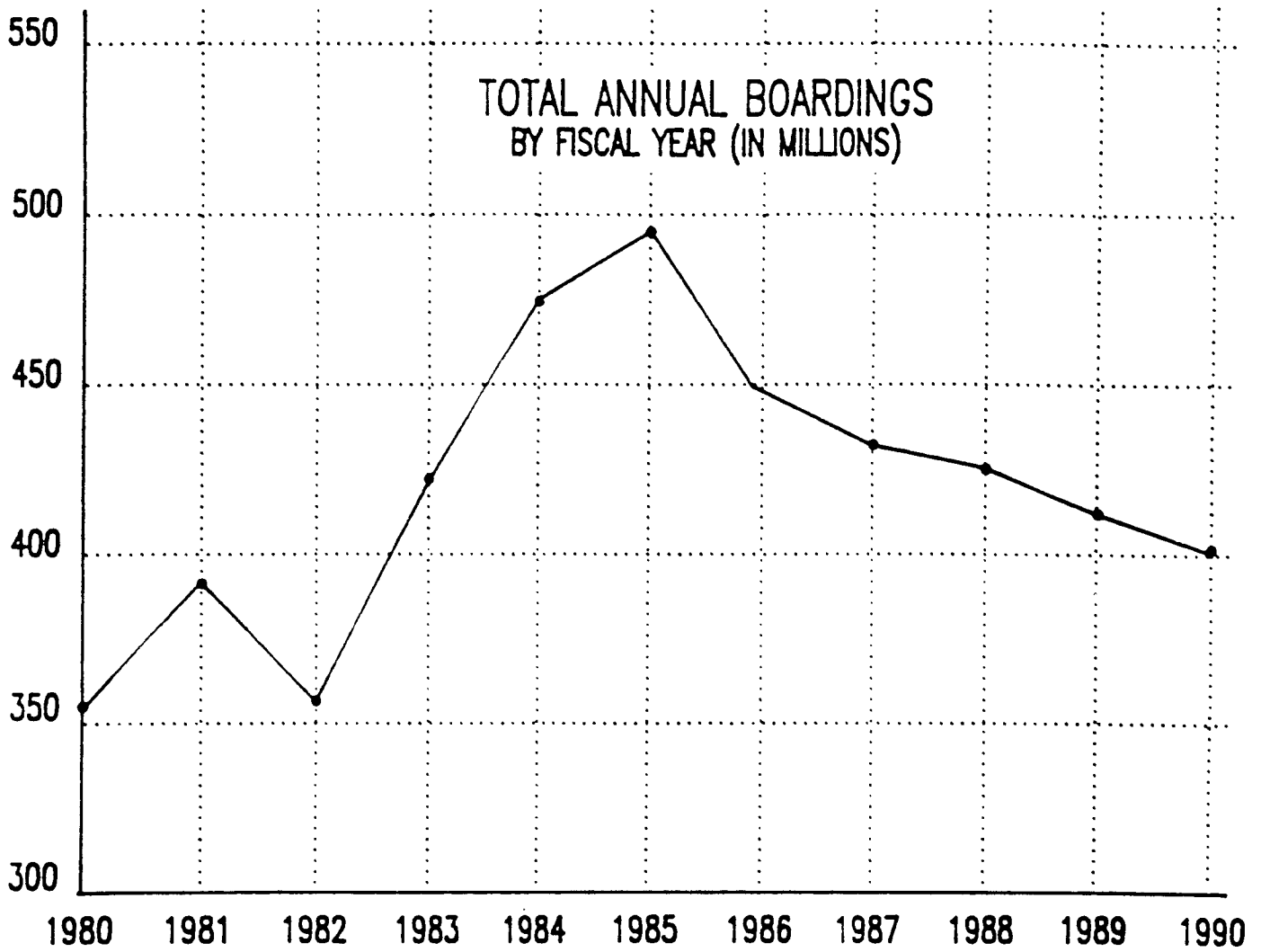


SECTION 15 SUBMITTAL

FISCAL YEAR 1990



1980-1990



Alan F. Pegg
General Manager

NOV 09 1990

Urban Mass Transportation Administration
Office of Capital and Formula Assistance
Audit Review and Analysis Division
P.O. Box 61126
Washington, D.C. 20039-1126

Section 15 Report

Gentlemen:

In compliance with your requirements, we are submitting our Section 15 Report for Fiscal Year 1990. The Metropolitan Planning Organization (MPO) Statement, the Chief Executive Office (CEO) Certification and the auditors' Section 9 Certification are included. A statement of validity for the sampling procedures utilized was included in the Fiscal Year 1988 Section 15 Report and a copy of that statement is also transmitted herewith.

If you need additional information, please contact Tom Rubin, Controller-Treasurer, at (213) 972-6830.

Sincerely,

A handwritten signature in black ink, appearing to read "Alan F. Pegg", is written over a printed name. The signature is fluid and cursive, with a large, sweeping flourish at the end.

Alan F. Pegg

Attachments

cc: Neil Peterson, LACTC



Alan F. Pegg
General Manager

NOV 09 1990

Urban Mass Transportation Administration
Office of Capital and Formula Assistance
Audit Review and Analysis Division
P.O. Box 61126
Washington, D.C. 20039-1126

Dear Sirs:

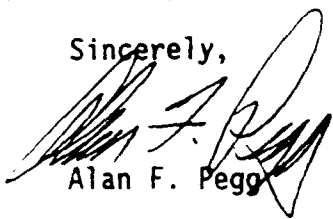
I hereby certify to the following concerning the financial and non-financial/operating data submitted in the Southern California Rapid Transit District Section 15 Report for its fiscal year ending June 30, 1990:

1. The financial and non-financial/operating data (1) are accurate and truthful records of the financial transactions and operations of the Southern California Rapid Transit District and (2) conform in all material respects with the accounting and definitional requirements of the Urban Mass Transportation Administration's (UMTA) Uniform System of Accounts and Records and Reporting System.
2. The verifications below pertain to each data item to be used in the Section 9 formula allocation. (These data include fixed guideway directional route miles, vehicle revenue miles, passenger miles, and operating costs.) I verify:
 - a. that a system is in place for recording data in accordance with UMTA definitions; that the correct data are being measured (e.g., vehicle revenue miles as opposed to total vehicle miles) and that no systematic errors exist (i.e., all data are recorded);
 - b. that a system is in place to record data on a continuing basis and that data gathering is an on-going effort;
 - c. that source documents are available to support the reported data and are maintained for a minimum of three years and that data are fully documented and securely stored;
 - d. that a system of internal controls is in place to assure the accuracy of the data collection process and recording system and that reported documents are not altered and that documents are reviewed and signed by a supervisor, as required;
 - e. that the data collection methods are those suggested by UMTA or equivalent: that UMTA standards for precision and accuracy have been

satisfied in that the sampling technique has either been approved by UMTA or, in advance of the UMTA approval, by a statistical expert serving the agency and confirmation that the collection methods documented are being followed; and

- f. that the data are accurate; and that document of an analytic review of the reported data confirms that data are consistent with prior reporting periods and other facts known about agency operations.
3. The accounting system from which this Section 15 Report is derived follows the accounting system prescribed by the Section 15 Uniform System of Accounts and Records. The Southern California Rapid Transit District has adopted the Uniform System of Accounts and Records and has previously submitted a Section 15 Report for its fiscal year ending July 1, 1989, which was compiled using the Uniform System of Accounts and Records and which contained an independent auditor's Section 15 financial data certification signed by Coopers and Lybrand and dated October 13, 1989.

Sincerely,



Alan F. Pegg

SCAG

SOUTHERN CALIFORNIA
ASSOCIATION OF GOVERNMENTS

318 West Seventh Street, 12th Floor • Los Angeles, California 90017-3435 • (213) 236-1800 • FAX (213) 236-1825

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and Communications

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and Environment

Robert Wagner, Vice Mayor
Lakewood, Chair, Community,
Economic, and Human Development

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Monrovia

Vicky Howard, Councilmember
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Ruthelyn Plummer, Mayor
Newport Beach

ALTERNATES

Imperial County • **Jeanie Vogel, Supervisor** • Los Angeles County • **Ed Edelman, Supervisor** and **Pete Schabarum, Supervisor** • Orange County • **Gaddi Vasquez, Supervisor** • Riverside County • (Vacant) • San Bernardino County • **Larry Walker, Supervisor** • Ventura County • **James Dougherty, Supervisor** • Cities of Imperial County • **Victor Sanchez, Jr., Mayor**, Westmorland • Cities of Los Angeles County • **John Crowley, City Director**, Pasadena • Cities of Orange County • **John Kanel, Mayor**, Cypress • Cities of Riverside County • **Richard Deininger, Jr., Councilmember**, Corona • Cities of San Bernardino County • **Larry Rhinehart, Mayor**, Montclair • Cities of Ventura County • **Vicky Howard, Councilmember**, Simi Valley • Cities of Los Angeles County • **Richard Alatorre, Councilmember** • **Jos Picus, Councilmember** • **Michael Woo, Councilmember** • Long Beach 2nd position • **Jeffrey Kellogg, Councilmember** • At Large • **Judy Wright, Councilmember**, Claremont • **Judy Nieburger, Councilmember**, Moreno Valley • **John Erskine, Councilmember**, Huntington Beach

August 7, 1990

Mr. Alan F. Pegg
General Manager
Southern California Rapid Transit District
425 South Main Street
Los Angeles, CA 90013

Dear Mr. Pegg:

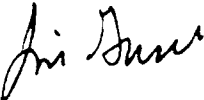
As required by the new Section 15 reporting requirements (Federal Register, September 15, 1987), the Southern California Association of Governments (SCAG), serving as the Metropolitan Planning Organization, is hereby providing for you the following information. For the Southern California Rapid Transit District the operational service area square miles and population within the Los Angeles/Long Beach and Riverside/San Bernardino Urbanized Area is as follows:

Operational Service Area Square Miles -	1433.18
Operational Service Area Population -	7,124,679

These figures were developed utilizing SCAG's Geographic Information System and the operator's transit system maps. Service areas were digitized around non express bus lines using street and/or census tract boundaries as guidelines via SCAG's Geographic Information Systems. By definition, any tract containing transit routes except express service, was included where the route was contiguous.

Please contact Rosemary Ayala if further information is required.

Sincerely,



JAMES R. GOSNELL, Director
Transportation Planning

July 11, 1988

Mr. Ronald J. Fisher
Director, Information Services Staff
Office of Technical Assistance
Section 15, URT-7
400 7th Street, SW
Room 6419
Washington, D.C. 20590

Dear Mr. Fisher:

Multisystems, together with Northeastern University, has reviewed the sampling program and estimation procedures used by the Southern California Rapid Transit District for estimating unlinked passenger trips and passenger-miles, and has found them to yield unbiased estimates whose accuracy exceeds UMTA's accuracy standard of $\pm 10\%$ precision at a 95% confidence level; in fact, the sample size is so large that, combined with the revenue-based estimation used, the precision at the 95% confidence level is below 2%.

Should you desire further documentation of our findings, please consult the Final Report under Contract #4688 prepared by us for SCRTD, in which the precision level is calculated (see Table 5) to be 1.7%.

