

Stanley, Inc.
Form 3
October 17, 2006

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â Chaplin Scott David		(Month/Day/Year)	Stanley, Inc. [SXE]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
		10/17/2006		
C/O STANLEY, INC.,Â 3101 WILSON BOULEVARD, SUITE 700			(Check all applicable)	
(Street)			<input type="checkbox"/> Director	<input type="checkbox"/> 10% Owner
			<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Other
			(give title below) (specify below)	
			General Counsel	
ARLINGTON,Â VAÂ 22201			6. Individual or Joint/Group Filing(Check Applicable Line)	
(City)	(State)	(Zip)	<input checked="" type="checkbox"/> Form filed by One Reporting Person	
			<input type="checkbox"/> Form filed by More than One Reporting Person	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	240 ⁽¹⁾	I	By spouse

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

SEC 1473 (7-02)

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 control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Option to buy	Â (2)	11/07/2015	Common Stock	15,000	\$ 5.5	D	Â
Option to buy	Â (3)	05/04/2016	Common Stock	15,000	\$ 7.86	D	Â
Option to buy	Â (3)	05/04/2016	Common Stock	1,500	\$ 7.86	I	By spouse

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Chaplin Scott David C/O STANLEY, INC. 3101 WILSON BOULEVARD, SUITE 700 ARLINGTON, VA 22201	Â	Â	Â General Counsel	Â

Signatures

By: /s/ Scott D. Chaplin 10/17/2006

**Signature of Reporting Person Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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).
- (1) Includes 240 shares held in trust for Stephanie A. Chaplin, Mr. Chaplin's spouse, under the Stanley, Inc. Employee Stock Ownership Plan.
- (2) These options vest over a five year period beginning on date of grant, November 7, 2005, with a final vesting date of November 7, 2010. None are currently exercisable. All of the unvested options will vest upon completion of an initial public offering.
- (3) These options vest over a five year period beginning on date of grant, May 4, 2006, with a final vesting date of May 4, 2011. None are currently exercisable and none will vest upon completion of an initial public offering.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.