FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPR	OVAL
OMB Number:	3235-0287
Estimated average bur	den
hours per response:	05

					or	Sec	uon	30(N)	u ine i	nvestme		mpany Act	01 1940	,										
1. Name and Address of Reporting Person [*] SAIC, Inc.					2. Issuer Name and Ticker or Trading Symbol											5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner								
(Last) (First) (Middle) 1710 SAIC DRIVE					_	3. Date of Earliest Transaction (Month/Day/Year) 09/19/2013										Officer (give title Other (specify below) below)								
						lf An	nend	lment,	Date c	f Origina	l Filec	I (Month/Da			al or Jo	oint/Grou	p Filir	ng (Check	Applicable					
(Street) MCLEAN VA 22102																	Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person							
(City)	(State) (Zip)																							
		Tab	le I - No	n-Deri	vativ	e S	ecu	uritie	s Aco	quired	, Dis	posed o	of, or	Bene	efici	ally Ov	vned							
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					ay/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				4 and Securi Benefi		icially d Following		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount	(A) (D)	(A) or (D) Price		Trancactio		tion(s)			(
Common Stock 09					9/2013	3				J ⁽¹⁾		1(2)	D \$		\$ <mark>0.</mark>	00	0 0		I		See footnote ⁽³⁾			
		Ta										osed of, onvertib					ed							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,	4. Transacti Code (Ins 8)		tion of		6. Date Exerci Expiration Dat (Month/Day/Ye		e	7. Title and Amount of Securities Underlying Derivative Security (Instr and 4)		str. 3	8. Price Derivati Security (Instr. 5)	ve de / Se) Be Ov Fo Re Tra	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)		(D)	Date Exercisable		Expiration Date	Title	Amo or Num of Shar	nber									
1. Name ar <u>SAIC</u> ,		Reporting Person*																						
(Last) 1710 SA	IC DRIVE	(First)	(Mid	dle)																				
(Street) MCLEA	N	VA	221	02																				
(City)		(State)	(Zip)																					
		Reporting Person [*]	INTER	<u>NATI(</u>	<u>DNA</u>	L																		
(Last) 1710 SA	IC DRIVE	(First)	(Mid	dle)																				
(Street) MCLEA	N	VA	221	02																				
(City)		(State)	(Zip))																				

Explanation of Responses:

1. The record date for the distribution of all of the SAIC Gemini, Inc. common stock owned by SAIC, Inc. ("Parent") to the holders of Parent common stock was September 19, 2013. Parent is expected to distribute all of the common stock of SAIC Gemini, Inc. on September 27, 2013.

2. The reported disposition represents 100% of the Reporting Person's equity holdings in SAIC Gemini, Inc. on the record date.

3. This share is held by Science Applications International Corporation. SAIC, Inc. is the sole stockholder of Science Applications International Corporation.

/s/ Raymond L. Veldman, as <u>Authorized Officer for SAIC</u>,

09/23/2013

Inc.

/s/ Raymond L. Veldman, as Authorized Officer for Science 09/23/2013 **Applications International Corporation** Date

** Signature of Reporting Person

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.