

1.) CORPORATION NAME:

SM&A, INC. (USED IN VA BY: SM&A)

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ATTORNEY
JAMES C BRINCEFIELD JR
526 KING ST
ALEXANDRIA, VA 22314**

DUE DATE: **5/31/2011**

SCC ID NO: **F1253931**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ALEXANDRIA CITY

4.) STATE OR COUNTRY OF INCORPORATION:

CA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4695 MACARTHUR CT 8TH FLOOR

CITY/ST/ZIP: NEWPORT BEACH, CA 92660-

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: CATHY L MCCARTHY
TITLE: P/CEO
ADDRESS: 4695 MACARTHUR COURT
8TH FLOOR
CITY/ST/ZIP/CO: NEWPORT BEACH, CA 92660-

OFFICER

DIRECTOR

NAME: GENERAL PETER PACE, USMC RET.
TITLE: P/CEO STRATADV
ADDRESS: 4695 MACARTHUR COURT
8TH FLOOR
CITY/ST/ZIP/CO: NEWPORT BEACH, CA 92660-

OFFICER

DIRECTOR

NAME: ROBERT S. AIKMAN
TITLE: SEC/VP
ADDRESS: 4695 MACARTHUR CT 8TH FL
CITY/ST/ZIP/CO: NEWPORT BEACH, CA 92660-

OFFICER

DIRECTOR

NAME: ANNA AGUIRRE
TITLE: SVP, HR
ADDRESS: 4695 MACARTHUR COURT
8TH FLOOR
CITY/ST/ZIP/CO: NEWPORT BEACH, CA 92660-

OFFICER

DIRECTOR

NAME: CRAIG CHRISTENSEN
TITLE: CORPCONTROLLER
ADDRESS: 4695 MACARTHUR COURT
8TH FLOOR
CITY/ST/ZIP/CO: NEWPORT BEACH, CA 92660-

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES R ECKSTAEDT EVP/M&A 4695 MACARTHUR COURT 8TH FLOOR NEWPORT BEACH, CA 92660-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DANIEL HART SVP, CFO 4695 MACARTHUR COURT 8TH FLOOR NEWPORT BEACH, CA 92660-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KEVIN L REINERS COO 4695 MACARTHUR CT 8TH FL NEWPORT BEACH, CA 92660-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEPHEN BERGER DIRECTOR 4695 MACARTHUR COURT 8TH FLOOR NEWPORT BEACH, CA 92660-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM HOPKINS DIRECTOR 4695 MACARTHUR COURT 8TH FLOOR NEWPORT BEACH, CA 92660-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL KANAZAWA DIRECTOR 4695 MACARTHUR COURT 8TH FLOOR NEWPORT BEACH, CA 92660-	<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/ CRAIG CHRISTENSEN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	CRAIG CHRISTENSEN, CORPCONTROLLER PRINTED NAME AND CORPORATE TITLE	5/27/2011 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.		