Sincerely,



Peter G. Furth
Associate Professor of Civil Engineering
Northeastern University

TRANSIT SYSTEM IDENTIFICATION SCHEDULE

Transit ID

9 | 0 | 2 | 1

Fiscal Year End

0 | 6

3 | 0

9 | 0

Month

Day

Year

1. Transit system name: SOUTHERN CALIFORNIA RAPID TRANSIT DISTRICT

2. Transit system address:

Street address 425 SOUTH MAIN STREET

City LOS ANGELES

State CA Zip Code 90013

3. Person to be contacted regarding this report:

RUBIN

TOM

Last Name

First Name and Initial(s)

Title CONTROLLER - TREASURER

Telephone (213) 972-6830

area code

number

extension

Street address 425 SOUTH MAIN STREET

City LOS ANGELES

State CA Zip Code 90013

4. Reporting Level:

R - Required Level

A - A Level (Voluntary)

B - B Level (Voluntary)

C - C Level (Voluntary)

5. Type of organization: (Check one only)

A. Public agency or authority which directly operates all transit service (not a State DOT)

B. Public agency or authority which contracts for some or all transit service (not a State DOT) (Forms 002 and 004 required)

C. State Department of Transportation

D. Private carrier under contract to one or more public agencies

E. Private carrier not under contract to a public agency

F. Other (describe on Form 005)

Date Prepared 10/15/90

Date Updated _____

CONTRACTUAL RELATIONSHIP IDENTIFICATION SCHEDULE

(Use as many pages as necessary)

Transit ID 9 0 2 1

Level R

Fiscal Year End 0 6 3 0 9 0
Month Day Year

Mode(s) MB

1. Name of contractor*: County of Los Angeles/Los Angeles Philharmonic Assn.
2. Address 900 South Fremont Avenue
 City Alhambra
 State California Zip Code 91803
3. Name of contact person: Mr. Greg Kelley
 Title Supervising Civil Engineer III - Transit Manager
 Telephone (818) 458-3968
area code number extension

4. Agency in Item 1 is:

- A. Public agency contracting for transit service
- B. Other public agency providing transit service under contract
- C. Private carrier providing transit service under contract
- D. Private carrier contracting for transit service
- E. Other (describe on Form 005)

5. Nature of contractual relationship (check all boxes that apply):

- A. Cash reimbursement of some or all of contract carrier's operating deficit
- B. Cash payment to contract carrier for specific mass transportation services
- C. Cash reimbursement to contract carrier for reduced fare programs
- D. Vehicles given, loaned, or leased for below market value to contract carrier
- E. Other. Explain monetary consideration received and obligations incurred by contract carrier on Form 005

6. Number of vehicles operated in maximum service under contract by mode: 70

7. Contract amount by mode: \$ 433,902 \$ _____ \$ _____

8. Revenues retained by mode: yes no
 If yes, actual amount on annual basis \$ 316,076 \$ _____ \$ _____

* If report is by or for contractor operating 50 or more vehicles, this should be the name of the public agency contracting for service.

Date Prepared October 16, 1990 Date Updated _____

CONTRACTUAL RELATIONSHIP IDENTIFICATION SCHEDULE

(Use as many pages as necessary)

Transit ID 9 0 2 1

Level R

Fiscal Year End 0 6 3 0 9 0
Month Day Year

Mode(s) _____

1. Name of contractor*: Omnitrans
2. Address 1700 West Fifth Street
 City San Bernadino
 State California Zip Code 92411
3. Name of contact person: Mr. Robert E. Chafin
 Title General Manager
 Telephone (714) 684-0850
area code number extension

4. Agency in Item 1 is:

- A. Public agency contracting for transit service
- B. Other public agency providing transit service under contract
- C. Private carrier providing transit service under contract
- D. Private carrier contracting for transit service
- E. Other (describe on Form 005)

5. Nature of contractual relationship (check all boxes that apply):

- A. Cash reimbursement of some or all of contract carrier's operating deficit
- B. Cash payment to contract carrier for specific mass transportation services
- C. Cash reimbursement to contract carrier for reduced fare programs
- D. Vehicles given, loaned, or leased for below market value to contract carrier
- E. Other. Explain monetary consideration received and obligations incurred by contract carrier on Form 005

6. Number of vehicles operated in maximum service under contract by mode: _____ 42

7. Contract amount by mode: \$ 1,336,058 \$ _____ \$ _____

8. Revenues retained by mode: yes no
 If yes, actual amount on annual basis \$ 913,254 \$ _____ \$ _____

*If report is by or for contractor operating 50 or more vehicles, this should be the name of the public agency contracting for service.

Date Prepared October 16, 1990 Date Updated _____

CONTRACTUAL RELATIONSHIP IDENTIFICATION SCHEDULE

(Use as many pages as necessary)

Transit ID 9 0 2 1

Level R

Fiscal Year End 0 6 3 0 9 0
Month Day Year

Mode(s) MB

1. Name of contractor*: Orange County Transit District
2. Address 11222 Acacia Parkway
 City Garden Grove
 State California Zip Code 92642
3. Name of contact person: Mr. James P. Reichart
 Title General Manager
 Telephone (714) 971-6200
area code number extension

4. Agency in Item 1 is:
 - A. Public agency contracting for transit service
 - B. Other public agency providing transit service under contract
 - C. Private carrier providing transit service under contract
 - D. Private carrier contracting for transit service
 - E. Other (describe on Form 005)
5. Nature of contractual relationship (check all boxes that apply):
 - A. Cash reimbursement of some or all of contract carrier's operating deficit
 - B. Cash payment to contract carrier for specific mass transportation services
 - C. Cash reimbursement to contract carrier for reduced fare programs
 - D. Vehicles given, loaned, or leased for below market value to contract carrier
 - E. Other. Explain monetary consideration received and obligations incurred by contract carrier on Form 005

6. Number of vehicles operated in maximum service under contract by mode: 64
7. Contract amount by mode: \$ 1,207,107 \$ _____ \$ _____
8. Revenues retained by mode: yes no
 If yes, actual amount on annual basis \$ 482,842 \$ _____ \$ _____

*If report is by or for contractor operating 50 or more vehicles, this should be the name of the public agency contracting for service.

Date Prepared October 13, 1990 Date Updated _____

CONTRACTUAL RELATIONSHIP IDENTIFICATION SCHEDULE

(Use as many pages as necessary)

Transit ID 9021

Level R

Fiscal Year End 06 30 90
Month Day Year

Mode(s) MB

1. Name of contractor*: Riverside Transit Agency
2. Address 1825 Third Street
 City Riverside
 State California Zip Code 92507
3. Name of contact person: Mr. Durand L. Rall
 Title General Manager
 Telephone (714) 684-0850
area code number extension

4. Agency in Item 1 is:
 - A. Public agency contracting for transit service
 - B. Other public agency providing transit service under contract
 - C. Private carrier providing transit service under contract
 - D. Private carrier contracting for transit service
 - E. Other (describe on Form 005)

5. Nature of contractual relationship (check all boxes that apply):
 - A. Cash reimbursement of some or all of contract carrier's operating deficit
 - B. Cash payment to contract carrier for specific mass transportation services
 - C. Cash reimbursement to contract carrier for reduced fare programs
 - D. Vehicles given, loaned, or leased for below market value to contract carrier
 - E. Other. Explain monetary consideration received and obligations incurred by contract carrier on Form 005

6. Number of vehicles operated in maximum service under contract by mode: _____ 10
7. Contract amount by mode: \$ 716,157 \$ _____ \$ _____
8. Revenues retained by mode: yes no
 If yes, actual amount on annual basis \$ 489,525 \$ _____ \$ _____

*If report is by or for contractor operating 50 or more vehicles, this should be the name of the public agency contracting for service.

Date Prepared October 16, 1990 Date Updated _____

CONTRACTUAL RELATIONSHIP IDENTIFICATION SCHEDULE

(Use as many pages as necessary)

Transit ID 9021

Level R

Fiscal Year End 06 30 90
Month Day Year

Mode(s) MB

1. Name of contractor*: City of Los Angeles
2. Address 200 North Spring Street, Room 1600
 City Los Angeles
 State California Zip Code 90012
3. Name of contact person: Mr. James McLaughlin
 Title Chief of Transit Programs
 Telephone (213) 485-7433
area code number extension

4. Agency in Item 1 is:
 - A. Public agency contracting for transit service
 - B. Other public agency providing transit service under contract
 - C. Private carrier providing transit service under contract
 - D. Private carrier contracting for transit service
 - E. Other (describe on Form 005)

5. Nature of contractual relationship (check all boxes that apply):
 - A. Cash reimbursement of some or all of contract carrier's operating deficit
 - B. Cash payment to contract carrier for specific mass transportation services
 - C. Cash reimbursement to contract carrier for reduced fare programs
 - D. Vehicles given, loaned, or leased for below market value to contract carrier
 - E. Other. Explain monetary consideration received and obligations incurred by contract carrier on Form 005

6. Number of vehicles operated in maximum service under contract by mode: _____

7. Contract amount by mode: \$ 55,000 \$ _____ \$ _____

8. Revenues retained by mode: yes no
 If yes, actual amount on annual basis \$ 9,700 \$ _____ \$ _____

If report is by or for contractor operating 50 or more vehicles, this should be the name of the public agency contracting for service.

Date Prepared October 16, 1990 Date Updated _____

CONTRACTUAL RELATIONSHIP IDENTIFICATION SCHEDULE

(Use as many pages as necessary)

Transit ID 9021

Level R

Fiscal Year End 06 30 90
Month Day Year

Mode(s) MR

1. Name of contractor*: County of Los Angeles
2. Address 900 South Fremont Avenue
 City Alhambra
 State California Zip Code 91803
3. Name of contact person: Mr. Greg Kelley
 Title Supervising Civil Engineer III - Transit Manager
 Telephone (818) 458-3968
area code number extension

4. Agency in Item 1 is:
 - A. Public agency contracting for transit service
 - B. Other public agency providing transit service under contract
 - C. Private carrier providing transit service under contract
 - D. Private carrier contracting for transit service
 - E. Other (describe on Form 005)

5. Nature of contractual relationship (check all boxes that apply):
 - A. Cash reimbursement of some or all of contract carrier's operating deficit
 - B. Cash payment to contract carrier for specific mass transportation services
 - C. Cash reimbursement to contract carrier for reduced fare programs
 - D. Vehicles given, loaned, or leased for below market value to contract carrier
 - E. Other. Explain monetary consideration received and obligations incurred by contract carrier on Form 005

6. Number of vehicles operated in maximum service under contract by mode: 2
7. Contract amount by mode: \$ 166,700 \$ _____ \$ _____
8. Revenues retained by mode: yes no
 If yes, actual amount on annual basis \$ 25,045 \$ _____ \$ _____

*If report is by or for contractor operating 50 or more vehicles, this should be the name of the public agency contracting for service.

Date Prepared October 16, 1990 Date Updated _____

CONTRACTUAL RELATIONSHIP IDENTIFICATION SCHEDULE

(Use as many pages as necessary)

Transit ID 9 0 2 1

Level R

Fiscal Year End 0 6 3 0 9 0
Month Day Year

Mode(s) MB

1. Name of contractor*: County of Los Angeles
2. Address 900 South Fremont Avenue
 City Alhambra
 State California Zip Code 91803
3. Name of contact person: Mr. Greg Kelley
 Title Supervising Civil Engineer III - Transit Manager
 Telephone (818) 458-3968
area code number extension

4. Agency in Item 1 is:
 - A. Public agency contracting for transit service
 - B. Other public agency providing transit service under contract
 - C. Private carrier providing transit service under contract
 - D. Private carrier contracting for transit service
 - E. Other (describe on Form 005)

5. Nature of contractual relationship (check all boxes that apply):
 - A. Cash reimbursement of some or all of contract carrier's operating deficit
 - B. Cash payment to contract carrier for specific mass transportation services
 - C. Cash reimbursement to contract carrier for reduced fare programs
 - D. Vehicles given, loaned, or leased for below market value to contract carrier
 - E. Other. Explain monetary consideration received and obligations incurred by contract carrier on Form 005

6. Number of vehicles operated in maximum service under contract by mode: 4

7. Contract amount by mode: \$ 250,000 \$ _____ \$ _____

8. Revenues retained by mode: yes no
 If yes, actual amount on annual basis \$ 93,000 \$ _____ \$ _____

*If report is by or for contractor operating 50 or more vehicles, this should be the name of the public agency contracting for service.

Date Prepared October 16, 1990 Date Updated _____

CONTRACTUAL RELATIONSHIP IDENTIFICATION SCHEDULE

(Use as many pages as necessary)

Transit ID 9 0 2 1

Level R

Fiscal Year End 0 6 3 0 9 0
Month Day Year

Mode(s) MB

1. Name of contractor*: County of Los Angeles
2. Address 900 South Fremont Avenue
 City Alhambra
 State California Zip Code 91803
3. Name of contact person: Mr. Greg Kelley
 Title Supervising Civil Engineer III - Transit Manager
 Telephone (818) 458-3968
area code number extension

4. Agency in Item 1 is:
 - A. Public agency contracting for transit service
 - B. Other public agency providing transit service under contract
 - C. Private carrier providing transit service under contract
 - D. Private carrier contracting for transit service
 - E. Other (describe on Form 005)
5. Nature of contractual relationship (check all boxes that apply):
 - A. Cash reimbursement of some or all of contract carrier's operating deficit
 - B. Cash payment to contract carrier for specific mass transportation services
 - C. Cash reimbursement to contract carrier for reduced fare programs
 - D. Vehicles given, loaned, or leased for below market value to contract carrier
 - E. Other. Explain monetary consideration received and obligations incurred by contract carrier on Form 005

6. Number of vehicles operated in maximum service under contract by mode: 18

7. Contract amount by mode: \$ 827,000 \$ \$

8. Revenues retained by mode: yes no
 If yes, actual amount on annual basis \$ 470,000 \$ \$

*If report is by or for contractor operating 50 or more vehicles, this should be the name of the public agency contracting for service.

