

1.) CORPORATION NAME:

**SANDIA CORPORATION**

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

**AUTH IN VI  
CORPORATION SERVICE COMPANY  
11 S 12TH ST  
PO BOX 1463**

**RICHMOND, VA 23218**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

DUE DATE: **2/28/2011**

SCC ID NO: **F1658766**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1515 EUBANK SE MAIL STOP 1382

CITY/ST/ZIP: ALBUQUERQUE, NM 87123-1382

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: LARRY D WELCH  
TITLE: DIRECTOR  
ADDRESS: 1515 EUBANK SE  
CITY/ST/ZIP/CO: ALBUQUERQUE, NM 87123-0101

OFFICER  DIRECTOR

NAME: MICHAELA E MCAULIFFE  
TITLE: ASST SECRETARY  
ADDRESS: 1515 EUBANK SE  
CITY/ST/ZIP/CO: ALBUQUERQUE, NM 87123-

OFFICER  DIRECTOR

NAME: GLENN E COLE  
TITLE: ASST SECRETARY  
ADDRESS: 1515 EUBANK SE  
CITY/ST/ZIP/CO: ALBUQUERQUE, NM 87123-

OFFICER  DIRECTOR

NAME: DAVID A HEYWOOD  
TITLE: ASST SECRETARY  
ADDRESS: 1515 EUBANK SE  
CITY/ST/ZIP/CO: ALBUQUERQUE, NM 87123-

OFFICER  DIRECTOR

NAME: CHARLES PECHEWLYS  
TITLE: ASST SECRETARY  
ADDRESS: 1515 EUBANK SE  
CITY/ST/ZIP/CO: ALBUQUERQUE, NM 87123-

OFFICER  DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SHARLA G HALEY ASST SECRETARY 1515 EUBANK SE ALBUQUERQUE, NM 87123-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MATTHEW J O'BRIEN ASST TREASURER 1515 EUBANK SE ALBUQUERQUE, NM 87123-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CONNIE MEARKLE ASST TREASURER 1515 EUBANK SE ALBUQUERQUE, NM 87123-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARILYN HEWSON CHAIRMAN 1515 EUBANK SE ALBUQUERQUE, NM 87123-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	J STEPHEN ROTTLER VICE PRESIDENT 1515 EUBANK SE ALBUQUERQUE, NM 87123-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN C MCCARTHY TREASURER 1515 EUBANK SE ALBUQUERQUE, NM 87123-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ELIZABETH D KRAUSS SECRETARY 1515 EUBANK SE ALBUQUERQUE, NM 87123-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALTON D ROMIG VICE PRESIDENT 1515 EUBANK SE ALBUQUERQUE, NM 87123-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KIMBERLY C SAWYER VICE PRESIDENT 1515 EUBANK SE ALBUQUERQUE, NM 87123-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CAROLYNE M HART VICE PRESIDENT 1515 EUBANK SE ALBUQUERQUE, NM 87123-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN F SLIPKE VICE PRESIDENT 1515 EUBANK SE ALBUQUERQUE, NM 87123-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL W HAZEN VICE PRESIDENT 1515 EUBANK SE ALBUQUERQUE, NM 87123-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MATTHEW J O'BRIEN VP & CFO 1515 EUBANK SE ALBUQUERQUE, NM 87123-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ELIZABETH D KRAUSS VICE PRESIDENT 1515 EUBANK SE ALBUQUERQUE, NM 87123-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RICHARD H STULEN VICE PRESIDENT 1515 EUBANK SE ALBUQUERQUE, NM 87123-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JILL M HRUBY VICE PRESIDENT 1515 EUBANK SE ALBUQUERQUE, NM 87123-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAUL J HOMMERT PRESIDENT/V.CHR 1515 EUBANK SE ALBUQUERQUE, NM 87123-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DONNA F BETHELL DIRECTOR 1515 EUBANK SE ALBUQUERQUE, NM 87123-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAY A BROZOST DIRECTOR 1515 EUBANK SE ALBUQUERQUE, NM 87123-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID C CONSTABLE DIRECTOR 1515 EUBANK SE ALBUQUERQUE, NM 87123-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: DAVID E DANIEL TITLE: DIRECTOR ADDRESS: 1515 EUBANK SE CITY/ST/ZIP/CO: ALBUQUERQUE, NM 87123-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: WILLIAM G HOWARD, JR. TITLE: DIRECTOR ADDRESS: 1515 EUBANK SE CITY/ST/ZIP/CO: ALBUQUERQUE, NM 87123-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: RAY O JOHNSON TITLE: DIRECTOR ADDRESS: 1515 EUBANK SE CITY/ST/ZIP/CO: ALBUQUERQUE, NM 87123-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: KATHERINE J KERCHNER TITLE: DIRECTOR ADDRESS: 1515 EUBANK SE CITY/ST/ZIP/CO: ALBUQUERQUE, NM 87123-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: JAMES R SCHLESINGER TITLE: DIRECTOR ADDRESS: 1515 EUBANK SE CITY/ST/ZIP/CO: ALBUQUERQUE, NM 87123-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: JEAN A WALLACE TITLE: DIRECTOR ADDRESS: 1515 EUBANK SE CITY/ST/ZIP/CO: ALBUQUERQUE, NM 87123-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: JEFFREY W KALLIO TITLE: ASST TREASURER ADDRESS: 1515 EUBANK SE CITY/ST/ZIP/CO: ALBUQUERQUE, NM 87123-	<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/ JEFFREY W KALLIO SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JEFFREY W KALLIO, ASST TREASURER PRINTED NAME AND CORPORATE TITLE
2/21/2011 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.	