## 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	Jasna Pantic DBA Montana	Yellow Cab						
AUTHORITY)			2-					
PSC Number	MT3			Se	e General In	struction # 5	5	
See General Instruction # 1								
Reporting Year	2017							
	od (if other than lar year)	1	mm/yyyy	to mm/yyyy to	format /		The state of the s	
CARRIER ADDRESS	5180 Jackrab	bit Lane		2				
	City Belgrade		State	MT	Zi	59714		
YES NO	(address	ldress shown al s at which you n						
YES NO		inswer to the ab			do you wa own above		cial addr	ess
Carrier e-mail address					optional			
Nama		erson Completing R						
Name			>>					
Phone Number 406-388-1478 optional								
E-mail Address tax@theisentax.com								
	Check One		3 %					
YES NO If NO See Gen instruction	eral PA	D THE CARRIEF ASSENGERS, HO IE FILING PERIO	OUSEHOL					

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

SC#	2017		
<u> </u>	avi	SCHEDULE 1	
- 1		INCOME STATEMENT	
		INCOME STATEMENT	
	Operating R	evenue	
.		state Revenue	90,482
	Inters	state Revenue	
	Non-	Regulated Revenue	
	TOTAL RE		90,482
	Expenses		
		ries—Officers & Supervisory Personnel	
		ries & Wages	
		Clerical & Administrative	
		Drivers & Helpers	
:		Cargo Handlers	
		Vehicle Repair & Service	The state of the s
0.		Other Labor	
0.	Othe	r Fringes	
1.	Othe	Payroll Taxes	
2.		Workman's Compensation	
3.		Pension & Welfare Expenses	
J.	Oper	rating Supplies & Expenses	
4.	Орег	Fuel for Motor Vehicles	10,080
5.		Vehicle Parts	1,817
6.		Other Operating Supplies & Expenses	987
7.		General Supplies & Expenses	
7.	One	rating Taxes & Licenses	
18.	Орс	Gas, Fuel and Oil Taxes	
9.		Real Estate & Personal Property Taxes	
20.		Vehicle License & Registration Fees	
21.		Other Taxes Business License	50
2.	Incu	rance	6,664
23.		nmunications & Utilities	1,540
24.		reciation & Amortization	
25.	БСР	Revenue Equipment	2,300
26.		Other	
	Purc	hased Transportation	
27.	1 die	With Driver	
28.		Without Driver	
29.		Other Purchased Transportation	
30.	Buil	ding & Office Equipment Rents	3,500
31.		or Loss on Disposition of Operating Assets	
32.		cellaneous Expenses Airport Fees	1,686
33.	TOTAL EX	PENSES	28,624
34.	NET INCO	ME OR LOSS	61,858

PSC#	MT	3			
'ear	20	17			
		SCHEDULE 2			
		BALANCE SHEET			
		(ASSETS)			
	CURR	ENT ASSETS			
		Cash & Working Funds			
2.		Special Deposits			
3.		Temporary Cash Investments			
1.		Notes Receivable			
5.		Accounts Receivable			
5.		Prepayments			
7.		Materials & Supplies			
8.	Other Current Assets				
9.		TOTAL CURRENT ASSI	ETS		
	TANG				
10.		Carrier Operating Property	11,500		
11.		Less: Reserve for Depreciation	2,300		
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 PROPER	<b>RTY</b> 9,200		
	INTEL	NCIDI E PROPERTY			
17.	INTA	NGIBLE PROPERTY Organization, Franchises & Permits			
18.		Less: Reserve for Amortization			
19.		Other Intangible Property			
20.		Less: Reserve for Amortization			
21.		TOTAL INTANGIBLE PROPER	RTY		
22.		Total Investment Securities and Advances			
23.		Total Special Funds			
24.					
25.	ТОТА	L ASSETS	71,058		

PSC#	MT3				
Year	3017				
	SCHEDULE 2				
	BALANCE SHEET				
	(LIABILITIES)				
	CURRENT LIABILITIES				
26	Notes Payable & Matured Long Term Obligations				
27	Accounts Payable				
28	Wages Payable				
29	C.O.D.'s Unremitted				
30	Taxes Accrued				
31	Interest Accrued				
32	Matured Interest				
33	Other Current Liabilities				
34	TOTAL CURRENT L	IABILITIES 0			
		MADE AND COLORS THE RESPONSE OF THE PROPERTY AND			
	LONG TERM DEBT DUE WITHIN ONE YEAR				
35	Equipment Obligations and other Debt	0			
	LONG TERM DEBT DUE AFTER ONE YEAR				
36	Advances Payable				
37	Equipment Obligations				
38	Less reacquired and nominally issued				
39	Other Long Term Obligations				
40	Less reacquired and nominally issued				
41	TOTAL LONG T	ERM DEBT			
42	Total Deferred Credits				
43	Total Reserves				
	SHAREHOLDERS' (OR PROPRIETORS') EQUITY				
44.	Total Capital Stock	20,000			
45	Total Proprietors' Capital				
46	Total Retained Earnings	51,058			
47	TOTAL SHAREHOLDERS' (OR PROPRIETOR	<b>RS') EQUITY</b> 71,058			
48	TOTAL LIABILITIES & SHAREHOLDERS' (OR PROPRIETORS	S') EQUITY 71,058			
	DO TOTAL ASSETS <b>EQUAL</b> TOTAL LIABILITIES & SHAREHO PROPRIETORS) EQUITY? IF NOT PLEASE REVIEW AND N CORRECTIONS				
	PROPRIETORS) EQUITY? IF NOT PLEASE REVIEW AND M				

PSC #	MT3
Year	2017
(F. Na national symbol to be	
	SCHEDULE 3
	INTRASTATE OPERATING REVENUE
Complete the followi	ng Schedule reflecting intrastate operating revenue.
	INTRASTATE REVENUE
Household Goods	
Passengers	90,482
Class C	
Class D (Garbage)	
	t generating \$5,000 gross revenue From Class D transportation or serving es each month, go to Schedule 5.
90,482	Note: Total Intrastate Revenue must equal the intrastate revenue amount shown on Line 1, Schedule 1, Income Statement.

Schedule 5 (Verified Statement)

PSC # H13 Year A017  OATH  STATE OF Montana
SS.
County of Gallatin
I, the undersigned Jasa Partic about 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 thee 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)  (Title)
(Title)
SUBSCRIBED AND SWORN to before me this 30 day of July, 20/8.
(SEAL)  Motary Public

JOICANNE LIKNESS
NOTAPY PUBLIC for the
State of Montana
Residing at Beigrade, MT
My Commission Expires
January 17, 2020

My Commission Expires 1-17-2020