Date Prepared October 16, 1990 Date Updated

CONTRACTUAL RELATIONSHIP IDENTIFICATION SCHEDULE

(Use as many pages as necessary)

Transit ID 9021

Level R

Fiscal Year End 06/30/90

Mode(s) MB

- 1. Name of contractor*: City of Pasadena
2. Address 1001 Rose Bowl Drive
City Pasadena
State California Zip Code 91103
3. Name of contact person: Ms. Connie Campbell
Title Manager
Telephone (818) 577-3100
area code number extension

4. Agency in Item 1 is:

- [X] A. Public agency contracting for transit service
[] B. Other public agency providing transit service under contract
[] C. Private carrier providing transit service under contract
[] D. Private carrier contracting for transit service
[] E. Other (describe on Form 005)

5. Nature of contractual relationship (check all boxes that apply):

- [] A. Cash reimbursement of some or all of contract carrier's operating deficit
[X] B. Cash payment to contract carrier for specific mass transportation services
[] C. Cash reimbursement to contract carrier for reduced fare programs
[] D. Vehicles given, loaned, or leased for below market value to contract carrier
[] E. Other. Explain monetary consideration received and obligations incurred by contract carrier on Form 005

6. Number of vehicles operated in maximum service under contract by mode:

4

7. Contract amount by mode: \$ 71,495 \$ \$

8. Revenues retained by mode: [] yes [X] no

If yes, actual amount on annual basis \$ \$ \$

*If report is by or for contractor operating 50 or more vehicles, this should be the name of the public agency contracting for service.

CONTRACTUAL RELATIONSHIP IDENTIFICATION SCHEDULE

(Use as many pages as necessary)

Transit ID 9 0 2 1

Level R

Fiscal Year End 0 6 3 0 9 0
Month Day Year

Mode(s) MB

- 1. Name of contractor*: City of Rancho Palos Verdes
2. Address 30940 Hawthorne Boulevard
City Rancho Palos Verdes
State California Zip Code 90274-5391
3. Name of contact person: Mr. George Wentz
Title Director of Public Works
Telephone (213) 377-0360
area code number extension

- 4. Agency in Item 1 is:
[X] A. Public agency contracting for transit service
[] B. Other public agency providing transit service under contract
[] C. Private carrier providing transit service under contract
[] D. Private carrier contracting for transit service
[] E. Other (describe on Form 005)

- 5. Nature of contractual relationship (check all boxes that apply):
[] A. Cash reimbursement of some or all of contract carrier's operating deficit
[X] B. Cash payment to contract carrier for specific mass transportation services
[] C. Cash reimbursement to contract carrier for reduced fare programs
[] D. Vehicles given, loaned, or leased for below market value to contract carrier
[] E. Other. Explain monetary consideration received and obligations incurred by contract carrier on Form 005

6. Number of vehicles operated in maximum service under contract by mode: 3
7. Contract amount by mode: \$ 35,560 \$ \$

8. Revenues retained by mode: [X] yes [] no
If yes, actual amount on annual basis \$ 7,100 \$ \$

*If report is by or for contractor operating 50 or more vehicles, this should be the name of the public agency contracting for service.

Date Prepared October 16, 1990 Date Updated

CONTRACTUAL RELATIONSHIP IDENTIFICATION SCHEDULE

(Use as many pages as necessary)

Transit ID

Level

Fiscal Year End
Month Day Year

Mode(s)

1. Name of contractor*: Los Angeles Turf Club, Inc.
2. Address 285 West Huntington Drive
 City Arcadia
 State California Zip Code 91007-3439
3. Name of contact person: Mr. Dick Honaker
 Title Traffic Coordinator
 Telephone (818) 574-6372
area code number extension

4. Agency in Item 1 is:
 - A. Public agency contracting for transit service
 - B. Other public agency providing transit service under contract
 - C. Private carrier providing transit service under contract
 - D. Private carrier contracting for transit service
 - E. Other (describe on Form 005)

5. Nature of contractual relationship (check all boxes that apply):
 - A. Cash reimbursement of some or all of contract carrier's operating deficit
 - B. Cash payment to contract carrier for specific mass transportation services
 - C. Cash reimbursement to contract carrier for reduced fare programs
 - D. Vehicles given, loaned, or leased for below market value to contract carrier
 - E. Other. Explain monetary consideration received and obligations incurred by contract carrier on Form 005

6. Number of vehicles operated in maximum service under contract by mode: 2

7. Contract amount by mode: \$ 4,758 \$ _____ \$ _____

8. Revenues retained by mode: yes no
 If yes, actual amount on annual basis \$ _____ \$ _____ \$ _____

*If report is by or for contractor operating 50 or more vehicles, this should be the name of the public agency contracting for service.

Date Prepared October 16, 1990 Date Updated _____

CONTRACTUAL RELATIONSHIP IDENTIFICATION SCHEDULE

(Use as many pages as necessary)

Transit ID

Level

Fiscal Year End
Month Day Year

Mode(s) MB

1. Name of contractor*: Los Angeles Turf Club, Inc.

2. Address 285 West Huntington Drive

City Arcadia

State California Zip Code 91007-3439

3. Name of contact person: Mr. Dick Honaker

Title Traffic Coordinator

Telephone (818) 574-6372
area code number extension

4. Agency in Item 1 is:

- A. Public agency contracting for transit service
- B. Other public agency providing transit service under contract
- C. Private carrier providing transit service under contract
- D. Private carrier contracting for transit service
- E. Other (describe on Form 005)

5. Nature of contractual relationship (check all boxes that apply):

- A. Cash reimbursement of some or all of contract carrier's operating deficit
- B. Cash payment to contract carrier for specific mass transportation services
- C. Cash reimbursement to contract carrier for reduced fare programs
- D. Vehicles given, loaned, or leased for below market value to contract carrier
- E. Other. Explain monetary consideration received and obligations incurred by contract carrier on Form 005

6. Number of vehicles operated in maximum service under contract by mode: 2

7. Contract amount by mode: \$ 15,006 \$ _____ \$ _____

8. Revenues retained by mode: yes no
 If yes, actual amount on annual basis \$ _____ \$ _____ \$ _____

*If report is by or for contractor operating 50 or more vehicles, this should be the name of the public agency contracting for service.

Date Prepared October 16, 1990 Date Updated _____

CONTRACTUAL RELATIONSHIP IDENTIFICATION SCHEDULE

(Use as many pages as necessary)

Transit ID

Level

Fiscal Year End
Month Day Year

Mode(s) MB

1. Name of contractor*: Fairplex
2. Address 1101 West McKinley
 City Pomona
 State California Zip Code 91768
3. Name of contact person: Mr. Bruce Latta
 Title Operations Manager
 Telephone (714) 623-3111
area code number extension

4. Agency in Item 1 is:
 - A. Public agency contracting for transit service
 - B. Other public agency providing transit service under contract
 - C. Private carrier providing transit service under contract
 - D. Private carrier contracting for transit service
 - E. Other (describe on Form 005)

5. Nature of contractual relationship (check all boxes that apply):
 - A. Cash reimbursement of some or all of contract carrier's operating deficit
 - B. Cash payment to contract carrier for specific mass transportation services
 - C. Cash reimbursement to contract carrier for reduced fare programs
 - D. Vehicles given, loaned, or leased for below market value to contract carrier
 - E. Other. Explain monetary consideration received and obligations incurred by contract carrier on Form 005

6. Number of vehicles operated in maximum service under contract by mode: 2

7. Contract amount by mode: \$ 10,004 \$ _____ \$ _____

8. Revenues retained by mode: yes no
 If yes, actual amount on annual basis \$ _____ \$ _____ \$ _____

* If report is by or for contractor operating 50 or more vehicles, this should be the name of the public agency contracting for service.

Date Prepared October 16, 1990 Date Updated _____

MAXIMUM SERVICE VEHICLES SUMMARY SCHEDULE -- DIRECTLY OPERATED SERVICE
 (Use as many pages as necessary)

Transit ID 9 0 2 1

Level DO

Fiscal Year End 0 6 3 0 9 0
 Month Day Year

a Line No.	b MODE	c VEHICLE TYPE	d OWNERSHIP CODE	e VEHICLES OPERATED IN MAXIMUM SERVICE	f VEHICLES AVAILABLE FOR MAXIMUM SERVICE
01	MB	AB	00	8	10
02	MB	BA	00	1870	2443
03	MB	BB	00	37	47
04	MB	DB	00	14	18
05					
06	Total			1929	2518
07					
08					
09					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

Date Prepared _____ Date Updated _____

If Form 005 pertains to Purchased Transportation
Please provide contractor name.

SUPPLEMENTAL INFORMATION SCHEDULE

Transit ID

Level

Fiscal Year End
Month Day Year

Note: Use a separate page for each applicable item below. Check and describe only one item per page. Use as many pages as necessary.

- | | |
|---|---|
| 1. <input type="checkbox"/> Major service start-up | 11. <input type="checkbox"/> Vehicle type discrepancy (Forms 003/408) |
| 2. <input type="checkbox"/> Major service discontinuance | 12. <input type="checkbox"/> Fixed/non-fixed guideway allocation methodology (Form 006) |
| 3. <input type="checkbox"/> Major new equipment or facilities | 13. <input type="checkbox"/> Fare revenue retained by purchased service contractor (300 series forms) |
| 4. <input type="checkbox"/> Fare change | 14. <input type="checkbox"/> Fare revenue returned to reporter by purchased service contractor (300 series forms) |
| 5. <input type="checkbox"/> Strike | 15. <input type="checkbox"/> Motorbus fixed guideway segments (Forms 006/403) |
| 6. <input type="checkbox"/> Other major service interruption | 16. <input type="checkbox"/> Passenger mile data with sampling waiver (Forms 406/407) |
| 7. <input type="checkbox"/> "Other" organization type (Forms 001/002) | 17. <input type="checkbox"/> "Other" reasons for days not operated (Forms 406/407) |
| 8. <input type="checkbox"/> "Other" contractual relationship (Form 002) | 18. <input checked="" type="checkbox"/> Fleet total discrepancy (Form 408) |
| 9. <input type="checkbox"/> Purchased transportation vehicles discrepancy (Forms 002/004) | 19. <input type="checkbox"/> Other |
| 10. <input type="checkbox"/> "Other" mode(s), vehicle type(s), or ownership code(s) (Forms 003/004) | |

Description of above, plus any other relevant information.

The difference between columns "b" and "h" on Form 408 are a result of the assignment of certain buses to the sale's fleet. Column "b" includes buses in the sales fleet and column "h" excludes these buses.

Date Prepared 10/15/90

Date Updated _____

If Form 005 pertains to Purchased Transportation
Please provide contractor name.

FORM 005 Page of

SUPPLEMENTAL INFORMATION SCHEDULE

Transit ID

Level

Fiscal Year End
Month Day Year

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| 8. <input type="checkbox"/> "Other" contractual relationship (Form 002) | 18. <input type="checkbox"/> Fleet total discrepancy (Form 408) |
| 9. <input type="checkbox"/> Purchased transportation vehicles discrepancy (Forms 002/004) | 19. <input type="checkbox"/> Other |
| 10. <input type="checkbox"/> "Other" mode(s), vehicle type(s), or ownership code(s) (Forms 003/004) | |

Description of above, plus any other relevant information.

Allocation of Actual Vehicle Revenue Miles, Passenger Miles, and Operating Expenses between Fixed and Non-Fixed Guideways:

1. Actual Vehicle Revenue Miles

The District first establishes the total actual vehicle revenue miles to

Date Prepared 10/15/90

Date Updated _____

If Form 005 pertains to Purchased Transportation
Please provide contractor name.

