DLN: 93493148010170 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2019 , and ending 12-31-2019 C Name of organization D Employer identification number B Check if applicable Las Vegas Monorail Company □ Address change 88-0471789 % SIM SALZMAN ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 3770 HOWARD HUGHES PARKWAY Suite 29 ☐ Amended return ☐ Application pending (702) 699-8200 City or town, state or province, country, and ZIP or foreign postal code Las Vegas, NV $\,$ 89169 $\,$ G Gross receipts \$ 22,663,403 Name and address of principal officer H(a) Is this a group return for CURTIS L MYLES III ☐Yes **☑**No subordinates? 3770 HOWARD HUGHES PARKWAY H(b) Are all subordinates Las Vegas, NV 89169 ☐ Yes ☐No ıncluded? ☐ 501(c)(3) **☑** 501(c) (4) **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW LVMONORAIL COM L Year of formation 1993 M State of legal domicile NV K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities TO PROMOTE PUBLIC TRANSPORTATION CONSISTENT WITH THE OVERALL TRANSPORTATION OBJECTIVES OF CLARK COUNTY, NEVADA Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 4 4 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2019 (Part V, line 2a) Total number of volunteers (estimate if necessary) . . . 6 0 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 **b** Net unrelated business taxable income from Form 990-T, line 39 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . Ravenua 22,517,442 Program service revenue (Part VIII, line 2g) . 21,229,483 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 127,658 145,961 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 281 21,357,422 22,663,403 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 10,080,317 10,417,235 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 29,504,992 27,900,784 39,585,309 38,318,019 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . -18,227,887 -15,654,616 Net Assets or Fund Balances Beginning of Current Year End of Year 214,362,323 204,425,627 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 17,137,467 22,821,830 197,224,856 181,603,797 Net assets or fund balances Subtract line 21 from line 20 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2020-05-26 Signature of officer Sign Here CURTIS L MYLES III PRESIDENT & CEO Type or print name and title Print/Type preparer's name Preparer's signature Check | If 2020-05-22 P01871563 Paid self-employed Firm's name BDO USA LLP Firm's EIN ▶ Preparer Use Only Firm's address ▶ 3570 Carmel Mountain Rd 400 Phone no (858) 404-9200 San Diego, CA 92130 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2019)

Form	990 (2019)					Page 2
Pa	rt III Statement	of Program Service	e Accomplis	hments		
	Check If Sche	edule O contains a resp	onse or note to	any line in this Part III .		🗆
1	Briefly describe the o	organization's mission				
TO P	ROMOTE PUBLIC TRAN	SPORTATION CONSIST	TENT WITH THE	OVERALL TRANSPORTA	TION OBJECTIVES OF CLARK COU	INTY, NEVADA
2	-	, -		vices during the year wh	nich were not listed on	
	the prior Form 990 o					☐ Yes 🗹 No
_		ese new services on Sci				
3			nake significant	changes in how it condu	icts, any program	
	services?					🗌 Yes 🗹 No
_		ese changes on Schedu				
4	Section 501(c)(3) ar		ons are required	to report the amount o	largest program services, as meas f grants and allocations to others,	
4a	(Code) (Expenses \$	31,321,300	including grants of \$) (Revenue \$	21,267,317)
	See Additional Data					
4b	(Code) (Expenses \$	145,910	ıncludıng grants of \$) (Revenue \$	1,250,125)
	See Additional Data					
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
	-					
4d	Other program servi	ces (Describe in Sched	ule O)			_
	(Expenses \$	ınc	luding grants of	\$) (Revenue \$)
4e	Total program ser	vice expenses >	31,467,2	10		
						Form 990 (2019)

Nο

No

No

Nο

No

Nο

Yes

Nο

No

Nο

Nο

No

Nο

No

Nο

Nο

No

Nο

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12b

13

14a

20a

20h

21

Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete No 1 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . No Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates Nο

3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4

election in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III . . . 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete

6 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 뉯 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8

Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation 9

10

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V 🛸 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable 11a 11b assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸 11c total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 😼

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Yes b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total No Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its No d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported Nο 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏 11e Yes Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses Nο

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🥦 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a b Was the organization included in consolidated, independent audited financial statements for the tax year?

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any 15 foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to 16

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🥦

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

20a Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H* . . .

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII.

18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

Form	990 (2019)			Page 4
Par	tiV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L</i> ,Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Yes

Yes (2019)

48

0

1c

1a

1b

No

Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V $\,$.

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

Part V

OHIII	990 (2019)			Page 5
Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	4a		No
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7f		
_	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O	16		No

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Pai	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI	•	onse to	lınes 🗸
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 7]		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Sa	ection B. Policies (This Section B requests information about policies not required by the Internal Revenue	_	٠ ١	110
30	ction b. Poncies (This Section & requests information about policies not required by the Internal Revenue		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the	10b		
	form?	11a		No
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		No
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c		
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	1
	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			

status with respect to such arrangements?

