

1.) CORPORATION NAME:

**NATIONAL RURAL TELECOMMUNICATIONS
COOPERATIVE**

DUE DATE: **4/30/2011**

SCC ID NO: **F1173683**

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
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ARLINGTON COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DC

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2121 COOPERATIVE WAY
STE 500

CITY/ST/ZIP: HERNDON, VA 20171-5346

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: TREVOR R BONNSTETTER
TITLE: VICE CHAIRMAN
ADDRESS: 2121 COOPERATIVE WAY
STE 500
CITY/ST/ZIP/CO: HERNDON, VA 20171-

OFFICER

DIRECTOR

NAME: TERRY GILMORE
TITLE: VP/CONTRL/SEC
ADDRESS: 2121 COOPERATIVE WAY
STE 500
CITY/ST/ZIP/CO: HERNDON, VA 20171-5346

OFFICER

DIRECTOR

NAME: CLAY R CAMPBELL
TITLE: DIRECTOR
ADDRESS: 2121 COOPERATIVE WAY
SUITE 500
CITY/ST/ZIP/CO: HERNDON, VA 20171-

OFFICER

DIRECTOR

NAME: BILL HEGMANN
TITLE: DIRECTOR
ADDRESS: 2121 COOPERATIVE WAY
SUITE 500
CITY/ST/ZIP/CO: HERNDON, VA 20171-

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JACK HARVEY PRESIDENT/CEO 2121 COOPERATIVE WAY SUITE 500 HERNDON, VA 20171-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WES DITTMER SR VP/CFO 2121 COOPERATIVE WAY SUITE 500 HERNDON, VA 20171-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEVE BING SR VP 2121 COOPERATIVE WAY SUITE 500 HERNDON, VA 20171-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TERRY L BRUNS CHAIRMAN 2121 COOPERATIVE WAY SUITE 500 HERNDON, VA 20171-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GENE DORREL DIRECTOR 2121 COOPERATIVE WAY SUITE 500 HERNDON, VA 20171-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GLENN ENGLISH DIRECTOR 2121 COOPERATIVE WAY SUITE 500 HERNDON, VA 20171-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARK GLAESS DIRECTOR 2121 COOPERATIVE WAY SUITE 500 HERNDON, VA 20171-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM F HODNETT DIRECTOR 2121 COOPERATIVE WAY SUITE 500 HERNDON, VA 20171-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM JOHNSON DIRECTOR 2121 COOPERATIVE WAY SUITE 500 HERNDON, VA 20171-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: RANDY HOUDEK TITLE: DIRECTOR ADDRESS: 2121 COOPERATIVE WAY SUITE 50 CITY/ST/ZIP/CO: HERNDON, VA 20171-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: JAMES E MANGUM, JR TITLE: DIRECTOR ADDRESS: 2121 COOPERATIVE WAY SUITE 500 CITY/ST/ZIP/CO: HERNDON, VA 20171-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: BOB MARSHALL TITLE: DIRECTOR ADDRESS: 2121 COOPERATIVE WAY SUITE 500 CITY/ST/ZIP/CO: HERNDON, VA 20171-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: LUIS S REYES TITLE: DIRECTOR ADDRESS: 2121 COOPERATIVE WAY SUITE 500 CITY/ST/ZIP/CO: HERNDON, VA 20171-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: CHARLES SHORT TITLE: DIRECTOR ADDRESS: 2121 COOPERATIVE WAY SUITE 500 CITY/ST/ZIP/CO: HERNDON, VA 20171-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: RICK VERGIN TITLE: DIRECTOR ADDRESS: 2121 COOPERATIVE WAY SUITE 500 CITY/ST/ZIP/CO: HERNDON, VA 20171-	<input type="checkbox"/> OFFICER <input checked="" 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/ TERRY GILMORE SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	TERRY GILMORE, VP/CONTRL/SEC PRINTED NAME AND CORPORATE TITLE
4/26/2011 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.	