

1.) CORPORATION NAME:

SIMON & SCHUSTER, INC.

DUE DATE: **3/31/2012**

SCC ID NO: **F0316440**

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

AUTH IN VI

CORPORATION SERVICE COMPANY

Bank of America Center, 16th Floor

1111 East Main Street

RICHMOND, VA 23219

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

NY

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: **C/O ADRIENNE HARRINGTON
51 W 52ND ST (19-13)**

CITY/ST/ZIP: **NEW YORK, NY 10019-**

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.

OFFICER DIRECTOR

NAME: **CAROLYN K REIDY**
TITLE: **P/CEO**
ADDRESS: **1230 AVE OF THE AMERICAS**
CITY/ST/ZIP/CO: **NEW YORK, NY 10020-**

OFFICER DIRECTOR

NAME: **LISA M. TANZI**
TITLE: **VP/ASST SECY**
ADDRESS: **51 W 52ND STREET**
CITY/ST/ZIP/CO: **NEW YORK, NY 10019-**

OFFICER DIRECTOR

NAME: **LOUIS J BRISKMAN**
TITLE: **EVP/ASSIST SEC**
ADDRESS: **51 W 52ND ST**
CITY/ST/ZIP/CO: **NEW YORK, NY 10019-**

OFFICER DIRECTOR

NAME: **MICHAEL A KOCZKO**
TITLE: **ASST SECRETARY**
ADDRESS: **51 W 52ND ST**
CITY/ST/ZIP/CO: **NEW YORK, NY 10019-**

OFFICER DIRECTOR

NAME: **ERIC J. SOBCZAK**
TITLE: **ASST SECRETARY**
ADDRESS: **20 STANWIX STREET**
CITY/ST/ZIP/CO: **PITTSBURGH, PA 15222-**

NAME: J. KENNETH HILL TITLE: SVP/TREASURER ADDRESS: 51 W 52ND STREET CITY/ST/ZIP/CO: NEW YORK, NY 10019-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: JOSEPH R. IANNIELLO TITLE: EVP ADDRESS: 51 W 52ND STREET CITY/ST/ZIP/CO: NEW YORK, NY 10019-	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: DENNIS S EULAU TITLE: EVP/CFO ADDRESS: 1230 AVE OF THE AMERICAS CITY/ST/ZIP/CO: NEW YORK, NY 10020-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: ELISA M. RIVLIN TITLE: SVP/GEN COUNSEL ADDRESS: 1230 AVENUE OF THE AMERICAS CITY/ST/ZIP/CO: NEW YORK, NY 10020-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: ANGELINE C STRAKA TITLE: SVP/SECRETARY ADDRESS: 51 W 52ND ST CITY/ST/ZIP/CO: NEW YORK, NY 10019-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: THOMAS S. SHILEN, JR. TITLE: DIRECTOR ADDRESS: 51 W 52ND STREET CITY/ST/ZIP/CO: NEW YORK, NY 10019-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: LAWRENCE LIDING TITLE: SVP/Contrlr/CAO ADDRESS: 51 W 52ND STREET CITY/ST/ZIP/CO: NEW YORK, NY 10019-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
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/ ERIC J. SOBCZAK SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	ERIC J. SOBCZAK, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE
2/7/2012 DATE	
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.	