

1.) CORPORATION NAME:

Sidney Coal Company, Inc.

DUE DATE: **3/31/2011**

SCC ID NO: **F1621178**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ATTORNEY
RICHARD R GRINNAN
4 N 4TH ST
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:

KY

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4 N 4TH STREET

CITY/ST/ZIP: RICHMOND, VA 23219-

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: CHARLES I BEARSE III
TITLE: PRESIDENT
ADDRESS: PO BOX 299
CITY/ST/ZIP/CO: SIDNEY, KY 41564-

OFFICER

DIRECTOR

NAME: M SHANE HARVEY
TITLE: ASST SEC
ADDRESS: PO BOX 261
CITY/ST/ZIP/CO: JULIAN, WV 25529-

OFFICER

DIRECTOR

NAME: LARRY E PALMER
TITLE: ASST SEC
ADDRESS: PO BOX 26765
CITY/ST/ZIP/CO: RICHMOND, VA 23261-

OFFICER

DIRECTOR

NAME: RICHARD R GRINNAN
TITLE: SECRETARY
ADDRESS: PO BOX 26765
CITY/ST/ZIP/CO: RICHMOND, VA 23261-

OFFICER

DIRECTOR

NAME: MARK A CLEMENS
TITLE: DIRECTOR
ADDRESS: PO BOX 261
CITY/ST/ZIP/CO: JULIAN, WV 25304-

OFFICER

DIRECTOR

NAME: KEVIN T VARNEY TITLE: VICE PRESIDENT ADDRESS: PO BOX 261 CITY/ST/ZIP/CO: JULIAN, WV 25529-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: JOHN C MARCUM TITLE: Controller ADDRESS: PO BOX 261 CITY/ST/ZIP/CO: JULIAN, WV 25529-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: JEFFREY M JAROSINSKI TITLE: TREASURER ADDRESS: PO BOX 26765 CITY/ST/ZIP/CO: RICHMOND, VA 25529-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: ANDREW B HAMPTON TITLE: ASST SECRETARY ADDRESS: PO BOX 26765 CITY/ST/ZIP/CO: RICHMOND, VA 23261-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: PHILLIP C MONROE TITLE: ASST SECRETARY ADDRESS: PO BOX 261 CITY/ST/ZIP/CO: JULIAN, WV 25529-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: JOHN L CLINE, JR TITLE: Authorized Agen ADDRESS: PO BOX 261 CITY/ST/ZIP/CO: JULIAN, WV 25529-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: KEVIN T VARNEY TITLE: Authorized Agen ADDRESS: PO BOX 261 CITY/ST/ZIP/CO: JULIAN, WV 25529-	<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/ LARRY E PALMER	LARRY E PALMER, ASST SEC
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	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.	