

1.) CORPORATION NAME:

In-Q-Tel, Inc.

DUE DATE: **1/31/2012**

SCC ID NO: **F1409509**

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

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2107 WILSON BLVD
11TH FLOOR

CITY/ST/ZIP: ARLINGTON, VA 22201-

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: CHRISTOPHER DARBY
TITLE: P/CEO
ADDRESS: 2107 WILSON BLVD
11TH FLOOR
CITY/ST/ZIP/CO: ARLINGTON, VA 22201-

OFFICER

DIRECTOR

NAME: BRUCE ADAMS
TITLE: SEC/EXEC VP
ADDRESS: 2107 WILSON BLVD
11TH FLOOR
CITY/ST/ZIP/CO: ARLINGTON, VA 22201-

OFFICER

DIRECTOR

NAME: STEVE BOWSHER
TITLE: EXEC VP
ADDRESS: 2107 WILSON BLVD.
11TH FL.
CITY/ST/ZIP/CO: ARLINGTON, VA 22201-

OFFICER

DIRECTOR

NAME: ROBERT GLEICHAUF
TITLE: EXEC VP
ADDRESS: 2107 WILSON BLVD 11TH FLOOR
CITY/ST/ZIP/CO: ARLINGTON, VA 22201-

OFFICER

DIRECTOR

NAME: ELIZABETH POULOS
TITLE: EXEC VP
ADDRESS: 2107 WILSON BLVD 11TH FLOOR
CITY/ST/ZIP/CO: ARLINGTON, VA 22201-

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM STRECKER EXEC VP 2107 WILSON BLVD 11TH FLOOR ARLINGTON, VA 22201-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MATT STROTTMAN TREAS/CFO/EVP 2107 WILSON BLVD. 11TH FL. ARLINGTON, VA 22201-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL M CROW CHAIRMAN 2107 WILSON BLVD 11TH FLOOR ARLINGTON, VA 22201-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES BARKSDALE DIRECTOR 2107 WILSON BLVD 11TH FLOOR ARLINGTON, VA 22201-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PETER BARRIS DIRECTOR 2107 WILSON BLVD 11TH FLOOR ARLINGTON, VA 22201-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHARLES BOYD DIRECTOR 2107 WILSON BLVD 11TH FLOOR ARLINGTON, VA 22201-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HOWARD COX DIRECTOR 2107 WILSON BLVD 11TH FLOOR ARLINGTON, VA 22201-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID JEREMIAH DIRECTOR 2107 WILSON BLVD 11TH FLOOR ARLINGTON, VA 22201-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANITA JONES DIRECTOR 2107 WILSON BLVD 11TH FLOOR ARLINGTON, VA 22201-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	A.B. KRONGARD DIRECTOR 2107 WILSON BLVD 11TH FLOOR ARLINGTON, VA 22201-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMI MISCIK DIRECTOR 2107 WILSON BLVD 11TH FLOOR ARLINGTON, VA 22201-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ELISABETH PATE-CORNELL DIRECTOR 2107 WILSON BLVD 11TH FLOOR ARLINGTON, VA 22201-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHARLES VEST DIRECTOR 2107 WILSON BLVD 11TH FLOOR ARLINGTON, VA 22201-	<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/ BRUCE ADAMS	BRUCE ADAMS, SEC/EXEC VP	1/6/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	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.