List the states with which a copy of this Form 990 is required to be filed▶

Section C. Disclosure

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Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply

☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

19

20

State the name, address, and telephone number of the person who possesses the organization's books and records SIM SALZMAN 3770 HOWARD HUGHES PARKWAY 295 LAS VEGAS, NV 89169 (702) 699-8200

Form **990** (2019)

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII $\,$.

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount
- of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid • List all of the organization's current key employees, if any See instructions for definition of "key employee"

who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the

- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- organization and any related organizations List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations • List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
- organization, more than \$10,000 of reportable compensation from the organization and any related organizations
- See instructions for the order in which to list the persons above

See instructions for the order in which to list the	persons above									
\square Check this box if neither the organization no	r any related or	ganızat	ion c	omp	ens	ated a	any o	current officer, dire	ctor, or trustee	
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	pers	n on on is	e bo both	t che x, u n an	m ss ce e Highest compensated	er	(D) Reportable compensation from the organization (W-2/1099- MISC)	(E) Reportable compensation from related organizations (W-2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) CURTIS L MYLES III PRESIDENT & CEO	50 0			х				417,382	0	37,247
(2) PETER MCCANN SR VP & COO	50 0			×				279,359	0	43,537
(3) INGRID REISMAN SR VP OF CORP COMMUNICATIONS	50 0			х				274,579	0	32,319
(4) BARRICK NEILL VP OF OPERATIONS	50 0			×				244,015	0	30,752
(5) SIMEON SALZMAN CFO	50 0			×				174,346	0	38,077
(6) ANTHONY CHARLES IT Director	40 0					х		130,268	0	0
(7) HENRY DUFRESNE Director of Maintenance	40 0					х		114,383	0	0
(8) ERIC STONE Senior Maintenance Engineer	40 0					х		108,008	0	0
(9) Kenneth Freano DIRECTOR OF ENGINEERING	40 0					х		105,000	0	0
(10) Heather Abel SALES MANAGER	40 0					x		104,884	0	0
(11) DONALD SHALMY CHAIRMAN	10	х						42,000	0	0

0 0 10 (12) BRUCE WOODBURY 42,000 DIRECTOR 0.0 1 0 (13) VIRGINIA VALETINE 0 0 Х 42,000 DIRECTOR 0 0 1 0 (14) MARK RUSSELL 42,000 0 0 DIRECTOR 0 0 1 0 (15) MICHAEL SOLOW 38.500 0 0 Х DIRECTOR 0 0 1 0 (16) RYAN HAMMER 38,500 0 0 Director (1/1/19-11/30/19) 0.0 1 0 (17) ROBERT MANZO Х 24.500 0 DIRECTOR (1/1/19 - 7/31/19) 0 0 Form **990** (2019)

9211 Paysphere Circle CHICAGO, IL 60674

compensation from the organization ▶ 7

Name and title

Part VII

(F) Estimated

Page 8

	hours per week (list any hours			n of	fice	and a		compensation from the organization	compensation from related organizations	ed compensations from the		sation the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)		organizat relat organiza	ed
(18) Frank Chin								14,000		0		(
Director (19) Dan Walsh		×						3,500		0		(
Director	0 0											
1b Sub-Total			•	<u>. </u>	1	<u> </u>						
c Total from continuation sheets to Part \	•				1	-		2 220 224	0			101.00
d Total (add lines 1b and 1c) Total number of individuals (including but of reportable compensation from the organization)					/e) v	vho re	ceiv	2,239,224 ed more than \$100		<u> </u>		181,932
									-		Yes	No
3 Did the organization list any former offic line 1a? If "Yes," complete Schedule J for						e, or h	_	· ·	nployee on	3		No
For any individual listed on line 1a, is the organization and related organizations grandividual									he • • •	4	Yes	
5 Did any person listed on line 1a receive o services rendered to the organization? If '										5		No
Section B. Independent Contractors									<u> </u>			
Complete this table for your five highest of from the organization. Report compensat.										pen	sation	
	(A) ousiness address							'	(B) tion of services		(C Compen	sation
Stradling Yocca Carlson, 600 Newport Center Drive Ste 1600 NEWPORT BEACH, CA 92660								Bond Counsel				378,131
UMB Bank, 5555 San Felipe Suite 870 HOUSTON, TX 77056								Bond Trustee -	2019			513,449
Wells Fargo Trustee, 600 South 4th Street 6th Floor MINNEAPOLIS, MN 55479				_	_		_	Bond Trustee -	2012			467,167
Willis Insurance Services, PO Box 101162 PASADENA, CA 91189								Insurance Prer	niums			460,730
Roller Bearing Company of America, 9211 Paysphere Circle								Train Bearings				246,355

