

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	Wolf-Transportation
(EXACTLY AS	World president
SHOWN ON	
PSC	
AUTHORITY)	
	9501
PSC Number	See General Instruction # 5
See Ger	neral Instruction # 1
Reporting Year	2016
	mm/yyyy to mm/yyyy format
	iod (if other than 1 - - to
Valence	an year)
CARRIER ADDRESS	103 Blar PAW CT
	City Victor State Mt. Zip 59875
'	
YES	Check Is the address shown above the carriers official address now on file at the PSC
NO.	(address at which you now receive monthly notice and other materials from the
NO	PSC)?
,	Check If the answer to the above question is NO do you want your official address
YES	changed to that shown above?
NO	
Carrier e-mail	optional
address	
i	Person Completing Report
Name	Annette WOIF
Name	406-642-3084
Phone Number	
E-mail Address	optional
·	The state of the s
veo	Check One
YES NO	
If NO See Gene	PASSENGERS, HOUSEHOLD GOODS OR GARBAGE DURING THE FILING PERIOD?
instruction #	1
	Montana Public Service Commission

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

PSC #	
	OATH
STATE OF Montana	
County of Ravalli	SS.
motor carrier; that I have carefully examined the same of the business and affairs of said motor carrier in res best of my knowledge, information and belief; and I f gross earnings or receipts herein set forth except those	of the motor carrier, above named, on my oath say of direction, from the original books, papers and record of said and declare the same to be a complete and correct statement spect to each and every matter and thing therein set forth, to the further say that no deductions were made before stating the e shown in the foregoing accounts; and that the accounts and of the financial operations of said motor carrier during the
	(Signature of owner/officer/authorized representative)
	(Signature of Owner/officer/authorized representative)
	(Title)
SUBSCRIBED AND SWORN to before me	e this <u>29th</u> day of <u>Moveh</u> , 2017.
(SEAL)	Bakara A-Cibsn
BARBARA A GIBSON	Notary Public
NOTARY PUBLIC for the State of Montana	In and for the State of Montana
* SEAL * Residing at Hamilton, Montana My Commission Expires	Rosiding at Hamilton MT
January 01, 2021	My Commission Expires <u> </u>

PSC#	950		
Year	1 2016	2	
	T	SCHEDULE 1	
		INCOME STATEMENT	
NT TO A STATE OF THE STATE OF T	Operating R	evenue	
l .		state Revenue	2700
2.		state Revenue	1085
3.		Regulated Revenue	1000
4.	TOTAL RE		3785
	Expenses		
5.		ies—Officers & Supervisory Personnel	
		ies & Wages	
6.	Saidi	Clerical & Administrative	
7.		Drivers & Helpers	
'	-	Cargo Handlers	
9.		Vehicle Repair & Service	
10.		Other Labor	
	Othe	r Fringes	
11.	- Guite	Payroll Taxes	
12.		Workman's Compensation	
13.		Pension & Welfare Expenses	
	Oper	ating Supplies & Expenses	
14.		Fuel for Motor Vehicles	347.88
15.		Vehicle Parts	10160-95
16.		Other Operating Supplies & Expenses	10160.95 275.75
17.		General Supplies & Expenses	388.53
	Oper	ating Taxes & Licenses	
18.		Gas, Fuel and Oil Taxes	
19.		Real Estate & Personal Property Taxes	
20.		Vehicle License & Registration Fees	
21.		Other Taxes	
22.	Insur		2335.
23.	Com	munications & Utilities	
24.	<u>Depr</u>	eciation & Amortization	
25.		Revenue Equipment	
26.		Other	
	Purc	nased Transportation	
27		With Driver	
28.		Without Driver	
29.		Other Purchased Transportation	
30.	Build	ling & Office Equipment Rents	
31.	Gain or Loss on Disposition of Operating Assets		
32.	Misc	ellaneous Expenses	
33.	TOTAL EX	PENSES	9528.11
2.4	NEW INCOM	WE OD LOCC	P-72/2 11
34.	INCOM	ME OR LOSS	1 5/Y ³ ·11

