FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ngton, D.C. 20549	OMB APPROVAL

OMB Number:	3235-0287
Estimated average bu	urden
l	0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol SAIC, Inc. [SAI]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>Hartley John Robert</u>				0111	<u> </u>		0111	1						Directo	r		10% Ov	vner	
(Last)	/=	irct\	(Middle)		3. Da	3. Date of Earliest Transaction (Month/Day/Year)								X	Officer below)	Officer (give title below)		Other (specify below)	
						04/01/2011									Ser	nior VP a	nd Co	ontroller	
1710 SAIC DRIVE																			
(Street)						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
MCLEA	N V	Δ	22102											X	Form fi	led by One	Reno	rting Persor	,
WICLEA	.14 V.	n.	22102											X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(S	tate)	(Zip)												Person		C triari	One repor	ung
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of	Security (Ins	tr. 3)		2. Transac	ction	2/	A. Deem	ed	3.		4. Securit	ies Acquire	ed (A) o	or	5. Amou	nt of	6. Ow	nership	7. Nature of
Date				Execution Date, av/Year) if any				Transaction Disposed Of (D) (Instr. 3, 4 Code (Instr. 5)				and	Securitie Beneficia	ally (D) or ollowing (I) (In:		r Indirect B str. 4) O	Indirect Beneficial		
(Month/D					(Month/Day/Year)													Owned F	Ownership
								Code	Code V		(A) or		ce	Reported Transact	ion(s)		۱,	(Instr. 4)	
								Code	v	Amount	(D)	Pil	ce	(Instr. 3 a					
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
			(0	e.g., pu	ıts, c	alls	, warr	ants	s, option	ıs, c	onvertik	ole secu	rities	s) ์					
1. Title of	2.	3. Transaction Date (Month/Day/Year)	3A. Deemed	4.	1. Transaction Code (Instr.		of			6. Date Exercisable		7. Title and Am			B. Price of	9. Number		10.	11. Nature
Derivative Security	Conversion or Exercise		Execution Da						Expiration Date (Month/Day/Year)			of Securit Underlyin		Derivative Security		derivative Securities		Ownership Form:	p of Indirect Beneficial
(Instr. 3) Price of (Month/Day/Y					Securities Acquired			Derivative Sec							Beneficially Owned			Ownership (Instr. 4)	
Derivative					Acquired (Instr. 3 and 4)							nu 4)			Following		(i) (instr. 4)	(instr. 4)	
					Disposed of (D) (Instr.										Reported	orted saction(s)			
		3, 4 and 5)												(Instr. 4)					
													Amo	unt					
													or Num	ber					
					de V	,	,a\		Date		Expiration	T:41a	of						
				Co	ue V	-	(A)	(D)	Exercisabl	e	Date	Title	Shar	es					-
Stock Option												Common	L					_	
(Right to	\$16.92	04/01/2011		A A	A		44,081		04/01/2012	(1)	03/31/2018	Stock	44,0	J81	\$0.0000	44,08	1	D	

Explanation of Responses:

1. The option is exercisable according to the following annual vesting schedule: 20% in years 1, 2 and 3, and 40% in year 4. The date exercisable set forth above is the first anniversary of the date of grant of each option and represents the date on which the option first became exercisable with respect to 20% of the underlying shares in accordance with the aforementioned vesting schedule.

N. Walker, Attorney-in-fact 04/05/2011

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.