

AIRPORT ACTIVITY SURVEY (By Selected Operators)	FAA Certificate Information Number and Date Issued
Twelve-Month Period Covered: January 1 through December 31, 2015	ABCD1234 12/2015
DO NOT REPORT ACTIVITY PREVIOUSLY SUBMITTED to U.S. DOT on Form T-100	
Operator Name and Address AIRWAY AIR TAXI, INC. HANSCOM AIRPORT - NORTH BEDFORD, MA 01730	

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OPERATIONS DURING 12-MONTH PERIOD COVERED

DEPARTURE AIRPORT				ENPLANEMENTS	
Airport Location Identifier (LOCID)	State	City	Airport Name	Number of Scheduled Enplanements (See Instructions)	Number of Nonscheduled Enplanements (See Instructions)
BED	MA	BEDFORD	Laurence G. Hanscom	0	403
LEW	ME	LEWISTON	Auburn-Lewiston Muni	0	86
ACK	MA	NANTUCKET	Nantucket Memorial	0	88

FAA AIRPORT LOCATION IDENTIFIER

CITY WHERE DEPARTING PASSENGERS BOARDED THE AIRCRAFT

NAME OF AIRPORT WHERE PASSENGERS BOARDED

ANNUAL TOTAL OF SCHEDULED REVENUE PASSENGER BOARDINGS AT EACH AIRPORT

ANNUAL TOTAL OF CHARTER REVENUE PASSENGERS BOARDINGS AT EACH AIRPORT

I certify, under penalty of perjury, that the information provided in this Airport Activity Survey (Form 1800-31) is true and correct to the best of my knowledge, information and belief.

DATE	NAME AND TITLE OF PREPARING OFFICIAL	SIGNATURE
2/19/2016	John Smith, President, Airway Air Taxi	<i>John Smith</i>