

FEB 01 2021

## Montana Public Service Commission Motor Carrier Annual Report

MONT. P.S. COMMISSION

## 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)

ALL LA	INES N	10VIN	g & ST	DRAGE	= INC.	
1790			See G	eneral Inst	ruction # 5	
eral Instruction #	1					
2020						
		mm/yyyy to	mm/yyyy for	mat /		
P.O. BO	1956					
City MISS	OULA	State	MT	Zip	59806	,
(address	at which you r	now receive	monthly no PSC)? on is NO do	tice and o	ther materials	from the
Layne@al	llanesmo		* 1 A	4		
		Report				
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Check One						
X DID PAS	SENGERS, H	OUSEHOLD	#KRR - (MING) #6 - 545600			
3			C	Name:		
	eral Instruction # 2020  od (if other than lar year)  P. D. Boy  City MISS  Check Is the add (address at the and lar year)  Layne @ all  Pers  Layne @ all  Check One  X DID  PAS  PAS  THE	eral Instruction #1  2020  od (if other than lar year)  P.O. BOX 1956  City MISSOULA  Check Is the address shown a (address at which you recompleting For Layne @allanesmallan	eral Instruction # 1  2020  od (if other than lar year)  P.O. BOX 1956  City MISSOULA State  Check Is the address shown above the ca (address at which you now receive changed to changed to changed to changed to changed to changed to change Kaldor  Layne @alllanesmoving.co  Person Completing Report  Layne @alllanesmoving.co  Person Completing Report  Layne @alllanesmoving.co  Check One  X DID THE CARRIER TRANSPO  PASSENGERS, HOUSEHOLD  THE FILING PERIOD?	eral Instruction #1  2020  od (if other than lar year)  D. D. Box 1956  City MISSOULA State MT  Check Is the address shown above the carriers official (address at which you now receive monthly no PSC)?  Check If the answer to the above question is NO do changed to that shown  Layne @alllanesmoving.com  Person Completing Report  Layne Kaldor  406.351.7198  Layne @alllanesmoving.com  Option  Check One  X DID THE CARRIER TRANSPORT ANY RE PASSENGERS, HOUSEHOLD GOODS OF THE FILING PERIOD?	eral Instruction #1  2020  od (if other than lar year)  D.O. BOX 1956  City MISSOULA State MT Zip  Check Is the address shown above the carriers official address (address at which you now receive monthly notice and o PSC)?  Check If the answer to the above question is NO do you want changed to that shown above?  Layne @alllanesmoving.com  Person Completing Report  Layne Waldor  406.351.7198  Layne @alllanesmoving.com  Optional  Person Completing Report  Layne @alllanesmoving.com  Optional  Optional  Check One  X DID THE CARRIER TRANSPORT ANY REGULATED PASSENGERS, HOUSEHOLD GOODS OR GARBACETAIL THE FILING PERIOD?	eral Instruction #1  2020  mm/yyyy to mm/yyyy format  od (if other than ar year)  P.O. BOX 1956  City MISSOULA State MT Zip 59806  Check State MT Zip 59806  Check Is the address shown above the carriers official address now on file at (address at which you now receive monthly notice and other materials PSC)?  Check If the answer to the above question is NO do you want your official a changed to that shown above?  Layne @alllanesmoving.com  Person Completing Report  Layne Kaldor  Hol. 351-7198  Layne @alllanesmoving.com  Optional  Check One  X DID THE CARRIER TRANSPORT ANY REGULATED INTRASTATE PASSENGERS, HOUSEHOLD GOODS OR GARBAGE DURING THE FILING PERIOD?

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

Year	2020		
		SCHEDULE 1	
		INCOME STATEMENT	
	Operating Re	venue	
1.		ate Revenue	44558
2.		ate Revenue	203135
3.		egulated Revenue	255538
	TOTAL REV		503231
	Expenses		
5.		s—Officers & Supervisory Personnel	48000
	Salarie	es & Wages	
6.		Clerical & Administrative	34000 145864
7.		Drivers & Helpers	145864
8.		Cargo Handlers	23386
9.		Vehicle Repair & Service	48718
10.		Other Labor	
	Other	<u>Fringes</u>	
11.		Payroll Taxes	20874
12.		Workman's Compensation	a5385
13.		Pension & Welfare Expenses	
	Operat	ing Supplies & Expenses	
14.		Fuel for Motor Vehicles	50712
15.		Vehicle Parts	9087
16.		Other Operating Supplies & Expenses	37375
17.		General Supplies & Expenses	4993
	Operat	ing Taxes & Licenses	
18.		Gas, Fuel and Oil Taxes	5189
19.		Real Estate & Personal Property Taxes	
20.		Vehicle License & Registration Fees	859
21.		Other Taxes	
22.	Insura		29967 6510
23.		unications & Utilities	6510
24.	Depres	ciation & Amortization	
25.		Revenue Equipment	
26.		Other	
	Purcha	sed Transportation	
27.		With Driver	
28.		Without Driver	2079
29.		Other Purchased Transportation	
30.	Building & Office Equipment Rents		26474
31.	Gain or Loss on Disposition of Operating Assets		
32.		laneous Expenses	
33.	TOTAL EXP	ENSES	521472
		Ì	20.110
34.	NET INCOM	E OR LOSS	(18241)