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Position (do not check more

(D)

Reportable

Reportable

(B)

Average

		(2019)							Page 9
Part	VIII								
		Check If Sched	dule O contains	a respo	onse or note to an	y line in this Part VIII (A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
(4)	1 a	Federated campa	aigns	1a			revenue		512 - 514
ants	ı	b Membership dues	s	1b					
tributions, Gifts, Grants Other Similar Amounts	١,	c Fundraising even	nts	1c					
ifts, ar A	(d Related organiza	tions	1d					
<u>™</u> .6	•	e Government grants	(contributions)	1e					
Sign	1	 All other contribution and similar amounts 	ons, gifts, grants, s not included	1f					
but the	(above g Noncash contributio	ons included in						
Contributions, Gifts, Grants and Other Similar Amounts	-	lines 1a - 1f \$		1 g					
Cont	ا	h Total. Add lines :	1a-1f	•	•	0			
					Business Code	21,267,317	21,267,317		
a.	2a	PUBLIC TRANSPORTA	ATION		485000	21,267,317	21,267,317		
Program Service Revenue	ь	ADVERTISING			541800	1,250,125	1,250,125		
æ					_				
MCE	С								
Ser	d								
ranı									
Prος	е								
	f	All other program	service revenue	2					
		Total. Add lines 2			22,517,442	_	1	ı	1
	3 1	Investment income similar amounts)	(including divid			145,96	1		145,961
		Income from invest	tment of tax-exe	empt b	ond proceeds	· <u> </u>	0		
	5	Royalties	(ı) Re		(II) Personal	▶	0		
				aı	(II) Personal	_			
		Gross rents Less rental	6a			_			
	D	expenses	6b						
	С	Rental income or (loss)	6c	(0			
	d	Net rental income	e or (loss)			_	0		
			(ı) Secu	rities	(II) Other				
	7a	Gross amount from sales of	7a						
		assets other than inventory							
	b	Less cost or other basis and	7Ь						
		sales expenses				_			
		Gain or (loss)	7c						
		Net gain or (loss) Gross income from fu		_	· · · >	_	0		
ine	O.a	(not including \$	of						
.ven		contributions reported See Part IV, line 18	a on line 1c)	8a		0			
Re	b	Less direct expen	ises	8b		0			
Other Revenue	C	: Net income or (los	ss) from fundrais	sing ev	ents 🕨	1	0		
	9a	Gross income from							
		See Part IV, line 19		9a		0 0			
		Less direct expen : Net income or (los		9b activit	l .		0		
	10a	aGross sales of inve returns and allowa		10a		0			
	b	Less cost of good	s sold	10b	-	0			
	С	Net income or (los		invent	tory ►	_	0		
	11	Miscellaneo	us Revenue		Business Code	_			
		-							
	b	,					+		
	c	:					1		
	_	All other revenue							
		Total. Add lines 1			•		0		
	12	Total revenue. S	ee instructions	• •	•	22,663,40	22,517,442		145,961
									Form 990 (2019)

Form 990 (2019)				Page 10
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must c				ımn (A)
Check if Schedule O contains a response or note to an	y line in this Part IX	(B)	(C)	⊔ (D)
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0			
2 Grants and other assistance to domestic individuals See Part IV, line 22	0			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	2,097,452		2,097,452	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	5,871,092	3,855,367	2,015,725	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	0			
9 Other employee benefits	1,846,859	1,109,086	737,773	
10 Payroll taxes	601,832	334,003	267,829	
11 Fees for services (non-employees)				
a Management	0			
b Legal	162,168		162,168	
c Accounting	65,230		65,230	
d Lobbying	15,590		15,590	
e Professional fundraising services See Part IV, line 17	0			
f Investment management fees	0			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	265,389		265,389	
12 Advertising and promotion	764,982		764,982	
13 Office expenses	129,478		129,478	
14 Information technology	158,235		158,235	
15 Royalties	0			
16 Occupancy	136,929		136,929	
17 Travel	34,029		34,029	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	0			
20 Interest	959,282	959,282		
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	16,178,027	16,178,027		
23 Insurance	1,302,785	1,302,785		
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e				
expenses on Schedule O) a OPERATIONS & MAINTENANCE	5,587,891	5,587,891		0
a of ENATIONS & PININTENANCE	3,307,031	3,307,031		O .
b FARE COLLECTION COSTS	737,403	737,403		0

