

1.) CORPORATION NAME:

BARNES GROUP INC.

DUE DATE: **2/28/2011**

SCC ID NO: **F0289647**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

NATIONAL REGISTERED AGENTS INC

4001 North Ninth Street, Suite 227

ARLINGTON, VA 22203

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	150,000,000
PREFER	3,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ARLINGTON COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

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6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 123 MAIN ST

CITY/ST/ZIP: BRISTOL, CT 06010-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: LAWRENCE W O'BRIEN
TITLE: VP/T
ADDRESS: 123 MAIN ST
CITY/ST/ZIP/CO: BRISTOL, CT 06010-

OFFICER

DIRECTOR

NAME: THOMAS O BARNES
TITLE: CHAIRMAN
ADDRESS: 1900 PERKINS ST
CITY/ST/ZIP/CO: BRISTOL, CT 06010-

OFFICER

DIRECTOR

NAME: WILLIAM S BRISTOW JR
TITLE: DIRECTOR
ADDRESS: 70 MILLPOND ROAD
POB 2017
CITY/ST/ZIP/CO: NEW CASTLE, NH 03854-

OFFICER

DIRECTOR

NAME: MARIAN ACKER
TITLE: VICE PRESIDENT
ADDRESS: 123 MAIN ST.
CITY/ST/ZIP/CO: BRISTOL, CT 06010-

OFFICER

DIRECTOR

NAME: GREGORY F. MILZCIK
TITLE: PRESIDENT
ADDRESS: 123 MAIN ST.
CITY/ST/ZIP/CO: BRISTOL, CT 06010-

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHRISTOPHER J. STEPHENS VICE PRESIDENT 123 MAIN ST. BRISTOL, CT 06010-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAWN N. EDWARDS VICE PRESIDENT 123 MAIN ST. BRISTOL, CT 06010-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JERRY W. BURRIS VICE PRESIDENT 123 MAIN ST. BRISTOL, CT 06010-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSEPH D. DEFORTE VICE PRESIDENT 123 MAIN ST. BRISTOL, CT 06010-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PATRICK DEMPSEY VICE PRESIDENT 123 MAIN ST. BRISTOL, CT 06010-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CLAUDIA S. TOUSSAINT SECRETARY 123 MAIN ST. BRISTOL, CT 06010-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THOMAS J. ALBANI DIRECTOR 39 WANOMA WAY NANTUCKET, MA 02554-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN W ALDEN DIRECTOR 8400 LAZY OAKS CT. ATLANTA, GA 30350-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GARY G. BENANAV DIRECTOR 333 E. 57TH ST. APT. 15A NEW YORK, NY 10022-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GEORGE T. CARPENTER DIRECTOR 67 RACE ST. BRISTOL, CT 06010-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DR. HASSELL H. MCCLELLAN, PH.D. DIRECTOR 43 VALENTINE RD. MILTON, MA 02186-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MYLDRED H. MANGUM DIRECTOR 416 NORTH JEFFERSON AVE. EATONTON, GA 31024-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GREGORY F. MILZCIK DIRECTOR 123 MAIN ST. BRISTOL, CT 06010-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM J MORGAN DIRECTOR 14 TALMADGE HILL RD. DARIEN, CT 06820-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ JOSEPH D. DEFORTE SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JOSEPH D. DEFORTE, VICE PRESIDENT PRINTED NAME AND CORPORATE TITLE	1/31/2011 DATE
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It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.