FORM 005 Page of

SUPPLEMENTAL INFORMATION SCHEDULE

Transit ID

Level

Fiscal Year End
Month Day Year

Note: Use a separate page for each applicable item below. Check and describe only one item per page. Use as many pages as necessary.

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|---|---|
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| 8. <input type="checkbox"/> "Other" contractual relationship (Form 002) | 18. <input type="checkbox"/> Fleet total discrepancy (Form 408) |
| 9. <input type="checkbox"/> Purchased transportation vehicles discrepancy (Forms 002/004) | 19. <input type="checkbox"/> Other |
| 10. <input type="checkbox"/> "Other" mode(s), vehicle type(s), or ownership code(s) (Forms 003/004) | |

Description of above, plus any other relevant information.

1. (Cont'd)
be reported on Form 406 (row 4, column i). Total actual vehicle revenue miles are calculated using: (a) master trip scheduling database, (b) service added/cancelled using pink letters, (c) service provided to special events, and (d) loss in service due to non-availability of

Date Prepared 10/15/90

Date Updated _____

If Form 005 pertains to Purchased Transportation
Please provide contractor name.

SUPPLEMENTAL INFORMATION SCHEDULE

Transit ID

Level

Fiscal Year End
Month Day Year

Note: Use a separate page for each applicable item below. Check and describe only one item per page. Use as many pages as necessary.

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|---|---|
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| 7. <input type="checkbox"/> "Other" organization type (Forms 001/002) | 17. <input type="checkbox"/> "Other" reasons for days not operated (Forms 406/407) |
| 8. <input type="checkbox"/> "Other" contractual relationship (Form 002) | 18. <input type="checkbox"/> Fleet total discrepancy (Form 408) |
| 9. <input type="checkbox"/> Purchased transportation vehicles discrepancy (Forms 002/004) | 19. <input type="checkbox"/> Other |
| 10. <input type="checkbox"/> "Other" mode(s), vehicle type(s), or ownership code(s) (Forms 003/004) | |

Description of above, plus any other relevant information.

1. (Cont'd)
equipment, operator, equipment breakdown, etc. Vehicle revenue miles accrued on fixed guideway facilities are calculated by first identifying the bus lines operated on the fixed guideway facilities then multiplying the number of trips operated on each line by fixed guideway segments'

Date Prepared 10/15/90

Date Updated _____

If Form 005 pertains to Purchased Transportation
Please provide contractor name.

SUPPLEMENTAL INFORMATION SCHEDULE

Transit ID

Level

Fiscal Year End
Month Day Year

Note: Use a separate page for each applicable item below. Check and describe only one item per page. Use as many pages as necessary.

- | | |
|---|---|
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| 9. <input type="checkbox"/> Purchased transportation vehicles discrepancy (Forms 002/004) | 19. <input type="checkbox"/> Other |
| 10. <input type="checkbox"/> "Other" mode(s), vehicle type(s), or ownership code(s) (Forms 003/004) | |

Description of above, plus any other relevant information.

1. (Contd.)

lengths. Resulting vehicle revenue miles are then subtracted from the total actual revenue miles reported on Form 406 to derive the non-fixed guideway vehicle revenue miles.

Date Prepared 10/15/90

Date Updated _____

If Form 005 pertains to Purchased Transportation
Please provide contractor name.

SUPPLEMENTAL INFORMATION SCHEDULE

Transit ID 9021 Level R

Fiscal Year End 06 30 90

Month Day Year

Note: Use a separate page for each applicable item below. Check and describe only one item per page. Use as many pages as necessary.

- | | |
|---|---|
| <p>1. <input type="checkbox"/> Major service start-up</p> <p>2. <input type="checkbox"/> Major service discontinuance</p> <p>3. <input type="checkbox"/> Major new equipment or facilities</p> <p>4. <input type="checkbox"/> Fare change</p> <p>5. <input type="checkbox"/> Strike</p> <p>6. <input type="checkbox"/> Other major service interruption</p> <p>7. <input type="checkbox"/> "Other" organization type (Forms 001/002)</p> <p>8. <input type="checkbox"/> "Other" contractual relationship (Form 002)</p> <p>9. <input type="checkbox"/> Purchased transportation vehicles discrepancy (Forms 002/004)</p> <p>10. <input type="checkbox"/> "Other" mode(s), vehicle type(s), or ownership code(s) (Forms 003/004)</p> | <p>11. <input type="checkbox"/> Vehicle type discrepancy (Forms 003/408)</p> <p>12. <input checked="" type="checkbox"/> Fixed/non-fixed guideway allocation methodology (Form 006)</p> <p>13. <input type="checkbox"/> Fare revenue retained by purchased service contractor (300 series forms)</p> <p>14. <input type="checkbox"/> Fare revenue returned to reporter by purchased service contractor (300 series forms)</p> <p>15. <input type="checkbox"/> Motorbus fixed guideway segments (Forms 006/403)</p> <p>16. <input type="checkbox"/> Passenger mile data with sampling waiver (Forms 406/407)</p> <p>17. <input type="checkbox"/> "Other" reasons for days not operated (Forms 406/407)</p> <p>18. <input type="checkbox"/> Fleet total discrepancy (Form 408)</p> <p>19. <input type="checkbox"/> Other</p> |
|---|---|

Description of above, plus any other relevant information.

2. Passenger Miles:

The District first establishes the system-wide annual unlinked passenger trips to be reported on Form 406 (row 12, Column i). System-wide unlinked passenger trips are estimated by surveying approximately 24%, 11% and 16% of trips operated on a typical Weekday, Saturday and Sunday. Surveys are conducted throughout the year in order to estimate annual average Weekday,

If Form 005 pertains to Purchased Transportation
Please provide contractor name.

FORM 005 Page of

SUPPLEMENTAL INFORMATION SCHEDULE

Transit ID

Level

Fiscal Year End
Month Day Year

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- | | |
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| 8. <input type="checkbox"/> "Other" contractual relationship (Form 002) | 18. <input type="checkbox"/> Fleet total discrepancy (Form 408) |
| 9. <input type="checkbox"/> Purchased transportation vehicles discrepancy (Forms 002/004) | 19. <input type="checkbox"/> Other |
| 10. <input type="checkbox"/> "Other" mode(s), vehicle type(s), or ownership code(s) (Forms 003/004) | |

Description of above, plus any other relevant information.

2. (Contd.)

Saturday and Sunday boardings. The District also conducts periodic ride checks on lines operated on Weekdays, Saturdays, and Sundays for Scheduling and Planning purposes. Using the ride check database, average trip lengths for boardings made on Weekdays, Saturdays and Sundays are estimated. Passenger miles are computed by multiplying daily boardings with average

Date Prepared 10/15/90

Date Updated _____

If Form 005 pertains to Purchased Transportation
Please provide contractor name.

SUPPLEMENTAL INFORMATION SCHEDULE

Transit ID

Level

Fiscal Year End
Month Day Year

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| 10. <input type="checkbox"/> "Other" mode(s), vehicle type(s), or ownership code(s) (Forms 003/004) | |

Description of above, plus any other relevant information.
2. (Contd.)

trip length. Passenger miles carried on fixed guideway facilities are computed using the ride check database. Counted passengers on-board are multiplied by the distance to the next stop and the resulting passenger miles are summed over the fixed guideway segment. Passenger miles on non-fixed guideway segments are calculated by subtracting the fixed-guideway passenger miles

If Form 005 pertains to Purchased Transportation
Please provide contractor name.

SUPPLEMENTAL INFORMATION SCHEDULE

Transit ID

Level

Fiscal Year End
Month Day Year

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2. Description of above, plus any other relevant information.
(Contd.)

from the system-wide passenger miles reported on Form 406.

If Form 005 pertains to Purchased Transportation
Please provide contractor name.

FORM 005 Page of

SUPPLEMENTAL INFORMATION SCHEDULE

Transit ID

Level

Fiscal Year End
Month Day Year

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| 10. <input type="checkbox"/> "Other" mode(s), vehicle type(s), or ownership code(s) (Forms 003/004) | |

3. Description of above, plus any other relevant information.

The District first establishes the annual system-wide Operating Expenses to be reported on Form 301 (Row 15, Column f). The District utilizes a two-factor full cost allocation procedure to estimate the line level operating costs.
The factors utilized are scheduled miles and scheduled hours of service.
Using this cost allocation procedure, total operating expenses of lines

Date Prepared 10/15/90

Date Updated _____

If Form 005 pertains to Purchased Transportation
Please provide contractor name.

FORM 005 Page of

SUPPLEMENTAL INFORMATION SCHEDULE

Transit ID

Level

Fiscal Year End
Month Day Year

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| 10. <input type="checkbox"/> "Other" mode(s), vehicle type(s), or ownership code(s) (Forms 003/004) | |

3. Description of above, plus any other relevant information.
(Contd.)

operated on fixed guideway facilities are first estimated. This total line level cost is then further split between fixed and non-fixed guideway costs depending on the level of service on these segments. Once the total fixed guideway costs are determined, they are subtracted from the system-wide cost reported on Form 301 to arrive at the total non-fixed guideway operating costs.

Date Prepared 10/15/90

Date Updated _____

If Form 005 pertains to Purchased Transportation
Please provide contractor name.

FORM 005 Page of

SUPPLEMENTAL INFORMATION SCHEDULE

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Month Day Year

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Description of above, plus any other relevant information.

Motorbus Fixed Guideway Segments:

1. Controlled Access Right-of-Way Segments:

The District operates lines on the El Monte Busway which is a Controlled Access Right-of-Way segment for motorbuses and high occupancy motor vehicles (persons). This east-west facility is in the median of the San Bernardino

Date Prepared 10/15/90

Date Updated _____

If Form 005 pertains to Purchased Transportation
Please provide contractor name.

SUPPLEMENTAL INFORMATION SCHEDULE

Transit ID 9 0 2 1

Level R

Fiscal Year End 0 6 3 0 9 0
Month Day Year

Note: Use a separate page for each applicable item below. Check and describe only one item per page. Use as many pages as necessary.

- 1. Major service start-up
- 2. Major service discontinuance
- 3. Major new equipment or facilities
- 4. Fare change
- 5. Strike
- 6. Other major service interruption
- 7. "Other" organization type (Forms 001/002)
- 8. "Other" contractual relationship (Form 002)
- 9. Purchased transportation vehicles discrepancy (Forms 002/004)
- 10. "Other" mode(s), vehicle type(s), or ownership code(s) (Forms 003/004)
- 11. Vehicle type discrepancy (Forms 003/408)
- 12. Fixed/non-fixed guideway allocation methodology (Form 006)
- 13. Fare revenue retained by purchased service contractor (300 series forms)
- 14. Fare revenue returned to reporter by purchased service contractor (300 series forms)
- 15. Motorbus fixed guideway segments (Forms 006/403)
- 16. Passenger mile data with sampling waiver (Forms 406/407)
- 17. "Other" reasons for days not operated (Forms 406/407)
- 18. Fleet total discrepancy (Form 408)
- 19. Other

Description of above, plus any other relevant information.

1. (Contd.)

Freeway (I-10) with one lane in each direction. The eastern end of this facility is at the intersection of the San Bernardino Freeway and Santa Anita Avenue.

The western end of this facility was extended from Mission Road and Elliott Street to Alameda and Arcadia Streets, by a distance of 0.7 miles in each direction. This extension was opened on 9/5/89. The length of the complete segment is 23.0 miles, both directions together.

Date Prepared 10/15/90

Date Updated

If Form 005 pertains to Purchased Transportation
Please provide contractor name.

FORM 005 Page of

SUPPLEMENTAL INFORMATION SCHEDULE

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| 5. <input type="checkbox"/> Strike | 15. <input checked="" type="checkbox"/> Motorbus fixed guideway segments (Forms 006/403) |
| 6. <input type="checkbox"/> Other major service interruption | 16. <input type="checkbox"/> Passenger mile data with sampling waiver (Forms 406/407) |
| 7. <input type="checkbox"/> "Other" organization type (Forms 001/002) | 17. <input type="checkbox"/> "Other" reasons for days not operated (Forms 406/407) |
| 8. <input type="checkbox"/> "Other" contractual relationship (Form 002) | 18. <input type="checkbox"/> Fleet total discrepancy (Form 408) |
| 9. <input type="checkbox"/> Purchased transportation vehicles discrepancy (Forms 002/004) | 19. <input type="checkbox"/> Other |
| 10. <input type="checkbox"/> "Other" mode(s), vehicle type(s), or ownership code(s) (Forms 003/004) | |

Description of above, plus any other relevant information.