1,257,456

145,910

38,318,019

1,257,456

145,910

31,467,210

6,850,809

0

0

0

Form **990** (2019)

d PRODUCTION EXPENSES

25 Total functional expenses. Add lines 1 through 24e

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

c FINANCING COSTS

e All other expenses

Forn	n 990	(2019)					Page 11
Р	art X	Balance Sheet					
		Check if Schedule O contains a response or not	e to ar	ny line in this Part IX			🗆
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			607,576	1	2,092,887
	2	Savings and temporary cash investments .			6,217,159	2	8,681,136
	3	Pledges and grants receivable, net			0	3	0
	4	Accounts receivable, net			501,300	4	907,475
	5	Loans and other payables to any current or forn key employee, creator or founder, substantial contity or family member of any of these persons Loans and other receivables from other disquali	ontribu s .	tor, or 35% controlled	0	5	0
	"	section $4958(f)(1)$), and persons described in se			0	6	0
s	7	Notes and loans receivable, net			0	7	0
ssets	8	Inventories for sale or use			0	8	0
SS	9	Prepaid expenses and deferred charges			659,401	9	773,757
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	516,308,537			
	ь	Less accumulated depreciation	10b	325,637,189	205,034,916	10c	190,671,348
	11	Investments—publicly traded securities .			0	11	0
	12	Investments—other securities See Part IV, line	11 .	[0	12	0
	13	Investments—program-related See Part IV, line	11 .		0	13	0
	14	Intangible assets		[0	14	0

15

16

17

18

19

20

21

23

24

26

27

28

31

32

33

Liabilities 22

Fund Balances

ō 29

Assets 30 Other assets See Part IV, line 11 . . .

or family member of any of these persons

and other liabilities not included on lines 17 - 24)

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Accounts payable and accrued expenses

Grants payable .

Deferred revenue . .

Tax-exempt bond liabilities .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances .

Total liabilities and net assets/fund balances

Total assets. Add lines 1 through 15 (must equal line 34)

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that follow FASB ASC 958, check here

Organizations that do not follow FASB ASC 958, check here ▶

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

Other liabilities (including federal income tax, payables to related third parties,

1,341,971

4,633,924

12,387,500

17,137,467

-205,783

197,430,639

197,224,856

214,362,323

116,043

0 19

214,362,323

15

16

17 18

20 0

21

22 23

24

25

26

27

28

29

30

31

32

33

1,299,024

1,975,652

1,254,076 19.454.666

0

0

113,188

24,248

22.821.830

1,819,166

179,784,631

181,603,797

204,425,627 Form **990** (2019)

204,425,627

3a

3b

No

Form 990 (2019)

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Audit Act and OMB Circular A-133?

Additional Data

Software ID: Software Version:

EIN: 88-0471789

Name: Las Vegas Monorail Company

Form 990 (2019)

Form 990, Part III, Line 4a:

TICKET SAIES - TICKET SALES ARE THE MAIN SOURCE OF REVENUE FOR THE LAS VEGAS MONORAIL COMPANY. THE ORGANIZATION SELLS TICKETS TO RIDERS OF THE MONORAIL TRANSPORTATION SYSTEM, WHICH CARRIED 4,635,663 RIDERS IN 2019

Form 990, Part III, Line 4b: Advertising - ADVERTISING IS A SECONDARY SOURCE OF REVENUE FOR THE LAS VEGAS MONORAIL COMPANY. THE ORGANIZATION SELLS SPACE TO ADVERTISERS ON THE TRAINS AND STATIONS

SCHEDULE D

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

DLN: 93493148010170

2019

OMB No 1545-0047

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

(Form 990)