PSC#	9501		
Year	2016		
		SCHEDULE 2	
		BALANCE SHEET	
		(ASSETS)	
		· (MODELO)	
	CURRENT AS	SETS	
1.		Working Funds	0
2.	Special Deposits		0
3.			0
4.	Notes Receivable		9
5.	Accoun	ts Receivable	
6.	Prepayr		0
7.	Materials & Supplies		0
7. 8.		Current Assets	0
9.		TOTAL CURRENT ASSET	s O
	<u> FANGIBLE PI</u>		
10.	Carrier	Carrier Operating Property 17,000.	
11.		Less: Reserve for Depreciation	12 000.
12.	Carrier	Operating Property Leased to Others	<u> </u>
13.		Less: Reserve for Depreciation	0
14.	Non-Carrier Operating Property		
15.		Less: Reserve for Depreciation	0
16.		TOTAL TANGIBLE PROPERT	Y 5,000
	NTANGIBLE		
17.	Organiz	zation, Franchises & Permits	\bigcirc
18.	O.J. T	Less: Reserve for Amortization	10
19.	Other I	ntangible Property	18-
20.		Less: Reserve for Amortization	V
21.		TOTAL INTANGIBLE PROPERT	Y C
22.	Total Ir	vestment Securities and Advances	10
23.	Total S	pecial Funds	10
24.		eferred Debits	0
			0
25.	TOTAL ASSE	<u>rs</u>	5,000

)

PSC#	99	501		
Year	2016			
	ergeneren en e	¥	SCHEDULE 2	
		***	BALANCE SHEET	
	1	Γ	(LIABILITIES)	
	CURR		BILITIES	
26			vable & Matured Long Term Obligations	
27		Accounts		9
26 27 28 29 30 31	Wages Payable C			<u> </u>
29	C.O.D.'s Unremitted			6
21	-	Interest A		
22		Matured I		
32 33			rent Liabilities	G
34		Other Cur	TOTAL CURRENT LIABILITIES	<u> </u>
3+			TOTAL CURRENT LIABILITIES	
	LONG	TEDATE	NEDT BUE WITHIN ONE VEAD	
35	LONG		DEBT DUE WITHIN ONE YEAR at Obligations and other Debt	
33		Equipmen	li Congations and other Deot	5,000
	LONG	TTTDAKE	DEBT DUE AFTER ONE YEAR	
26	LONG	Advances		
36 37			rayable nt Obligations	
38		Equipmen	Less reacquired and nominally issued	\mathcal{E}
39		Other Lor	ng Term Obligations	
40		Ouici Loi	Less reacquired and nominally issued	
41			TOTAL LONG TERM DEBT	
T 1	<u> </u>		TOTAL LONG TERM DEDI	
42		Total Defe	erred Credits	4
42 43		Total Res		()
	SHAR	, ,	CRS' (OR PROPRIETORS') EQUITY	
44.		Total Cap		9
45			orietors' Capital	<u> </u>
46		Total Reta	nined Earnings	\mathcal{C}
47			TOTAL SHAREHOLDERS' (OR PROPRIETORS') EQUITY	<u>C</u>
-				0
48	TOTA	L LIABII	LITIES & SHAREHOLDERS' (OR PROPRIETORS') EQUITY	5,000
and the second second second second	ļ			
	DO T	OTAL AC	CETC FOULAT TOTAL LIABILITIES & CHARELIOLDERS (OR	
	ו טע ו		SETS EQUAL TOTAL LIABILITIES & SHAREHOLDERS' (OR	
		PKOPKII	ETORS) EQUITY? IF NOT PLEASE REVIEW AND MAKE	
			CORRECTIONS	

PSC #	950
Year	2016
PETPER	
	SCHEDULE 3
	William Control of the Control of th
	INTRASTATE OPERATING REVENUE
Complete the followi	ng Schedule reflecting intrastate operating revenue.
Complete the follows	ng benedule refrecting intrastate operating revenue.
	INTRASTATE REVENUE
77 1 11 6 1	INTRASTATE REVENUE
Household Goods	
Passengers	A CONTRACTOR OF THE PROPERTY O
I absorgers	\mathcal{C}
Class C	Â
Class D (Garbage)	6
Class D carriers NO	T 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	s each month, go to Schedule 5.
TOTAL	
INTRASTATE	
REVENUE	
REVENUE	
	Note: Total Intrastate Revenue must equal the intrastate revenue amount
	shown on Line 1, Schedule 1, Income Statement.