2. Exclusive Access Right of Way Segment:

The District operates lines on a Spring Street Contra-Flow lane in Downtown Los Angeles. The facility consists of one northbound lane. The south end of this facility is at the intersection of Spring and 9th Streets, while the north end is at Spring Street and Sunset Boulevard. The length of the facility is 1.5-miles.

Date Prepared 10/15/90

Date Updated _____

FORM 005

Definition of Fixed Guideway Segments

	<u>Directional Mileage</u>	<u>Peak Period Level of Service</u>	<u>Number of Hours Per Week</u>	
			<u>Single Occupant Autos Prohibited</u>	<u>Prohibition Enforced</u>
a. Priority lane on multi-lane roadway				
El Monte Busway	23.0	"E"	168	168
b. Exclusive lane parallel to a multi-lane road- way separated from general traffic lane.				
Spring Street Bus Lane	1.5	"D"	168	168

If Form 005 pertains to Purchased Transportation
Please provide contractor name.

SUPPLEMENTAL INFORMATION SCHEDULE

Transit ID

Level

Fiscal Year End
Month Day Year

Note: Use a separate page for each applicable item below. Check and describe only one item per page. Use as many pages as necessary.

- | | |
|---|---|
| 1. <input type="checkbox"/> Major service start-up | 11. <input type="checkbox"/> Vehicle type discrepancy (Forms 003/408) |
| 2. <input type="checkbox"/> Major service discontinuance | 12. <input type="checkbox"/> Fixed/non-fixed guideway allocation methodology (Form 006) |
| 3. <input type="checkbox"/> Major new equipment or facilities | 13. <input type="checkbox"/> Fare revenue retained by purchased service contractor (300 series forms) |
| 4. <input type="checkbox"/> Fare change | 14. <input type="checkbox"/> Fare revenue returned to reporter by purchased service contractor (300 series forms) |
| 5. <input type="checkbox"/> Strike | 15. <input type="checkbox"/> Motorbus fixed guideway segments (Forms 006/403) |
| 6. <input type="checkbox"/> Other major service interruption | 16. <input type="checkbox"/> Passenger mile data with sampling waiver (Forms 406/407) |
| 7. <input type="checkbox"/> "Other" organization type (Forms 001/002) | 17. <input type="checkbox"/> "Other" reasons for days not operated (Forms 406/407) |
| 8. <input checked="" type="checkbox"/> "Other" contractual relationship (Form 002) | 18. <input type="checkbox"/> Fleet total discrepancy (Form 408) |
| 9. <input type="checkbox"/> Purchased transportation vehicles discrepancy (Forms 002/004) | 19. <input type="checkbox"/> Other |
| 10. <input type="checkbox"/> "Other" mode(s), vehicle type(s), or ownership code(s) (Forms 003/004) | |

Description of above, plus any other relevant information.

The "Other" contractual relationship is a Private Company contracting for transit service, (i.e., shuttle-type of service).

Date Prepared October 16, 1990

Date Updated _____

Form (Page 1 of 1)
SECTION 9 STATISTICS SUMMARY

Transit ID 9 0 2 1

Level R

Fiscal Year End 0 6 3 0 9 0
 Month Day Year

Line No		ANNUAL TOTAL	NON-UZA	UZA	UZA	UZA
01	UZA Number			002	071	039
02	Mode Code					
03	FG/NF*					
04	Type of Service**					
05	Fixed Guideway Directional Route Miles	24.5		24.5	0	0
06	Actual Vehicle Revenue Miles	2,495,703		2,495,703	0	0
07	Passenger Miles	55,998,267		55,998,267	0	0
08	Operating Expense (Reporting Agency)	11,727,187		11,727,187	0	0
09	Retained Fare Revenue (Contract Service Provider(s))					
10	Mode Code					
11	FG/NF*					
12	Type of Service**					
13	Fixed Guideway Directional Route Miles					
14	Actual Vehicle Revenue Miles	84,095,893		83,731,471	100,264	264,158
15	Passenger Miles	1,556,753,757		1,551,651,932	1,039,970	4,061,855
16	Operating Expense (Reporting Agency)	541,475,650		540,038,327	404,142	1,033,181
17	Retained Fare Revenue (Contract Service Provider(s))					
18	Mode Code					
19	FG/NF*					
20	Type of Service**					
21	Fixed Guideway Directional Route Miles					
22	Actual Vehicle Revenue Miles					
23	Passenger Miles					
24	Operating Expense (Reporting Agency)					
25	Retained Fare Revenue (Contract Service Provider(s))					

*FG = Fixed Guideway, NF = Non-Fixed Guideway

**DO = Directly Operated Service, PT = Purchased Transportation Service

Date Prepared 10/15/90 Date Updated _____

BALANCE SHEET SUMMARY SCHEDULE

Transit ID 9 0 2 1

Level R

Fiscal Year End 0 6 3 0 9 0
Month Day Year

Line No.	OBJECT CLASS	DOLLAR AMOUNT	DOLLAR AMOUNT
ASSETS			
01	101. Cash and Cash Items		(37,600,213)
02	102. Receivables		245,641,115
03	103. Materials and Supplies Inventory		17,436,523
04	104. Other Current Assets		
05	105. Work in Progress		886,396,378
06	111. Tangible Transit Operating Property	910,850,328	
07	Less Accumulated Depreciation	401,034,090	509,816,238
08	112. Tangible Property Other Than for Transit Operations	-0-	
09	Less Accumulated Depreciation	-0-	-0-
10	121. Intangible Assets	-0-	
11	Less Accumulated Amortization	-0-	-0-
12	131. Investments		-0-
13	141. Special Funds		262,883,426
14	151. Other Assets		2,514,18
15	TOTAL ASSETS		1,887,087,650
LIABILITIES AND CAPITAL			
16	201. Trade Payables		52,705,704
17	202. Accrued Payroll Liabilities		31,026,849
18	203. Accrued Tax Liabilities		-0-
19	204. Short-Term Debt		74,640,388
20	205. Other Current Liabilities		31,825,768
21	211. Advances Payable		39,151,997
22	221. Long-Term Debt		107,576,593
23	231. Estimated Liabilities		183,269,991
24	241. Deferred Credits		6,524,568
25	TOTAL LIABILITIES		506,721,858
26	301. Public (Governmental) Entity Ownership		9,766,828
27	302. Private Corporation Ownership		-0-
28	303. Private Noncorporate Ownership		-0-
29	304. Grants, Donations, and Other Paid-in Capital		1,370,884,432
30	305. Accumulated Earnings (Losses)		(285,468)
31	TOTAL CAPITAL		1,380,365,792
32	TOTAL LIABILITIES AND CAPITAL		1,887,087,650

CAPITAL SUBSIDIARY SCHEDULE - SOURCES OF PUBLIC CAPITAL ASSISTANCE

Transit ID 91 01 24

Level R

Fiscal Year End 06 30 90
Month Day Year

GOVERNMENT FUNDS APPLIED TO TRANSIT SYSTEM			
PART A. FEDERAL GOVERNMENT			
I. Funds received from UMTA Act of 1964, as amended			
01	Section 3 Funds		126,976,639
02	Section 9 Funds		59,489,445
03	Other UMTA Funds		438,803
04	Total UMTA Funds		186,895,887
II. Funds received from other Department of Transportation Grant Programs (Identify)			
05	_____		-0-
III. Other Federal Funding (Identify)			
06	_____		-0-
07	TOTAL FEDERAL ASSISTANCE		186,895,887
PART B. STATE/LOCAL GOVERNMENT		STATE GOVERNMENT	LOCAL GOVERNMENT
I. Funds allocated to transit out of the general revenues of the government entity			
08		_____	_____
II. Funds dedicated to transit at their source (Non-General Fund):			
Dedicated Taxes			
09	1. Income Taxes	_____	_____
10	2. Sales Taxes	_____	_____
11	3. Property Taxes	_____	_____
12	4. Payroll Taxes	_____	_____
13	5. Utility Taxes	_____	_____
14	6. Commuter Taxes	_____	_____
15	7. Gasoline Taxes Prop. 5/SB 620	17,310,665	_____
	8. Other Taxes (Identify)	_____	_____
	Prop. A/Art. XIX/Others 15,277,402 (a)	_____	_____
	Benefit Assessment/others 99,187,867	_____	_____
16	Total Other Taxes	15,277,402	99,187,867
17	Bridge, Tunnel, and Highway Tolls	_____	_____
III. Other Public Sources (Identify)			
	SB 90 350,094	_____	_____
	City of LA/City of El Monte/LA County/others 7,378,689	_____	_____
	SB 325 TDA 24,187,923	_____	_____
18	Total Other Public Sources	_____	31,916,706
19	TOTAL STATE/LOCAL ASSISTANCE	32,588,065	131,104,573
PART C. MISCELLANEOUS SOURCES			
Miscellaneous Sources of Funding (Identify)			

20	Total Miscellaneous Sources of Funding	_____	138,287

Date Prepared 10/15/90 Date Updated _____

(a) Prop A capital assistance are shown under Local Government subsidy. Prior

REVENUE SUMMARY SCHEDULE

Transit ID

Level

Fiscal Year End
 Month Day Year

Line No.	REVENUE OBJECT CLASSES	TOTAL REVENUE FOR PERIOD
01	401. Passenger Fares for Transit Service	239,904,679
02	402. Special Transit Fares	-0-
03	403. School Bus Service Revenues	-0-
04	404. Freight Tariffs	-0-
05	405. Charter Service Revenues	-0-
06	406. Auxiliary Transportation Revenues	4,107,858
07	407. Nontransportation Revenues	5,331,277
08	408. Taxes Levied Directly by Transit System	-0-
09	409. Local Cash Grants and Reimbursements	267,493,356
10	410. Local Special Fare Assistance	-0-
11	411. State Cash Grants and Reimbursements	-0-
12	412. State Special Fare Assistance	-0-
13	413. Federal Cash Grants and Reimbursements	48,300,147
14	430. Contributed Services	
15	Less Contra Account for Expenses	-0-
16	440. Subsidy from Other Sectors of Operations	
17	TOTAL REVENUE	565,137,317
OPTIONAL INFORMATION: Passenger Fares for Transit Service by Mode		
18	Mode Code: <input type="text" value="M"/> <input type="text" value="B"/>	239,904,679
19	<input type="text"/>	
20	<input type="text"/>	
21	<input type="text"/>	
22	<input type="text"/>	
23	<input type="text"/>	
24	<input type="text"/>	
25	<input type="text"/>	

Date Prepared 10/15/90 Date Updated _____

Transit ID

9 0 2 1

Level R

Fiscal Year End

0 6

3 0

9 0

Month

Day

Year

Line No	GOVERNMENT FUNDS APPLIED TO TRANSIT SYSTEM		
PART A. FEDERAL GOVERNMENT			
01	I. Funds received from UMTA Act of 1964, as amended Section 9 Funds		47,889,860
	II. Funds received from other Federal Programs (Identify) SECTION 8 - \$410,287		
02	Total Other Federal Funds		410,287
03	TOTAL FEDERAL ASSISTANCE		48,300,147
PART B. STATE/LOCAL GOVERNMENT			
		STATE GOVERNMENT	LOCAL GOVERNMENT
04	I. Funds allocated to transit out of the general revenues of the government entity	-0-	
	II. Funds dedicated to transit at their source (Non-General Fund):		
	Dedicated Taxes		
05	1. Income Taxes	-0-	
06	2. Sales Taxes	-0-	
07	3. Property Taxes	-0-	
08	4. Payroll Taxes	-0-	
09	5. Utility Taxes	-0-	
10	6. Commuter Taxes	-0-	
11	7. Gasoline Taxes	-0-	
	8. Other Taxes (Identify) PROP A 120,147,184		
12	Total Other Taxes	-0-	120,147,184
13	Bridge, Tunnel, and Highway Tolls	-0-	-0-
	III. Other Public Sources (Identify) TDA 145,254,681		
	Hollywood Bowl, Minibus Program 813,951		
	Others 1,277,540		
14	Total Other Public Sources	-0-	147,346,172
15	TOTAL STATE/LOCAL ASSISTANCE	-0-	267,493,356
PART C. MISCELLANEOUS SOURCES			
	Miscellaneous Sources of Funding (Identify)		
16	Total Miscellaneous Sources of Funding	-0-	-0-

