

1.) CORPORATION NAME:

Science Applications International Corporation

DUE DATE: **2/28/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F0448912**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1710 SAIC Drive

CITY/ST/ZIP: McLean, VA 22102

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.

<p>NAME: JOSEPH W. CRAVER III TITLE: GROUP PRESIDENT ADDRESS: 1710 SAIC DRIVE CITY/ST/ZIP/CO: MS T1-13-2 MCLEAN, VA 22102</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: K. STUART SHEA TITLE: COO ADDRESS: 1710 SAIC DRIVE CITY/ST/ZIP/CO: MS T1-12-5 MCLEAN, VA 22102</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: DAVID C. AMICK TITLE: VICE PRESIDENT ADDRESS: 151 LAFAYETTE DRIVE P.O. BOX 2501 OAK RIDGE, TN 37831</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: ROBERT S. BIRDSONG TITLE: SENIOR VP ADDRESS: 10260 CAMPUS POINT DRIVE MS A2 SAN DIEGO, CA 92121</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: JAMES E. CUFF TITLE: EXECUTIVE VP ADDRESS: 1710 SAIC Drive, MS 1-14-2 CITY/ST/ZIP/CO: McLean, VA 22102</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: MARYANN K. CURTIN TITLE: ASST VP ADDRESS: 3465 BOX HILL CORPORATE CENTER DRIVE CITY/ST/ZIP/CO: ABINGDON, MD 21009</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DEBORAH L. JAMES EXECUTIVE VP 1710 SAIC DRIVE MS 1-14-2 MCLEAN, VA 22102	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRIAN F. KEENAN EXECUTIVE VP 1710 SAIC DRIVE MS 1-14-6 MCLEAN, VA 22102	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BARRY S. LANGER VICE PRESIDENT 155 PASSAIC AVENUE FAIRFIELD, NJ 07004	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANTHONY J. MORACO GP 1710 SAIC Drive, MS T1-14-1 McLean, VA 22102	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	VINCENT A. MAFFEO EVP/GC/ASST SEC 1710 SAIC DRIVE MCLEAN, VA 22102	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DOUGLAS E. SCOTT SECRETARY 10260 CAMPUS POINT DRIVE SAN DIEGO, CA 92121	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN D. CLARKE ASST SECRETARY 6723 ODYSSEY DRIVE HUNTSVILLE, AL 35806	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHARLES W. DURANT ASST SECRETARY 1710 SAIC DRIVE MS 1-13-3 MCLEAN, VA 22102	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAUL H. GREINER ASST SECRETARY 10260 CAMPUS POINT DRIVE MS D7S SAN DIEGO, CA 92121	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES S. KENNEL ASST SECRETARY 1710 SAIC DRIVE MS 3-5-9 MCLEAN, VA 22102	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT L. LEVIN ASST SECRETARY 10260 CAMPUS POINT DRIVE MS D7S SAN DIEGO, CA 92121	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CINDY S. PITTMAN ASST SECRETARY 10260 CAMPUS POINT DRIVE MS D7S SAN DIEGO, CA 92121	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CLEMENT VINCENT QUELLA III ASST SECRETARY 10260 CAMPUS POINT DRIVE MS A-3 SAN DIEGO, CA 92121	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARK A. ROWLAND ASST SECRETARY 10260 CAMPUS POINT DRIVE MS D7S SAN DIEGO, CA 92121	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LAWRENCE E. RUGGIERO ASST SECRETARY 1710 SAIC DRIVE MAIL STOP 3-5-9 MCLEAN, VA 22102	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RAYMOND L. VELDMAN ASST SECRETARY 10260 CAMPUS POINT DRIVE MS D7-S SAN DIEGO, CA 92121	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARC H. CROWN ASST TREAS/TAO 10260 CAMPUS POINT DRIVE MS A-3 SAN DIEGO, CA 92121	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEVEN P. FISHER SVP/TREAS/TAO 10260 CAMPUS POINT DRIVE MS A-3 SAN DIEGO, CA 92121	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	AMY E. ALVING SVP / CTO 1710 SAIC DRIVE MCLEAN, VA 22102	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN R. HARTLEY SVP/CONTROLLER 10260 CAMPUS POINT DRIVE MS A3 SAN DIEGO, CA 92121	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARK W. SOPP EVP / CFO 10260 CAMPUS POINT DRIVE MAIL STOP D7-N SAN DIEGO, CA 92121	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	FRANCE A. CORDOVA DIRECTOR 223 N. Guadalupe #562 Santa Fe, NM 87501	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JERE A. DRUMMOND DIRECTOR 3209 STRATFORD PARK COURT CHARLOTTE, NC 28210	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THOMAS F. FRIST III DIRECTOR FRIST CAPITAL L.L.C. 3100 WEST END AVENUE, SUITE 500 NASHVILLE, TN 37203	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN J. HAMRE DIRECTOR CENTER FOR STRATEGIC & INTERNATIONAL STUDIES 1800 K STREET NW, SUITE 400 WASHINGTON, DC 20006	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MIRIAM E. JOHN DIRECTOR SANDIA NATIONAL LABORATORIES 7011 EAST AVENUE, MS9001 LIVERMORE, CA 94550	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANITA K. JONES DIRECTOR Quill Spring, 3897 Free Union Road Charlottesville, VA 22901	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN P. JUMPER CEO/President 1710 SAIC Drive, MS 1-14-2 McLean, VA 22102	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HARRY M. JANSEN KRAEMER JR. DIRECTOR 1200 CENTRAL AVENUE SUITE 306 WILMETTE, IL 60091	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LAWRENCE C. NUSSDORF DIRECTOR CLARK ENTERPRISES, INC. 7500 OLD GEORGETOWN ROAD, 15TH FLOOR BETHESDA, MD 20814	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: EDWARD J. SANDERSON JR. TITLE: DIRECTOR ADDRESS: P.O. BOX 1368 CITY/ST/ZIP/CO: RANCHO SANTA FE, CA 92067	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: A. THOMAS YOUNG TITLE: DIRECTOR ADDRESS: 18210 POPLAR COVE ROAD CITY/ST/ZIP/CO: ONANCOCK, VA 23417	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: Laura K. Kennedy TITLE: SVP ADDRESS: 1710 SAIC Drive, MS T1-14-2 CITY/ST/ZIP/CO: McLean, VA 22102	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: Thomas G. Baybrook TITLE: GP ADDRESS: 1710 SAIC Drive, MS 1-4-7 CITY/ST/ZIP/CO: McLean, VA 22102	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: Felicia L Faragasso TITLE: ASST SECRETARY ADDRESS: 1710 SAIC Drive, MS 3-5-9 CITY/ST/ZIP/CO: McLean, VA 22102	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: Andrew N. Petrakes TITLE: ASST SECRETARY ADDRESS: 10260 Campus Point Drive, MS D7S CITY/ST/ZIP/CO: San Diego, CA 92121	<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/ CLEMENT VINCENT QUELLA III SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	CLEMENT VINCENT QUELLA III, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE
	1/28/2013 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.	