tr>
<tr>
<td>31</td>
<td>Interest Accrued</td>
</tr>
<tr>
<td>32</td>
<td>Matured Interest</td>
</tr>
<tr>
<td>33</td>
<td>Other Current Liabilities</td>
</tr>
<tr>
<td>34</td>
<td><strong>TOTAL CURRENT LIABILITIES</strong></td>
</tr>
<tr>
<td>35</td>
<td>Equipment Obligations and other Debt</td>
</tr>
<tr>
<td>36</td>
<td>Advances Payable</td>
</tr>
<tr>
<td>37</td>
<td>Equipment Obligations</td>
</tr>
<tr>
<td>38</td>
<td>Less reacquired and nominally issued</td>
</tr>
<tr>
<td>39</td>
<td>Other Long Term Obligations</td>
</tr>
<tr>
<td>40</td>
<td>Less reacquired and nominally issued</td>
</tr>
<tr>
<td>41</td>
<td><strong>TOTAL LONG TERM DEBT</strong></td>
</tr>
<tr>
<td>42</td>
<td>Total Deferred Credits</td>
</tr>
<tr>
<td>43</td>
<td>Total Reserves</td>
</tr>
<tr>
<td>44</td>
<td>Total Capital Stock</td>
</tr>
<tr>
<td>45</td>
<td>Total Proprietors' Capital</td>
</tr>
<tr>
<td>46</td>
<td>Total Retained Earnings</td>
</tr>
<tr>
<td>47</td>
<td><strong>TOTAL SHAREHOLDERS’ (OR PROPRIETORS') EQUITY</strong></td>
</tr>
<tr>
<td>48</td>
<td><strong>TOTAL LIABILITIES &amp; SHAREHOLDERS’ (OR PROPRIETORS') EQUITY</strong></td>
</tr>
</tbody>
</table>

DO TOTAL ASSETS EQUAL TOTAL LIABILITIES & SHAREHOLDERS’ (OR PROPRIETORS) EQUITY? IF NOT PLEASE REVIEW AND MAKE CORRECTIONS.
SCHEDULE 3

INTRASTATE OPERATING REVENUE

Complete the following Schedule reflecting intrastate operating revenue.

<table>
<thead>
<tr>
<th>Household Goods</th>
<th>INTRASTATE REVENUE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Passengers</td>
<td></td>
</tr>
<tr>
<td>Class C</td>
<td></td>
</tr>
<tr>
<td>Class D (Garbage)</td>
<td></td>
</tr>
</tbody>
</table>

*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.*

<table>
<thead>
<tr>
<th>TOTAL INTRASTATE REVENUE</th>
</tr>
</thead>
</table>
| Note: Total Intrastate Revenue must equal the intrastate revenue amount shown on Line 1, Schedule 1, Income Statement.
OATH

STATE OF ______Montana______

SS.

County of ______Missoula______

I, the undersigned ______Rollie Dotz_______ 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)

_______/________/________ Dotz Piano______

(Title)

SUBSCRIBED AND SWORN to before me this ______29th____ day of ______August____, ______2016____.

(SEAL)

__________________________

Notary Public

In and for the State of

Residing at Missoula, MT