Date Prepared 10/15/90

Date Updated

EXPENSES CLASSIFIED BY FUNCTION

Transit ID

9 0 2 1

Level **R**

Fiscal Year End

0 6

3 0

9 0

Month

Day

Year

Mode **MB**

Line No.	Expense Object Class	Vehicle Operations 010	Vehicle Maintenance 041	Non-Vehicle Maintenance 042	General Administration 160	Total Expense for Period
501	LABOR					
01	01 Operators' Salaries & Wages	143,991,449	-0-	-0-	-0-	143,991,449
02	02 Other Salaries & Wages	25,438,928	66,250,821	5,166,616	47,555,031	144,411,396
03	502 FRINGE BENEFITS	94,147,686	36,809,742	2,868,500	26,425,452	160,251,380
04	503 SERVICES	102,824	223,794	11,779	19,975,666	20,314,063
504	MATERIALS & SUPPLIES					
05	01 Fuel & Lubricants	20,002,419	750,673	-0-	-0-	20,753,092
06	02 Tires & Tubes	6,071,526	13,423	-0-	-0-	6,084,949
07	99 Other Materials & Supplies	1,970,945	32,068,433	4,950,664	2,622,385	41,612,427
08	505 UTILITIES	-0-	-0-	-0-	6,652,244	6,652,244
09	506 CASUALTY & LIABILITY COSTS	-0-	562,363	-0-	32,443,525	33,005,888
10	507 TAXES	1,610,067	92,126	-0-	142,026	1,844,219
508	PURCHASED TRANSPORTATION					
11	01 Less than 50 Vehicles	-0-	-0-	-0-	-0-	-0-
12	02 50 or More Vehicles	-0-	-0-	-0-	-0-	-0-
13	509 MISCELLANEOUS EXPENSE	-0-	-0-	-0-	4,979,545	4,979,545
14	510 EXPENSE TRANSFERS	1,686,761	(1,369,056)	-0-	27,641,998	(30,697,815)
15	TOTAL SYSTEM EXPENSES	291,649,083	135,402,319	12,997,559	113,153,876	553,202,837
RECONCILING ITEMS:						
16	511 INTEREST EXPENSES					8,048,76
17	512 LEASES & RENTALS					3,885,72
18	513 DEPRECIATION					48,111,49
19	513 13 Amortization of Intangibles					-0-
20	514 PURCHASE LEASE PAYMENTS					-0-
21	515 RELATED PARTIES LEASE AGREEMENT					-0-
22	516 OTHER RECONCILING ITEMS					-0-
23	TOTAL RECONCILING ITEMS					60,048,97
24	TOTAL EXPENSES FROM PUBLISHED REPORTS					613,248,81
25	MEMO ITEM: Expenses not allowable for Federal Operating Assistance					205,00

OPERATORS WAGES SUBSIDIARY SCHEDULE

Transit ID

9 0 2 1

Level

Fiscal Year End

0 6 3 0 9 0
Month Day Year

Mode

Line No.	TIME CLASSIFICATION	DOLLARS	HOURS
1.	OPERATING TIME		
01	1.01 Report time (Pull out)	2,139,389	147,511
02	1.02 Turn-in time (Pull in)	1,116,289	73,838
03	1.03 Travel time	2,889,172	195,715
04	1.04 Platform time--line service	113,905,098	7,749,173
05	1.05 Platform time--charter & special service	484	33
06	1.06 Intervening time	258,165	17,224
07	1.07 Paid breaks & meal allowance	-	-
08	1.08 Minimum guarantee for call out	-	-
09	1.09 Minimum guarantee--daily	2,496,116	169,922
10	1.10 Minimum guarantee--weekly	-	-
11	1.11 Overtime premium--scheduled	7,526,759	1,008,882
12	1.12 Overtime premium--unscheduled	3,110,435	395,241
13	1.13 Spread time premium	-	-
14	1.14 Shift premium	111	443
15	1.15 Other operating premium	3,400,443	154,059
16	TOTAL OPERATING TIME	136,842,461	
2.	NONOPERATING PAID WORK TIME		
17	2.01 Instructor premium for operator training	186,047	148,837
18	2.02 Student training time	2,741,568	301,572
19	2.03 Accident reporting time	65,373	5,149
20	2.04 Witness time	62,448	4,555
21	2.05 Stand-by time	3,542,196	258,349
22	2.06 Time spent on union functions	-	-
23	2.07 Run selection time	8,001	542
24	2.08 Other time spent in transportation administration	405,759	27,520
25	2.09 Time spent in revenue vehicle movement control	135,561	10,261
26	2.10 Time spent in ticketing and fare collection	-	-
27	2.11 Time spent in customer service	-	-
28	2.12 Time spent in other nonoperating functions	2,035	325
29	TOTAL NONOPERATING PAID WORK TIME	7,148,988	
30	TOTAL OPERATING AND NONOPERATING TIME	143,991,449	

NOT REQUIRED FROM TRANSIT SYSTEMS
WHICH OPERATE 25 OR FEWER REVENUE
VEHICLES IN ANNUAL MAXIMUM SERVICE

Form 331

FRINGE BENEFITS SUBSIDIARY SCHEDULE

Transit ID

9 0 2 1

Fiscal Year End

0 6

Month

3 0

Day

9 0

Year

Level

R

Line No.	FRINGE BENEFIT OBJECT CLASSES	EMPLOYER TOTAL	EMPLOYEE TOTAL
01	502 01 FICA or Railroad Retirement	24,452,841	24,452,841
02	502.02 Pension Plans (including long-term disability insurance)	11,699,446	6,026,474
03	502 03 Hospital, Medical, and Surgical Plans	40,004,296	946,179
04	502 04 Dental Plans	557,381	
05	502 05 Life Insurance Plans	714,892	686,240
06	502.06 Short-Term Disability Insurance	-0-	-0-
07	502.07 Unemployment Insurance	455,498	-0-
08	502.08 Workmen's Compensation Insurance or Fed. Empl. Liab. Act Contribution	35,253,324	-0-
09	502.09 Sick Leave	8,994,527	-0-
10	502.10 Holiday (including all premiums paid for work on holidays)	6,652,984	-0-
11	502.11 Vacation	23,092,563	-0-
12	502.12 Other Paid Absence (bereavement pay, military pay, jury duty pay, etc.)	5,773,246	-0-
13	502.13 Uniform and Work Clothing Allowances	1,800,377	-0-
14	502.14 Other Fringe Benefits	800,005	-0-
15	TOTAL	160,251,380	32,111,734

D Prepared 10/15/90 Date Updated _____

NOT REQUIRED FROM TRANSIT SYSTEMS
WHICH OPERATE 25 OR FEWER REVENUE
VEHICLES IN ANNUAL MAXIMUM SERVICE

PENSION PLAN QUESTIONNAIRE

Transit ID

Level

Annual Year End
Month Day Year

Line No.	ITEM	DOLLAR AMOUNT
	1. Fully Funded Plan	
01	a. Current service cost	12,888,539
02	b. Prior service cost	(1,889,704)
03	c. Interest on prior service cost	--
04	Fully Funded Plan -- Total Cost	10,998,775
		N/A
05	2. Pay-As-You-Go Plan--Total Cost	
06	TOTAL PENSION PLAN COST (Line 04 plus Line 05)	10,998,775
	3. Pension Liability (As of 12/31/89)	
07	a. Plan assets	414,468,128
08	b. Less vested benefits	406,895,586
	Unfunded Liability	-0-
	4. If you committed to a fully funded plan, please indicate the following:	
		N/A
09	a. Unfunded prior service cost	--
11	b. Years required to fully fund this cost	--
	5. If you have a pay-as-you-go-plan, please indicate the following:	
		N/A
12	a. Unfunded prior service cost	--
13	b. Years required to fully fund this cost	--
	6. If you now have a pay-as-you-go plan and you have had a recent actuarial study or other similar estimate made to determine your cost under a fully funded pension plan, please indicate what your pension plan expense <i>would have been</i> during the period under the fully funded plan:	
		N/A
14	a. Current Service Cost	
15	b. Prior Service Cost	
16	c. Interest on prior Service Cost	
	ESTIMATED TOTAL COST	

Date Prepared 10/22/90 Date Updated _____

Form 401

TRANSIT SYSTEM SERVICE PERIOD SCHEDULE

Transit ID

9	0	2	1
---	---	---	---

Level

R

Fiscal Year End

0	6	3	0	9	0
Month		Day		Year	

Mode

MB

Line No.	ITEM	WEEKDAY	SATURDAY	SUNDAY
	LIMITS OF SERVICE PERIOD:			
01	Time Morning service begins	0000	0000	0000
02	Time AM PEAK service begins	0600		
03	Time Midday service begins	0930		
04	Time PM PEAK service begins	1400		
05	Time Night service begins	1830		
06	Time Night service ends	2400	2400	2400
	TOTAL HOURS			
07	Morning period	5.0		
08	AM Peak period	3.5		
09	Midday period	4.5		
10	PM Peak period	4.5		
11	Night period	5.5		
12	ENTIRE DAY -- TOTAL HOURS	24.0	24.0	24.0

Date Prepared 10-15-90

Date Updated _____

**REVENUE VEHICLE MAINTENANCE PERFORMANCE
AND ENERGY CONSUMPTION SCHEDULE**

Transit ID

9	0	2	1
---	---	---	---

 Fiscal Year End

0	6
---	---

3	0
---	---

9	0
---	---

Month Day Year

Level

R

Mode

MB

Line No.	ITEM	AMOUNTS
	NUMBER OF ROADCALLS	
01*	For mechanical failure	19,439
02*	For other reasons	67,798
03*	TOTAL ROADCALLS	87,237
04	TOTAL LABOR HOURS FOR INSPECTION & MAINTENANCE	2,595,545
	NUMBER OF LIGHT MAINTENANCE FACILITIES	
05	Serving under 200 vehicles	5
06	Serving 200-300 vehicles	9
07	Serving more than 300 vehicles	0
08	TOTAL LIGHT MAINTENANCE FACILITIES	14
	ENERGY CONSUMPTION	
09	Kilowatt hours of propulsion power	
10	Gallons of diesel fuel	31,598,832
11*	Gallons of gasoline	
12*	Gallons of LPG or LNG	
13*	Gallons of bunker fuel	
	Methanol	709,531

*Not applicable to rail modes

Date Prepared 8-22-90 Date Updated _____

Level R

Type of Service DO

Transit ID 9 0 2 1

Fiscal Year End 0 6 3 0 9 0
Month Day Year

If PT, Name of Contractor
 (from Form 002, line 1)

Line No.	GUIDEWAY CLASSIFICATIONS RAIL MODES	DIRECTIONAL ROUTE MILES	MILES OF TRACK	NUMBER OF CROSSINGS	NUMBER OF STATIONS	AVERAGE MONTHLY DIRECTIONAL ROUTE MILES*
01	MODE CODE: RR					
02	At grade, exclusive row					
03	At grade, with cross traffic					
04	At grade, mixed & cross traffic					
05	Elevated on structure					
06	Elevated on fill					
07	Open cut					
08	Subway					
09	TOTAL					
10	MODE CODE: SC					
11	At grade, exclusive row					
12	At grade, with cross traffic					
13	At grade, mixed & cross traffic					
14	Elevated on structure					
15	Elevated on fill					
16	Open cut					
17	Subway					
18	TOTAL					
19	MODE CODE: CR					
20	At grade, exclusive row					
21	At grade, with cross traffic					
22	At grade, mixed & cross traffic					
23	Elevated on structure					
24	Elevated on fill					
25	Open cut					
26	Subway					
27	TOTAL					
28	MODE CODE: IP					
29	Exclusive ROW					
30	MODE CODE: CC					
31	Exclusive ROW					
32	MODE CODE: AG					
33	Exclusive ROW					
	NON-RAIL MODES	DIRECTIONAL ROUTE MILES ON EXCLUSIVE ROW	DIRECTIONAL ROUTE MILES ON CONTROLLED ACCESS ROW	DIRECTIONAL ROUTE MILES ON MIXED TRAFFIC ROW		
34	MODE CODE: MB	1.5	23.0	4779.53		24.5
35	TB					
36	FB					
37	TR					
38	OR					