•		► Attach to Form 9		the latest infor	matic	n.		n to Public spection
	and Revenue Service	ior manuction	anu	the latest million			entification	
	Vegas Monorall Company				-	<u>-</u>		
Ρa	art I Organizations Maintaining Donor Advi	sed Funds or Otl	her Si	milar Funds o		471789 nunts		
	Complete if the organization answered "Ye				, Acc			
		(a) Donor	advise	d funds	1	(b) Fund	s and other	accounts
L	Total number at end of year							
2	Aggregate value of contributions to (during year)							
3	Aggregate value of grants from (during year)							
1	Aggregate value at end of year							
5	Did the organization inform all donors and donor adviso organization's property, subject to the organization's ex			held in donor ad	lvised fi	unds are		Yes 🗌 No
5	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?						missible	Yes 🗌 No
Рa	rt II Conservation Easements. Complete if the organization answered "Ye	s" on Form 990, F	Part IV	, line 7.				
L	Purpose(s) of conservation easements held by the organ	nization (check all th	at appl	y)				
	\square Preservation of land for public use (e g , recreation	n or education)	□ P	reservation of an	histori	cally imp	ortant land a	area
	Protection of natural habitat		Р	reservation of a c	ertified	historic	structure	
	Preservation of open space							
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservation	on cont	ribution in the for	m of a		ation at the End o	of the Year
а	Total number of conservation easements				2a			
b	Total acreage restricted by conservation easements				2b			
c	Number of conservation easements on a certified histori	c structure included	ın (a)		2c			
d	Number of conservation easements included in (c) acquistructure listed in the National Register	red after 7/25/06, a	nd not	on a historic	2d			
3	Number of conservation easements modified, transferre tax year ▶	ed, released, extingui	ıshed, d	or terminated by	the org	anızatıon	during the	
1	Number of states where property subject to conservatio	n easement is locate	ed 🕨					
5	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds		ng, insp	ection, handling o	of viola	tions,	☐ Yes	□ No
=	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of vio	lations.	and enforcing co	onserva	tion ease		
,	<u> </u>			_				
7	Amount of expenses incurred in monitoring, inspecting, \$	handling of violation	ns, and	enforcing conserv	vation 6	easement:	ts during the	e year
3	Does each conservation easement reported on line 2(d) and section $170(h)(4)(B)(II)^{2}$	above satisfy the re	quirem	ents of section 1	70(h)(4	·)(B)(ı)	☐ Yes	□ No
•	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	footnote to the orga						
Par	rt III Organizations Maintaining Collections Complete if the organization answered "Ye				er Sin	nilar As	sets.	
La	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finan	public exhibition, ed	lucation	, or research in f				
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for pub following amounts relating to these items							
((i) Revenue included on Form 990, Part VIII, line 1					▶ \$		
(1	ii)Assets included in Form 990, Part X					▶ \$		
2	If the organization received or held works of art, historic following amounts required to be reported under SFAS:				ncıal ga	ıın, provi	de the	
а	Revenue included on Form 990, Part VIII, line 1	·				▶ \$		
h	Assets included in Form 990 Part X					▶ ¢		

Cat No 52283D

Schedule D (Form 990) 2019

 $\boldsymbol{c} \;\; \text{Leasehold improvements}$

 ${f d}$ Equipment

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) .

Jene	dule D	(101111 330) 2013												Page Z
Par	1111	Organizations Ma	aintaining Col	lections o	of Art, H	istori	cal Tı	easu	res, o	r Othe	r Similar A	ssets (continue	ed)
3		the organization's acq (check all that apply)	uisition, accessior	n, and other	records,		any of	the fol	lowing	that are	a significant	use of it	s collect	ion
а		Public exhibition				d		Loan	or exch	ange pr	ograms			
b		Scholarly research				е		Other						
С		Preservation for future	generations											
4	Provid Part X	de a description of the o	organization's col	lections and	d explain h	now the	y furth	er the	organı	zation's	exempt purp	ose in		
5		g the year, did the orga s to be sold to raise fur									ımılar	□ Y.	es [□ No
Pai	rt IV	Escrow and Cust Complete if the org X, line 21.			" on For	m 990	, Part	IV, lır	ne 9, o	r repor	ted an amo	unt on	Form 9	90, Part
1a		organization an agent led on Form 990, Part)		an or other	ıntermedi	ary for	contril	outions	or oth	er asset	s not	□ Y	es [□ No
Ь	If "Ye	s," explain the arrange	ment in Part XIII	and comple	ete the fo	llowing	table					Amount		
С		ning balance		'						1c				
d	Addıtı	ons during the year								1d				
е	Distrib	butions during the year								1e				
f	Endin	g balance								1 f				
2a	Did th	ne organization include	an amount on Fo	rm 990, Pai	rt X, line i	21, for	escrow	or cus	stodial a	account	liability?	□ Y ₆	es [□ No
b		s," explain the arrange										_		
Pa	rt V	Endowment Fund												
		Complete of the org	ganization answ	ered "Yes	on For									
	_	6 1 1		(a) Currer	nt year	(b) P	rıor yea	r (c) Two y	ears bac	k (d) Three ye	ears back	(e) Four	r years back
	-	ing of year balance .						_						
		utions												
		estment earnings, gair	·											
		or scholarships						_						
		expenditures for facilities ograms	es											
f	Admini	strative expenses .												
g	End of	year balance												
2	Provid	de the estimated percei	ntage of the curre	ent year end	d balance	(line 1g	g, colu	mn (a)) held a	as				
а	Board	designated or quasi-e	ndowment 🟲											
b	Perma	anent endowment ►												
С	Temp	orarily restricted endov	vment 🕨											
	The p	ercentages on lines 2a,	, 2b, and 2c shou	ld equal 100	0%									
3а		nere endowment funds Ization by	not in the posses	sion of the	organızatı	on that	are h	eld and	dadmin	istered	for the		Y	es No
	(i) un	related organizations											a(i)	
		elated organizations .											a(ii)	
ь 4		s" on 3a(II), are the rel Ibe In Part XIII the Inte	-					· ·				. L	3b	
	t VI	Land, Buildings,			iii s eiluov	villelic	unus							
		Complete if the or	ganization answ	ered "Yes										
	Descri	ption of property	(a) Cost or oth (investme		(b) Cost	or other	basis (other)	(c) Acc	cumulated	d depreciation		(d) Book	value
1 a	Land						12	5,000						125,000
b	Building	gs												

