BOE-570-3 (FRONT) REV. 3 (8-04)

See reverse side for instructions.

## 20\_ SUPPLEMENTARY SCHEDULE TO THE BUSINESS PROPERTY STATEMENT

MARK CHURCH

AIR CARRIER'S OPERATION REPORT (Aircraft Value Computations)

SHEET \_\_ OF\_ SHEETS **Assessor - County Clerk - Recorder** 555 County Center, First Floor Redwood City, CA 94063-1665 Phone: (650) 363-4500 Fax: (650) 599-7435

email: assessor@smcacre.gov web: www.smcacre.gov

| CARRIER                       |   |                          |                  | AIRCRAFTTYPE                   |                                   |  | COUNTY              |  | AIRPORT                                     |   | LIEN DATE                            |                                      | web: www.smo                   | cacre.gov                      |                           |
|-------------------------------|---|--------------------------|------------------|--------------------------------|-----------------------------------|--|---------------------|--|---|---|--------------------------------------|--------------------------------------|--------------------------------|--------------------------------|---------------------------|
|                               |   |                          |                  | _                              | _                                 |  |                     |  |   | 1/  |                                      |                                      | N.                             |                                |                           |
| A  IDENTIFY  OWNED OR  LEASED | B<br>AIRCRAFT<br>FAA NUMB <mark>ER</mark> | C AIRCRAFT SERIAL NUMBER | D MAKE AND MODEL | E MANUFACTURE DATE OF AIRCRAFT | F  DELIVERY DATE TO CURRENT OWNER | SALE/<br>LEASEBACK<br>OR<br>ASSIGN. DATE | ACQUISITION<br>COST | SALE/<br>LEASEBACK<br>OR<br>ASSIGN. COST | COST OF IMPROVEMENTS (INCLUDED IN COLUMN H) | COST OF IMPROVEMENTS (INCLUDED IN COLUMN I) | L ENGINE COST (INCLUDED IN COLUMN H) | M ENGINE COST (INCLUDED IN COLUMN I) | N<br>ASSESSOR'S<br>USE<br>ONLY | O<br>ASSESSOR'S<br>USE<br>ONLY | ASSESSOR'S<br>USE<br>ONLY |
|                               |   |                          | 7/               |                                |                                   |  |                     |  |   |   |                                      |                                      |                                |                                |                           |
|                               |   |                          |                  |                                |                                   |  |                     |  |   |   |                                      |                                      |                                |                                |                           |
|                               |   |                          | 4/               |                                |                                   |  |                     |  |   |   |                                      |                                      |                                |                                |                           |
|                               |   |                          | */               | VII                            |                                   |  |                     |  |   |   |                                      |                                      |                                |                                |                           |
|                               |   |                          |                  |                                |                                   |  |                     |  |   |   |                                      |                                      |                                |                                |                           |
|                               |   |                          |                  |                                |                                   |  |                     |  |   |   |                                      |                                      |                                |                                |                           |
|                               |   |                          |                  |                                |                                   |  |                     |  |   |   |                                      |                                      |                                |                                |                           |
|                               |   |                          |                  |                                |                                   |  |                     |  |   |   |                                      |                                      |                                |                                |                           |
|                               |   |                          |                  |                                |                                   |  |                     |  |   |   |                                      |                                      |                                |                                |                           |
|                               |   |                          |                  |                                |                                   |  |                     |  |   |   |                                      |                                      |                                |                                |                           |
|                               |   |                          |                  |                                |                                   |  |                     |  |   |   |                                      |                                      |                                |                                |                           |
|                               |   |                          |                  |                                |                                   |  |                     |  |   |   |                                      |                                      |                                |                                |                           |

## **INSTRUCTIONS FOR COMPLETING FORM BOE-570-3**

Using a separate sheet for each aircraft type as described in California Code of Regulations, Title 18, section 202, list name of carrier, county in which the airport is located, airport name, number of sheets, and the lien date. Fill in the columns in the following manner:

| Column A. | Identify ownership or type of lease for each separate aircraft. Enter by using the following codes: "O" for ow    |  |  |  |  |  |  |
|-----------|---|--|--|--|--|--|--|
|           | "C" for capital leases, "R" for operating leases, "S" for sale/leasebacks, and "B" for cross border transactions. |  |  |  |  |  |  |

| C - I     | For a constant | A:                 | A: - 4: A  | alore to taking at a co | / T A A \     |
|-----------|----------------|--------------------|------------|-------------------------|---------------|
| Column B. | Enter the      | Aircraft's Federal | Aviation A | laministration          | (FAA) number. |

Column C. Enter the manufacturer's aircraft serial number.

Column D. Enter the make (manufacturer's name), model number, and letter of each aircraft.

Column E. Enter the manufacture date of the aircraft.

Column F. Enter the delivery date of the aircraft to the current owner.

Column G. Enter the sale/leaseback or assignment date of delivery to the current operator.

Column H. Enter the taxpayer's cost for that individual aircraft reported in accordance with generally accepted accounting principles, so long as that produces net acquisition cost. Also include any transportation costs, capitalized interest, and any capital additions or modifications not included in the taxpayer's cost that are incurred as part of this transaction. Do not include any of these items if they are part of the transaction described in Column I.

Column I. Enter the cost established in a sale/leaseback or assignment of purchase rights transaction for that individual aircraft that transfers the benefits and burdens of ownership to the lessor for United States federal income tax purposes. Also include any transportation costs, capitalized interest, and any capital additions or modifications not included in the taxpayer's cost that are incurred as part of this transaction. Do not include any of these items if they are part of the transaction described in Column H.

Column J. Segregate the cost of the improvements to aircraft, including transportation costs, capital additions, and modifications included in Column H.

Column K. Segregate the cost of the improvements to aircraft including transportation costs, capital additions, and modifications included in Column I.

Column L. Segregate the engine cost included in Column H.

Column M. Segregate the engine cost included in Column I.

Column N. (Assessor's Use Only)

Column O. (Assessor's Use Only)

Column P. (Assessor's Use Only)