PSC#	1790		
Year	2020		
		SCHEDULE 2	
		BALANCE SHEET	
		(ASSETS)	
	CURRENT AS	SSETS	
1.		Working Funds	6083
2.		Deposits	
3.		rary Cash Investments	
4.		Receivable	
5.		nts Receivable	
6.	Prepay	ments	
7.	The state of the s	als & Supplies	
8.		Current Assets	
9.		TOTAL CURRENT ASSETS	6083
	TANGIBLE P	ROPERTY	
10.		Operating Property	53991
11.		Less: Reserve for Depreciation	
12.	Carrier	Carrier Operating Property Leased to Others	
13.		Less: Reserve for Depreciation	
14.	Non-C	Non-Carrier Operating Property	
15.		Less: Reserve for Depreciation	
16.		TOTAL TANGIBLE PROPERTY	
			VERNI SPRING TEXADOLUSTO SESSIONI
		ANGIBLE PROPERTY	
17.	Organi	Organization, Franchises & Permits	
18.		Less: Reserve for Amortization	
19.	Other I	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 ASSE	TTS	60074

179D 2020				
	SCHEDULE 2			
	BALANCE SHEET			
	(LIABILITIES)			
CURRENT LIA	BILITIES			
Accounts I	Accounts Payable			
Wages Pay	Wages Payable			
C.O.D.'s U	C.O.D.'s Unremitted			
Taxes Acc	rued			
Interest Ac	erued			
[1] [200.0000.eduel.ed00.0e0000.000.000.cd0]	MAGING RID DAY			
Other Curr	ent Liabilities			
	TOTAL CURRENT LIABILITIES	53809		
Equipment	Obligations and other Debt			
	Advances Payable			
	Less reacquired and nominally issued			
	Other Long Term Obligations			
	Less reacquired and nominally issued			
	TOTAL LONG TERM DEBT	17754		
Total Rese	Total Reserves			
1 otal Keta	med Earnings TOTAL SHAREHOLDERS' (OR PROPRIETORS') EQUITY	(11489)		
TOTAL LIABII		60074		
TOTAL LIABIL	THES & SHAKEHOLDERS (OR PROPRIETORS) EQUITY	600 19		
	The process of the Control of the Co			
	)(프랑마, GD, CE) - H. 프랑마, CE (HECK) - H. CE (HECK)			
	Notes Paya Accounts I Wages Pay C.O.D.'s U Taxes Acc Interest Ac Matured Ir Other Curr  LONG TERM D Equipment Advances Equipment Other Long Total Defe Total Rese SHAREHOLDE Total Capi Total Prop Total Reta	CURRENT LIABILITIES  Notes Payable & Matured Long Term Obligations Accounts Payable Wages Payable C.O.D.'s Unremitted Taxes Accrued Interest Accrued Matured Interest Other Current Liabilities  TOTAL CURRENT LIABILITIES  LONG TERM DEBT DUE WITHIN ONE YEAR Equipment Obligations and other Debt  LONG TERM DEBT DUE AFTER ONE YEAR Advances Payable Equipment Obligations Less reacquired and nominally issued Other Long Term Obligations Less reacquired and nominally issued TOTAL LONG TERM DEBT Total Deferred Credits Total Reserves  SHAREHOLDERS' (OR PROPRIETORS') EQUITY Total Capital Stock Total Proprietors' Capital Total Retained Earnings TOTAL SHAREHOLDERS' (OR PROPRIETORS') EQUITY  TOTAL LIABILITIES & SHAREHOLDERS' (OR PROPRIETORS') EQUITY		

Year	1790
Tear	
F1	
	SCHEDULE 3
	INTRASTATE OPERATING REVENUE
Complete the following	ing Schedule reflecting intrastate operating revenue.
complete the following	
	INTRASTATE REVENUE
Household Goods	44558
Passengers	
Class C	
Class D (Garbage)	
	generating \$5,000 gross revenue From Class D transportation or serving s each month, go to Schedule 5.
INTRACTATE	111.1.2.2.0
INTRASTATE REVENUE	44558
	44558  Note: Total Intrastate Revenue must equal the intrastate revenue amount shown on Line 1, Schedule 1, Income Statement.
	Note: Total Intrastate Revenue must equal the intrastate revenue amount
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PSC#	1790
Year <u>a</u>	020

OATH STATE OF Montana SS. County of Missoula

I, the undersigned Layne Kaldor 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.

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_\_ day of \_\_\_\_\_\_\_, 20 ZI

(SEAL)

KIMBERLY L DUNCAN NOTARY PUBLIC for the State of Montana Residing at Stevensville, Montana My Commission Expires April 26, 2022

In and for the State of

My Commission Expires