181,637

516,001,900

169,041

325,468,148

12,596

190,533,752

190,671,348

Part VII	Investments—Other Securities. Complete if the organization answered "Yes" on Form 990,	Part IV, line	e 11b.See Form 990, F	Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Metho	d of valuation -year market value
-	ll derivatives			
<i>A</i>)				
3)				
()				
))				
:)				
·)				
5)				
1)				
	n (b) must equal Form 990, Part X, col (B) line 12)	•		
art VIII	Complete if the organization answered 'Yes' on Form 990,	Part IV, line		
	(a) Description of investment		(b) Book value	(c) Method of valuation Cost or end-of-year marke value
L)				
2)				
3)				
1)				
5)				
5)				
')				
3)				
))				
Part IX	Other Assets. Complete if the organization answered 'Yes' on Form 990, F	Part IV, line	▶ 11d. See Form 990, Par	t X, line 15
L)	(a) Description			(b) Book value
2)				
3)				
1)				
5)				
5)				
7)				
3)				
9)				
otal. (Colu	mn (b) must equal Form 990, Part X, col (B) line 15)			>
Part X	Other Liabilities. Complete if the organization answered 'Yes' on Form 990, P	art IV, line	11e or 11f.See Form	990, Part X, line 25.
	(a) Description of liability	,		(b) Book value
L) Federal 2)	income taxes			
3)				
1)				
5)				
5)				
7)				
В)				
9)				
	n (b) must equal Form 990, Part X, col (B) line 25)		•	24,24
	or uncertain tax positions In Part XIII, provide the text of the footnot 's liability for uncertain tax positions under FIN 48 (ASC 740) Check			

Schedule D (Form 990) 2019

Part XI

2

b

5

1

2

c

d

3

5

Part XIII

See Additional Data Table

Part XII

Page 4

33,557

145,910

22,663,403

38,172,109

38,172,109

145,910

38.318.019

Schedule D (Form 990) 2019

22,517,493

	3
3	Subtract line 2e from line 1
4	Amounts included on Form 990, Part VIII, lin

d	Other (Describe in Part XIII)
е	Add lines 2a through 2d
3	Subtract line 2e from line 1
4	Amounts included on Form 990, Part VIII, I
а	Investment expenses not included on Form
h	Other (Describe in Part XIII)

Add lines 4a and 4b .

Add lines 2a through 2d . .

Return Reference

Recoveries of prior year grants

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Donated services and use of facilities . . .

Other (Describe in Part XIII)

Supplemental Information

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments

Donated services and use of facilities

e 12, but not on line 1 n 990, Part VIII, line 7b

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

4a 4b Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

2a

2b

2c 2d

2a 2b

2c

2d

4a

4b

Explanation

Reconciliation of Expenses per Audited Financial Statements With Expenses per Re Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

145,910

33.557

4c									
5									
turn.									
1									
1									

2e

3

4c

5

145.910

2e

3

Page 5		Schedule D (Form 990) 2019			
	ormation (continued)	Part XIII Supplemental Info			
	Explanation	Return Reference			
	<u> </u>				

Schedule D (Form 990) 2019

Additional Data

Software Version:

EIN: 88-0471789 Name: Las Vegas Monorail Company

Software ID:

Supplemental Information

Return Reference Explanation

STATMENTS \$145,910

PART XI, LINE 2D PROGRAM SERVICES EXPENSES NETTED WITH PROGRAM SERVICES REVENUE ON AUDITED FINANCIAL

Supplemental Information Return Reference Explanation PROGRAM SERVICES EXPENSES NETTED WITH PROGRAM SERVICES REVENUE ON AUDITED FINANCIAL PART XII, LINE 2D STATMENTS \$145,910