*DO = Directly Operated Service PT = Purchased Transportation Service

**Complete column g only if there was a change (increase/decrease) in service during reporting period that affected the number of directional route miles

Form 404

TRANSIT SYSTEM EMPLOYEE EQUIVALENT SCHEDULE

Transit ID

Level

Fiscal Year End
Month Day Year

Mode

Line No	LABOR CLASSIFICATION	EMPLOYEE EQUIVALENTS	
		OPERATING LABOR	CAPITAL LABOR
01	Transportation Administration	<input type="text" value="402.4"/>	
02	Revenue Vehicle Operation	<input type="text" value="4255.0"/>	
03	Transportation Support	<input type="text" value="128.3"/>	
04	Vehicle Maintenance Administration	<input type="text" value="198.9"/>	
05	Revenue Vehicle Inspection & Maintenance	<input type="text" value="1044.3"/>	
06	Vehicle Maintenance Support	<input type="text" value="451.7"/>	
07	Non-Vehicle Maintenance Administration	<input type="text" value="12.4"/>	
08	Non-Vehicle Maintenance Support	<input type="text" value="281.2"/>	
09	Marketing and Planning	<input type="text" value="181.9"/>	
10	General Administration Support	<input type="text" value="717.1"/>	
11	TOTAL TRANSIT SYSTEM EMPLOYEE EQUIVALENTS	<input type="text" value="7663.2"/>	<input type="text" value="282.3"/>

Date Prepared 9/7/90 Date Updated _____

If FT, Name of Contractor: _____

FORM 405

TRANSIT SAFETY SCHEDULE

Transit ID

9	0	2	1
---	---	---	---

Level

R

Fiscal Year End

0	5
---	---

Month

3	0
---	---

Day

9	9
---	---

Year

Mode

MB

Line No.	ITEMS	COLLISION	FATALITIES	INJURIES
COLLISIONS:				
01	Collisions w/Other Vehicles	3,961	6	3,065
02	Collisions w/Objects	321	-0-	107
03	Collisions w/People	54	5	56
03a	(Attempted/Successful Suicides)	(-0-)	(-0-)	(-0-)
DERAILMENTS:				
04	Derailments/Buses Going off Road	1	-0-	14
PERSONAL CASUALTIES:				
05	Inside Vehicle	414	2	476
06	Boarding and Alighting Vehicle	179	-0-	224
06a	(Associated w/lifts)	(8)	(-0-)	(12)
07	In Stations/Bus Stops	85	1	42
07a	(Associated w/Escalators)	(-0-)	(-0-)	(-0-)
FIRES:				
08	In Vehicles	7	-0-	-0-
09	In Stations	-0-	-0-	-0-
09a	Right of way & Others	-0-	-0-	-0-
11	TOTAL:	5,022	14	3,994
11a	TOTAL PATRONS:		602	45,779
DOLLAR AMOUNT				
12	Transit Property Damage	N/A		

Date Prepared 9/4/90 Date Updated _____

NOTE: Please see attached explanation of assumptions and conclusions made in completing this form.

FORM 405 ATTACHMENT

The following interpretations were made in the collection of data required for the UMTA Form 405 report.

- Column b - "Collision" - This column seems to be mislabeled and interpreted to be Number of Incidents. Collision is a category in itself (lines 1 thru 3a).

- Personal Casualties:
 - o Line 5 - "Inside Vehicle" is assumed to be injuries sustained not as a result of a collision since these fatalities and injuries are already enumerated in the collision category. These incidents are on board passenger injuries not associated with collision but sustained during normal bus operations (i.e. slips and falls of passengers possibly caused by bus stopping, accelerating or turning).

 - o Line 11a - "Total Patrons" - This is assumed to be the number of patrons present in the transit vehicles involved in the incidents accounted for (this is based on the operator's estimate of passengers in his/her transit vehicle).

TRANSIT SYSTEM SERVICE SUPPLIED, SERVICE CONSUMED, SERVICE PERSONNEL, & SERVICE OPERATED SCHEDULE

Transit ID

9 0 2 1

NON-RAIL MODES

Level

Fiscal Year End

0 6 3 0 9 0
Month Day Year

Mode

Type of Service*

Line No	ITEM	AVERAGE WEEKDAY				AVERAGE WEEKDAY TOTAL	AVERAGE SATURDAY TOTAL	AVERAGE SUNDAY TOTAL	ANNUAL TOTAL
		AM PEAK	MIDDAY	PM PEAK	OTHER				
SERVICE SUPPLIED									
01	Number of vehicles in operation	1,848	1,254	1,858	1,345	1,858	1,087	863	N/A
02	Total actual vehicle miles	81,629	65,256	96,132	78,380	321,397	207,697	167,118	102,204,126
03	Total actual vehicle hours	5,808	5,395	7,729	4,842	23,774	15,721	12,207	7,564,094
04	Total actual vehicle revenue miles	68,668	61,310	84,216	54,568	268,762	184,224	150,800	36,591,596
05	Total scheduled vehicle revenue miles	69,072	61,653	84,964	54,800	270,489	185,177	151,406	87,114,958
06	Total actual vehicle revenue hours	5,288	5,240	7,232	3,906	21,666	14,796	11,743	6,953,650
07	Actual revenue capacity miles								5,701,130,681
08	Charter service hours								
09	Charter service miles								
10	School bus hours								
11	School bus miles								
SERVICE CONSUMED									
12	Unlinked passenger trips	317,657	294,786	460,050	198,136	1,270,629	846,215	591,586	401,054,720
13	Passenger miles					5,110,470	3,306,162	2,461,590	1,612,752,024
SERVICE PERSONNEL									
14	Scheduled full-time vehicle operators	1,349	1,303	1,856	1,426	2,816	1,983	1,491	
15	Scheduled part-time vehicle operators	235	- 0 -	236	- 0 -	358	253	263	
16	Revenue vehicle movement control personnel	56	99	72	104	127	66	58	
17	Ticket/token sales agents, fare collectors, gate keepers	24	39	37	4	39	7	2	
18	Route/schedule information operators	43	57	43	24	30	50	50	
19	Security agents	26	44	39	48	83	65	70	
20	Total service personnel	2,233	1,542	2,283	1,606	3,503	2,424	1,934	
SERVICE OPERATED (Days)									
21	Days schedules operated					254	52	58	364
22	Days not operated due to no scheduled services								
23	Days not operated due to start-ups and/or terminations								
24	Days not operated due to strikes								
25	Days not operated due to officially declared emergencies								
26	Days not operated due to other reasons (describe on Form 005)								
27	Total					254	52	58	365/366

REVENUE VEHICLE INVENTORY SCHEDULE

Transit ID 9021

Level R

Fiscal Year End 06/30/90
 Month Day Year

Type of Service* DO

400-50

a	b	c	d	e	f	g	h	i	j	k	l	m	n
LINE NUMBER	NUMBER OF VEHICLES IN TOTAL FLEET	VEHICLE TYPE CODE	OWNERSHIP CODE	YEAR OF MANUFACTURE	MANUFACTURER CODE	MODEL NUMBER	NUMBER OF ACTIVE VEHICLES IN FLEET	EMERGENCY CONTINGENCY VEHICLES	FUEL TYPE CODE	SEATING CAPACITY	STANDING CAPACITY	TOTAL MILES ON ACTIVE VEHICLES DURING THE PERIOD (000)	AVERAGE LIFETIME MILEAGE PER ACTIVE VEHICLE (000)
01	61	BA	00	1973	GMC	T8H5307A	38	0	DF	51	25	1,957	653
02	90	BA	00	1987	NEO	AN4403	90	0	DF	47	26	3,778	121
03	3	BA	00	1989	FLX	4102	3	0	OR	43	21	4	1
04	30	BA	00	1989	TMC	T80206	30	0	OR	43	21	693	23
05	267	BA	00	1988	TMC	T80206	267	0	DF	43	21	11,949	74
06	103	BA	00	1989	TMC	T80206	103	0	DF	43	21	2,581	26
07	150	BA	00	1988	FLX	401026C	150	0	DF	42	21	7,120	78
08	65	BA	00	1989	FLX	401026C	65	0	DF	46	22	1,357	21
09	24	BA	00	1974	GMC	T8H5307A	21	0	DF	51	25	611	548
10	18	BA	00	1974	GMC	T8H5307A	16	0	DF	51	25	503	585
11	413	BA	00	1984	NEO	AN440A	413	0	DF	43	21	19,953	314
12	61	BB	00	1984	CBW*	CBW300	47	0	DF	26	13	1,173	187
13	41	BA	00	1973	FLX	111DDD061	41	0	DF	45	22	1,036	736
14	35	BA	00	1982	GMC	T70604	35	0	DF	36	18	1,448	338
15	221	BA	00	1980	FLX	870531028V1	221	0	DF	46	23	10,083	393
16	161	BA	00	1977	AMG	10240B8	17	0	DF	47	23	1,209	389
17	933	BA	00	1981	GMC	T80204	933	0	DF	43	21	36,415	435
18	20	AB	00	1978	MAN	SG220183A	10	0	DF	65	32	195	248
19	18	DB	00	1981	NEO	N1223	18	0	DF	82	41	230	142
20	10	AB	00	1978	MAN	SG220182A	0	0	DF	65	32	116	280
21													
22	1024							2516					
23													
24													
25													

* DO = Directly Operated Service PT = Purchased Transportation Service

* CBW = Carpenter Body Works

NOTE: When reporting purchased transportation fleet, report only those vehicles that were purchased with Federal funds.

Date Prepared _____ Date Updated _____

SOUTHERN CALIFORNIA RAPID TRANSIT DISTRICT

UMTA SECTION 9 REPORT

For The Year Ended June 30, 1990



REPORT OF INDEPENDENT ACCOUNTANTS

The Board of Directors
Southern California Rapid
Transit District

We understand that the Southern California Rapid Transit District (the "District") is eligible to receive grants under Section 9 of the Urban Mass Transportation Act of 1964, as amended, and in connection therewith the District is required to report certain information to the Urban Mass Transportation Administration (UMTA).

UMTA has established the following standards with regard to the data reported to it in the Section 9 Statistics Summary, Form 006, of the District's annual Section 15 Report:

- . A system is in place and maintained for recording data in accordance with Section 15 definitions. The correct data are being measured and no systematic errors exist.
- . A system is in place to record data on a continuing basis and the data gathering is an ongoing effort.
- . Source documents are available to support the reported data and are maintained for UMTA review and audit for a minimum of 3 years following UMTA's receipt of the Section 15 report. The data are fully documented and securely stored.
- . A system of internal controls is in place to assure the accuracy of the data collection process and recording system and reported documents are not altered. Documents are reviewed and signed by a supervisor, as required.
- . The data collection methods are those suggested by UMTA or have been approved by UMTA and/or a statistical expert as being equivalent in assuring quality and precision. The collection methods documented are being followed.
- . The deadhead miles, computed as the difference between the reported total actual vehicle miles data and the reported total actual vehicle revenue miles data, appear to be accurate.
- . Data are consistent with prior reporting periods and other facts known about District operations.

We have applied the procedures documented below to the data contained in the accompanying Section 9 Statistics Summary, Form 006, for the fiscal year ended June 30, 1990. Such procedures, which were agreed to and specified by UMTA on pages 17 through 25 of the April 1990 Urban Mass Transportation Industry Uniform System of Accounts and Records and Reporting System (Reporting Manual) and were agreed to by the District, were applied to assist you in evaluating whether the District complied with the standards described in the second paragraph of this report and that the information included in the Section 15 Report Form 006 (Section 9 Statistics Summary) for the fiscal year ending June 30, 1990 is presented in conformity with the requirements of the Reporting Manual as specified in 49 CFR Part 630, Federal Register, September 25, 1987. This report is intended solely for your information and UMTA and should not be used by those who did not participate in determining the procedures.

