

1.) CORPORATION NAME:

THE CLAY MINERALS SOCIETY

DUE DATE: **4/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**GANT REDMON
510 KING ST STE 301
ALEXANDRIA, VA 22314**

SCC ID NO: **F1705765**

5.) STOCK INFORMATION

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

ALEXANDRIA CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DC

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3635 CONCORDE PKWY
STE 500

CITY/ST/ZIP: CHANTILLY, VA 20151-1125

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:	DAVID A LAIRD	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	Past President		
ADDRESS:	USDA-ARS-MWA 2110 UNIVERSITY BLVD AMES, IA 50011		
CITY/ST/ZIP/CO:			
NAME:	PETER KOMADEL	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	SLOVAK ACADEMY OF SCIENCES Bratislava, SK-845 36, SK		
CITY/ST/ZIP/CO:			
NAME:	MICHAEL A VELBEL	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	MICHIGAN STATE UNIVERSITY DEPT OF GEOLOGY 206 NATURAL SCIENCE BUILDING EAST LANSING, MI 46624		
CITY/ST/ZIP/CO:			
NAME:	J REED GLASSMAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	31191 PETERSON ROADEE PHILMOTH, OR 97370		
CITY/ST/ZIP/CO:			
NAME:	WARREN HUFF	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	UNIVERSITY OF OHIO, DEPT OF GEOLOGY P.O. BOX 210013 CINCINNATI, OH 45221		
CITY/ST/ZIP/CO:			
NAME:	JOSEPH W. STUCKI	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EDITOR-IN-CHIEF		
ADDRESS:	W-321 TRUNER HALL 1102 SOUTH GOODWIN AVE URBANA, IL 61801		
CITY/ST/ZIP/CO:			

NAME:	W. Crawford Elliott	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VP Elect		
ADDRESS:	Georgia State University		
CITY/ST/ZIP/CO:	P.O. Box 4105 Atlanta, GA 30302		

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/ J REED GLASSMAN	J REED GLASSMAN, TREASURER	3/4/2013
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.