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Dat	a -	DLN: 934	19314	18010	170
Schedule J		Co	mpensati	ion Information	40	1B No	1545-0	0047
(For	n 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest						
		➤ Complete if the orga	Compensa	ated Employees vered "Yes" on Form 990, Part IV,	line 23.	20	19	•
			▶ Attach	to Form 990.				
	tment of the Treasury al Revenue Service	► Go to <u>www.irs.gov</u>	<u>/Form990</u> for	instructions and the latest inforn	nation.		to Pul ectio	
Nar	ne of the organiza				Employer identificat			
Las	Vegas Monorail Com	pany			88-0471789			
Pa	rt I Questi	ons Regarding Compensati	ion					
							Yes	No
1a				the following to or for a person listed y relevant information regarding thes				
	First-class	or charter travel		Housing allowance or residence for p	personal use			
	_	companions	님	Payments for business use of persor				
		nification and gross-up payments	님	Health or social club dues or initiation				
	☐ Discretion	ary spending account	ш	Personal services (e g , maid, chauf	reur, cner)			
b				follow a written policy regarding payr ve? If "No," complete Part III to expla		1 b		
2				or allowing expenses incurred by all r, regarding the items checked on Lin	0.102	2		
	directors, truste	es, officers, including the CEO/EX	ecutive Directo	r, regarding the items checked on Lin	e lar			
3		if any, of the following the filing of EO/Executive Director Check all		ed to establish the compensation of th	ie			
	_	•		CEO/Executive Director, but explain in	n Part III			
	✓ Compensa	ation committee	~	Written employment contract				
	_ '	ent compensation consultant		Compensation survey or study				
		of other organizations	✓	Approval by the board or compensal	tion committee			
4			90, Part VII, Se	ction A, line 1a, with respect to the fi	ling organization or a			
	related organiza							
a		ance payment or change-of-contr		find making an and man 2		4a		No
b c	•	r receive payment from, a supple r receive payment from, an equit	•	•		4b 4c		No No
·				olicable amounts for each item in Part	III			110
), 501(c)(4), and 501(c)(29)	_	•				
5		ed on Form 990, Part VII, Section ontingent on the revenues of		the organization pay or accrue any				
а	The organization					5a		No
Ь	Any related orga	anization? 5a or 5b, describe in Part III				5b		No
6	-	•	A line to did	the organization pay or accrue any				
0	compensation c	ontingent on the net earnings of	A, illie 1a, ulu	the organization pay of accrue any				
a	The organization					6a		No
Ь	Any related orga	anization? 6a or 6b, describe in Part III				6b		No
7	•		A. line 1a did	the organization provide any nonfixed	f			
•		escribed in lines 5 and 6? If "Yes,			-	7		No
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," de	escribe	8		No
9	If "Yes" on line 3 53 4958-6(c)?	8, did the organization also follow	the rebuttable	presumption procedure described in	Regulations section	9		140
For I	Danarwark Badu	iction Act Notice, see the Inst	ructions for Ec	orm 990 Cat No. 5	0053T Schedule 1	/Forn	. 000)	2010

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 900. Part VII

instructions, on row (ii) Note. The sum of colum	Do no ns (B)	ot list any individuals that)(i)-(iii) for each listed in	t are not listed on Form 9 dividual must equal the to	90, Part VII Ital amount of Form 990,	Part VII, Section A, line	1a, applicable column (D)) and (E) amounts for tha	t ındıvıdual	
(A) Name and Title			of W-2 and/or 1099-MIS		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in column (B) reported as deferred on prior Form 990	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)		
1 CURTIS L MYLES III PRESIDENT & CEO	(i)	340,720	76,662	0	0	37,247	454,629	0	
	(ii)	0	0	0	0	0	0	0	
2 INGRID REISMAN SR VP OF CORP COMMUNICATIONS	(i)	238,998	35,581	0	0	32,319	306,898	0	
	(ii)	0	0	0	0	0	0	0	
3 PETER MCCANN SR VP & COO	(i)	238,998	40,361	0	0	43,537	322,896	0	
	(ii)	0	0	0	0	0	0	0	
4 BARRICK NEILL VP OF OPERATIONS	(i)	212,394	31,621	0	0	30,752	274,767	0	
	(ii)	0	0	0	0	0	0	0	
5 SIMEON SALZMAN CFO	(i)	165,000	9,346	0	0	38,077	212,423	0	
	(ii)	0	0	0	0	0	0	0	
_									
	-						Schedule	J (Form 990) 2019	

Schedule J (Form 990) 2019 Page 3 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation FORM 990, SCHEDULE J THE BOARD REVIEWS AND APPROVES CHANGES IN COMPENSATION FOR THE CEO AND KEY EMPLOYEES THROUGH AN ANNUAL PERFORMANCE EVALUATION. PROCESS THE PRESIDENT/CEO. VICE PRESIDENT OF CORPORATE COMMUNICATIONS AND CHIEF OPERATING OFFICER ALL HAVE EMPLOYMENT CONTRACTS WHICH ARE APPROVED BY THE BOARD