The procedures described below, which are referenced in order to correspond to the Reporting Manual procedures, were applied separately to each of the information systems used to develop the reported vehicle revenue miles, fixed guideway directional route miles, passenger miles, and operating expenses of the District for the fiscal year ending June 30, 1990 for the motorbus directly operated mode.

- a. We obtained from Mr. Keith Killough, Planning Manager, and read a copy of the District's written procedures related to the system for reporting and maintaining data in accordance with the Section 15 requirements and definitions set forth in Title 49 CFR Part 630 (Reporting Manual Section 9 Test "a").
- b. We discussed the procedures referenced in paragraph 3., above, with Mr. Killough. We inquired of Mr. Killough whether the District followed such procedures on a continuous basis and whether he believed such procedures result in accumulation and reporting of data consistent with the Section 15 definitions and requirements set forth in Title 49 CFR Part 630. We were informed by Mr. Killough that, to the best of his knowledge, the District has followed such procedures on a continuous basis and that they result in the accumulation and reporting of data consistent with the Section 15 definitions and requirements set forth in Title 49 CFR Part 630 (Reporting Manual Section 9 Test "b").
- c. We inquired of Mr. Killough concerning the retention policy that is followed by the District with respect to source documents supporting the Section 15 data reported on Form 006. Mr. Killough informed us that source documents would be retained for at least three years following UMTA's acknowledged receipts of the Section 15 report.

We located and observed the source documents supporting the Section 15 data reported on Form 006 for the years ended June 30, 1990, July 1, 1989, and July 2, 1988, and found them properly retained (Reporting Manual Section 9 Test "c").

- d. Based on the description of the District's procedures obtained as described in procedures 3. and 4., above, we identified the following source documents for retention by the District for a minimum of three years:

Statistical data files maintained on the District's on-line IBM system. With respect to passenger miles, the source documents are files containing data from Ride Checks and Fare Surveys. For vehicle revenue miles, the source document is the file containing Basic Operating Schedules.

We selected the months of September 1989, January 1990 and May 1990 and observed that each type of source document exists for each of these periods (Reporting Manual Section 9 Test "d").

- e. We discussed the District's system of internal controls with Mr. Killough. We inquired whether individuals, independent of the individuals preparing the source documents and posting the data summaries, reviewed the source documents and data summaries for completeness, accuracy, and reasonableness and how often such reviews are performed. We were informed by Mr. Killough that all source documents and data summaries are reviewed for completeness and reasonableness by personnel either in the Planning Department or Scheduling Department (Reporting Manual Section 9 Test "e").
- f. We reviewed source documents and data summaries and noted that such reviews as indicated in step e are not documented as being completed. However, in connection with reviewing such procedures in place, nothing came to our attention that caused us to believe that procedures were not being performed (Reporting Manual Section 9 Test "f").
- g. We obtained the worksheets utilized by the District to prepare the final data which are transcribed onto Form 006, Section 9 Statistics Summary. We compared the periodic data included on the worksheets to the periodic summaries prepared by the District and proved the arithmetic accuracy of the summarizations. We noted no deviations (Reporting Manual Section 9 Test "g").
- h. We discussed the District's procedures for accumulating and recording passenger mile data in accordance with Section 15 requirements with Mr. Killough. We were informed that passenger mile data was accumulated as follows: "The District utilizes sampling and estimation procedures that are an alternative to the three sampling procedures suggested by UMTA.

The District has received correspondence from UMTA which allows for self-certification of passenger mile data based on certification that required statistical levels are met. We were informed by Mr. Killough that the sampling methodology and estimation procedures were reviewed by Multisystems, Inc., together with Northeastern University, and found to yield unbiased estimates whose accuracy exceeds UMTA's accuracy standard of $\pm 10\%$ precision at a 95% confidence level; in fact, the sample size is so large that, combined with the revenue-based estimation used, the precision at the 95% confidence level is below 2% (Reporting Manual Section 9 Test "h").

- i. We discussed with Mr. Killough the eligibility of the District to conduct statistical sampling for passenger mile data every third year under the guidelines promulgated by UMTA in Title 49 CFR Part 630 and he informed us that the District is not eligible to conduct statistical sampling for passenger mile data every third year because it meets none of the criteria necessary for it to qualify for such treatment (Reporting Manual Section 9 Test "i").
- j. We obtained a copy of the sampling procedures for the estimation of passenger mile data used by the District and a copy of the District's methodology for calculating passenger mile data from Mr. Killough. We reviewed the procedures used to select the actual sample of runs for recording passenger boardings used to prepare the sample of runs from the total population of runs. We reviewed the methodology used to randomly select specific runs from the universe. We reviewed the procedure used to replace a missed sample run with a randomly selected replacement sample run. We noted no exceptions to the stated sampling procedure (Reporting Manual Section 9 Test "j").
- k. We selected a random sample of the source documents used for accumulating passenger mile data and reviewed the selected documents to determine if all required data were recorded and if computations were accurately performed. Our sample consisted of seven percent of the fare surveys conducted and eleven percent of the ride checks conducted.

The District accumulates passenger mile data on an annual basis, rather than by periods. We tested the accumulation of such data on an annual basis. We noted no exceptions in performing the above (Reporting Manual Section 9 Test "k").

- l. We discussed the procedures for systematic exclusions of charter and school bus vehicle miles from the calculation of vehicle revenue miles with Mr. Killough.

We were informed by Mr. Killough that the District does not operate charter bus and/or school bus service. In connection with performing the procedures referred to in this report, nothing came to our attention that caused us to believe that the District operated charter bus and/or school bus service during the year ended June 30, 1990 (Reporting Manual Section 9 Test "l").

- m. We obtained a copy of the District's procedures for accumulating and reporting vehicle revenue mile data and discussed them with Mr. Killough. We were informed by Mr. Killough that the District calculates vehicle revenue miles by aggregating the revenue service distances traveled by the District's bus lines as documented in each lines' Basic Operating Schedule. The aggregate amount is reduced by non-revenue service miles such as missed trips and maintenance runs. We selected a random sample of five of the days that service was operated during the year and recomputed the arithmetical accuracy of the summarization of vehicle revenue miles (Reporting Manual Section 9 Test "m"); no exceptions were noted.

- n. We discussed the procedures for the recording and accumulation of vehicle revenue mile data for rail modes with Mr. Killough.

We were informed by Mr. Killough that the District did not operate rail modes during the year ended June 30, 1990. In connection with performing the procedures referred to in this report, nothing came to our attention that caused us to believe that the District operated rail modes during the year ended June 30, 1990 (Reporting Manual Section 9 Test "n").

- o. We discussed the District's procedures for accumulating and reporting fixed guideway directional route miles with Mr. Killough. He informed us that the District's motor bus service meets the UMTA's definition of fixed guideway service contained in UMTA Circular C 9030.1A, "Section 9 Formula Grant Application Instructions," Appendix C, pages 11-13 in that the service is motor bus service operating over exclusive and controlled access rights of way and access is restricted, there is a legitimate need for restricted access, as demonstrated by peak periods level of service traffic condition F on parallel adjacent highway, and restricted access is enforced (Reporting Manual Section 9 Test "o").

- p. We discussed the measurement of fixed guideway directional route miles with Mr. Killough. We were informed that fixed guideway directional route mileage is computed in accordance with UMTA's definitions of fixed guideway and directional route miles contained in UMTA Circular C 9030.1A, Section 9 Formula Grant Application Instructions, Appendix C, pages 11-13.

We inquired whether there were any service changes during the year that resulted in an increase or decrease in vehicle revenue miles operated on a fixed guideway. We were informed that the I-10 busway (El Monte) service increased by one mile. In connection with performing the procedures referred to in this report, nothing came to our attention that caused us to believe that the District incurred any other changes in service during the year that resulted in an increase or decrease in directional route miles (Reporting Manual Section 9 Test "p").

- q. We measured fixed guideway directional route miles by tracing maps of fixed guideway service. We agreed the fixed guideway directional route miles we obtained above to that reported on the District's Section 15 Form 006, Section 9 Statistics Summary (Reporting Manual Section 9 Test "q").
- r. We inquired of Mr. Killough whether other public transit agencies operate service over the same fixed guideway as the District. We were informed that Embree-Mark IV, under a contract from the County of Los Angeles, operated service over the same fixed guideway under the name Foothill Transit. In connection with performing the procedures referred to in this report, nothing came to our attention that caused us to believe that any other public transit agency operated service over the same fixed guideway as the District (Reporting Manual Section 9 Test "r").
- s. We agreed Operating Expenses as reported on Section 15 Form 006, "Section 9 Statistic Summary," to operating expenses reported on the District's financial statements, on which we rendered our report dated August 31, 1990, after reconciling for adjusting items in accordance with the procedures discussed in the Reporting Manual, Section V., "Expense Reporting Forms" (Reporting Manual Section 9 Test "s").
- t. We inquired of Mr. Killough whether the District contracts for transportation service. We were informed that the District does not contract for transportation service. In connection with performing the procedures referred to in this report, nothing came to our attention that caused us to believe that the District contracts for transportation service (Reporting Manual Section 9 Test "t").
- u. As noted in step "t", the District does not contract for transportation service, and therefore certification of data for contracted services is not included with this report (Report Manual Section 9 Test "u").
- v. As noted in step "t", the District does not contract for transportation service, and therefore no contracts for service were reviewed (Reporting Manual Section 9 Test "v").

- w. We inquired of Mr. Killough if the District provides service in more than one urbanized area, or an urbanized area and a non-urbanized area. We were informed that the District serves the Los Angeles-Long Beach, Oxnard-Ventura-Thousand Oaks and San Bernardino-Riverside urbanized areas. We obtained the procedures for allocation of statistics between urbanized areas. We obtained and reviewed the worksheets and route maps and urbanized area boundaries used for allocating the statistics. The procedures utilized by the District for allocation of statistics between urbanized areas appears proper and we noted no exceptions to procedures (Reporting Manual Section 9 Test "w").
- x. We compared the data reported on Form 006, Section 9 Statistics Summary, for the year ended June 30, 1990 to comparable data reported for the year ended July 1, 1989 and calculated the percentage change from the prior year to the current year.

Vehicle revenue miles, passenger miles, and operating expense data have not increased or decreased by more than 10 percent. In connection with performing the procedures referred to in this report, nothing came to our attention that caused us to believe that any of the above statistics should have changed more than the mentioned limits.

Fixed guideway vehicle revenue miles and passenger miles data have increased 5.8 and 3.0 percent, respectively. We inquired of Mr. Killough regarding the specifics of operations that led to the increase in the data relative to the prior reporting period. He indicated that the increase was due to an extension of the El Monte Busway. In prior years, the Busway ended at Mission Road and Elliot Street. However, beginning September 5, 1989, the western end of the busway was extended to Alameda Street and Arcadia Street. His explanation of changes appeared reasonable and consistent with other information we obtained in performing the procedures referred to in this report (Reporting Manual Section 9 Test "x").

The agreed-upon procedures are substantially less in scope than an examination, the objective of which is an expression of an opinion on Form 006, Section 9 Statistics Summary. Accordingly, we do not express such an opinion. Also, we do not express an opinion on the District's internal control structure taken as a whole.

In performing the procedures, except for the information and findings described above, no matters came to our attention that caused us to believe that the information included in the Section 15 Report on Form 006 (Section 9 Statistics Summary) for the year ended June 30, 1990 is not presented in conformity with the requirements of the Urban Mass Transportation Administration Uniform System of Accounts and Records and Reporting System as specified in 49 CFR Part 630, Federal Register, September 25, 1987. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you. This report relates only to the information described above, and does not extend to the District's general purpose financial statements taken as a whole, or the forms in the District's Section 15 Report other than Form 006, Section 9 Statistics Summary, for any date or period.

Coopers & Lybrand

Los Angeles, California
October 5, 1990

Our comments and findings based upon the above procedures are as follows:

Finding

Description

f.

Though the client represents that such reviews are performed, there is no evidence of supervisory review in the accumulation of Section 9 data. This finding is consistent with that of prior year, as noted in the 1989 Section 15 report certified by Coopers & Lybrand.



