

1.) CORPORATION NAME:

National Academy of Sciences

DUE DATE: **6/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1672197**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
-------	------------

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

US

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2101 CONSTITUTION AVE NW

CITY/ST/ZIP: WASHINGTON, DC 20418

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:	RALPH J CICERONE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	2101 CONSTITUTION AVE NW		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20418		
NAME:	DIANE GRIFFIN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	DEPT OF MOLECULAR MICROBIOLOGY JOHNS HOPKINS BLOOMBERG SCHOOL OF PUB HEALTH		
CITY/ST/ZIP/CO:	BALTIMORE, MD 21205		
NAME:	MICHAEL T CLEGG	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	FOREIGN SEC		
ADDRESS:	SCHOOL OF BIOLOGICAL SCIENCES UNIV OF CALIFORNIA, IRVINE		
CITY/ST/ZIP/CO:	IRVINE, CA 92697		
NAME:	JEREMIAH P OSTRIKER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	PRINCETON UNIVERSITY		
CITY/ST/ZIP/CO:	PRINCETON, NJ 08544		
NAME:	SUSAN R WESSLER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	HOME SECRETARY		
ADDRESS:	UNIVERSITY OF CALIFORNIA, RIVERSIDE		
CITY/ST/ZIP/CO:	RIVERSIDE, CA 92521		
NAME:	Stephen E. Fienberg	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	Council Member		
ADDRESS:	Carnegie Mellon University Department of Statistics		
CITY/ST/ZIP/CO:	Pittsburgh, PA 15213		

NAME:	Carol A. Gross	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	Council Member		
ADDRESS:	University of California Department of Microbiology		
CITY/ST/ZIP/CO:	San Francisco, CA 94143-0402		
NAME:	John Hildebrand	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	Council Member		
ADDRESS:	University of Arizona Regents Professor and Head		
CITY/ST/ZIP/CO:	Tucson, AZ 85721		
NAME:	Mary-Claire King	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	Council Member		
ADDRESS:	University of Washington Depts. of Medicine and Genome Sciences		
CITY/ST/ZIP/CO:	Seattle, WA 98195-5065		
NAME:	Richard Lifton	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	Council Member		
ADDRESS:	Yale University School of Medicine		
CITY/ST/ZIP/CO:	New Haven, CT 06520		
NAME:	Joyce Marcus	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	Council Member		
ADDRESS:	University of Michigan Museum of Anthropology		
CITY/ST/ZIP/CO:	Ann Arbor, MI 48109-1079		
NAME:	Douglas S. Massey	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	Council Member		
ADDRESS:	Princeton University Professor of Sociology & Public Affairs		
CITY/ST/ZIP/CO:	Princeton, NJ 08544		
NAME:	Rowena Matthews	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	Council Member		
ADDRESS:	University of Michigan		
CITY/ST/ZIP/CO:	Ann Arbor, MI 48109-0600		
NAME:	Frank M. Richter	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	Council Member		
ADDRESS:	The University of Chicago Dept. of the Geophysical Sciences		
CITY/ST/ZIP/CO:	Chicago, IL 60637		
NAME:	Irving L. Weissman	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	Council Member		
ADDRESS:	Stanford University Department of Pathology		
CITY/ST/ZIP/CO:	Stanford, CA 94305		
NAME:	Peter G. Wolynes	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	Council Member		
ADDRESS:	Rice University D.R. Bullard-Welch Foundation		
CITY/ST/ZIP/CO:	Houston, TX 77251-1892		

NAME:	Maria Zuber	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	Council Member		
ADDRESS:	Massachusetts Institute of Technology		
CITY/ST/ZIP/CO:	E.A. Griswold Professor of Geophysics Cambridge, MA 02139-4307		
NAME:	Bruce B. Darling	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EO		
ADDRESS:	2101 Constitution Avenue, N.W.		
CITY/ST/ZIP/CO:	Washington, DC 20418		
NAME:	Mary B. Salmon	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	2101 Constitution Avenue, N.W.		
CITY/ST/ZIP/CO:	Washington, DC 20418		
NAME:	James F. Hinchman	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	Deputy EO		
ADDRESS:	2101 Constitution Avenue, N.W.		
CITY/ST/ZIP/CO:	Washington, DC 20418		
NAME:	Audrey Byrd Mosley	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	Gen Counsel		
ADDRESS:	2101 Constitution Avenue, N.W.		
CITY/ST/ZIP/CO:	Washington, DC 20418		
NAME:	Leonard Kim	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CIO		
ADDRESS:	2101 Constitution Avenue, N.W.		
CITY/ST/ZIP/CO:	Washington, DC 20418		

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/ RALPH J CICERONE	RALPH J CICERONE, PRESIDENT	6/5/2014
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.