Schedule 1 (Form 990) 2019

ef	ile GRAPHIC print - DO N	OT PROCESS As	Filed Data -								DLN: 93	493148	010170	
		ntent of this docum	ent, please select landscape	mode (11" x	8.5") w	hen	printing.							
	Schedule K (Form 999) Supplemental Information of					nnt l	Ronde				OMB No	1545-00	047	
(F	orm 990)		orn 18x-Exempt Bonds orm 990, Part VI, line 24a. Provide descriptions,							2019				
			ional informat				,							
	artment of the Treasury rnal Revenue Service	N G	m 990.	the lates	t info	rmation				Oper	to Publi	C		
	ne of the organization	Puc	to <u>www.irs.gov/Form990</u> for ins	structions and	tile lates	t iiiio	i iliationi.		Em	ployer ider	tification r			
Las	Vegas Monorail Company								88-	0471789				
Pā	art I Bond Issues													
(a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued		ed (e) Issu	(e) Issue price (f) Description of purpose			e (g)	Defeased	(h) 0	n (i) Pool				
											behalf issue		nancing	
									Ye	Yes No			Yes No	
Α	Public Finance Authority of	27-3866124	74442PME2 10-10-2019	2	0,400,000	Refu	ndıng Bonds			X	Yes	X	X	
	Wisconsin						_							
Da	art II Proceeds													
Г	Froceeds				Α			В		С		D		
1	Amount of bonds retired .					0		<u> </u>						
2						0								
3	Total proceeds of issue				20,400,000									
4	Gross proceeds in reserve fu	nds			1,694,063									
5					0									
6						0								
7					1,49	4,038								
8						8,500								
9						0								
10	Capital expenditures from pr	oceeds				0								
11	Other spent proceeds				13,75	0,000								
12	Other unspent proceeds .				•	3,399								
13	Year of substantial completio				2020		-							
				Yes	N	0	Yes	No	Yes	No	, ,	'es	No	
14	Were the bonds issued as pa	rt of a current refunding	issue of tax-exempt		×	,								
			g issue) [?]											
15	Were the bonds issued as pa		ng issue of taxable ing issue)?	_	×	(
16				X										
17			records to support the final allocation	of X										
	proceeds?			,,										
Ρ6	Private Business	Use					Π .	В	Ι	С				
				Yes	N	0	Yes	No No	Yes	No	, ,	es D	No	
1	Was the organization a partn	er ın a partnership, or a	member of an LLC, which owned pro		\ \ \ \ \ \				1.03	 				
	financed by tax-exempt bond				^	`								
2	Are there any lease arrangen property?		private business use of bond-finance	a	×	(
Ear	Paperwork Peduction Act No				Cat No. 5	0103	<u></u>				chadula I	(Form (200\ 2010	

6

Part IV

b

C

Arbitrage

Page 2

D

Schedule K (Form 990) 2019

No

Yes

C D Yes Nο Yes No Yes No Yes No Are there any management or service contracts that may result in private business use of Χ

0 %

0 %

0 %

0 %

В

No

C

No

Yes

Х

Χ

Х

Yes

Χ

No

Χ

Χ

Χ

If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside b counsel to review any management or service contracts relating to the financed property? Are there any research agreements that may result in private business use of bond-financed Χ If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside d counsel to review any research agreements relating to the financed property?

Α

Yes

Х

Enter the percentage of financed property used in a private business use by entities other than

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . .

If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3)

organization, or a state or local government

Penalty in Lieu of Arbitrage Rebate? . . . If "No" to line 1, did the following apply?...

Rebate not due yet?

Exception to rebate?

If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue?

Was the hedge superintegrated?

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Does the bond issue meet the private security or payment test? . . .

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were Schedule K (Form 990) 2019

period?

Part V

Arbitrage (Continued)

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

requirements of section 148? . . .

		Yes	No	Yes	No	Yes	ſ
a Wei (GI	re gross proceeds invested in a guaranteed investment contract		Х				ſ

Supplemental Information. Provide additional information for responses to questions on Schedule K. (See instructions).

Nο

Yes

No

Yes

Page 3

No

Nο

D

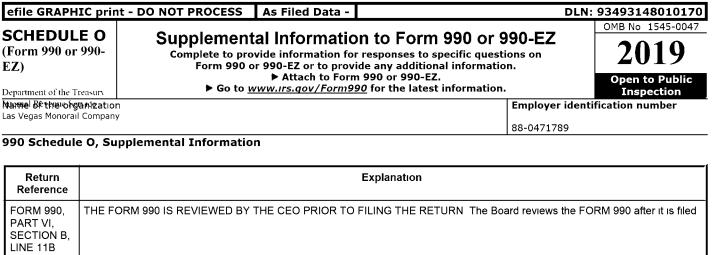
Yes

Yes

No

Yes

No



Return Explanation

990 Schedule O, Supplemental Information

FORM 990, THE BOARD REVIEWS AND APPROVES CHANGES IN COMPENSATION FOR THE CEO THROUGH AN ANNUAL PERFORMANCE EVALUATION PROCESS
SECTION B, LINE 15A

Return Explanation
Reference

990 Schedule O, Supplemental Information

LINE 15B

FORM 990, PART VI, section 8.

Return Explanation

990 Schedule O, Supplemental Information

FORM 990, PART VI, SECTION C, LINE 19