



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2615  
401.222.3040

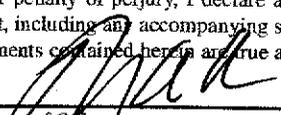
**NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2007**

Filing Period: June 1 - June 30 • Filing Fee: \$20.00 \* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK  
\* In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

1. Corporate ID No. <b>15765Z</b>		2. Name of Corporation <b>THE Q FOUNDATION, INC</b>	
3. State of Incorporation <b>R.I.</b>		4. Corporate address in Rhode Island Street Address <b>P.O. BOX 221</b>	
		City <b>E. GREENWICH</b>	Zip <b>02818</b>
5. Foreign corporation. Enter principal office address <b>NOT A FOREIGN CORP</b>		City	State
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island <b>ACTIVITIES TO ENABLE CHARITABLE CONTRIBUTIONS</b>			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name <b>THOMAS A. KIERMAN</b>		Vice President Name <b>STEVEN A KING</b>	
Street Address <b>111 WINDCAMEL WAY</b>		Street Address <b>55 CHESTNUT DR.</b>	
City <b>WARWICK</b>	State <b>RI</b>	City <b>E. GREENWICH</b>	State <b>RI</b>
Zip <b>02886</b>		Zip <b>02818</b>	
Secretary Name <b>SAME AS ABOVE</b>		Treasurer Name <b>SAME AS ABOVE</b>	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23			
Director Name <b>LEONARD A KIERMAN III</b>		Director Name <b>PAUL A. STASIWK</b>	
Street Address <b>50 5TH STREET</b>		Street Address <b>175 HAMILTON ALLEN RD</b>	
City <b>E. GREENWICH</b>	State <b>RI</b>	City <b>N. KINGSTOWN</b>	State <b>RI</b>
Zip <b>02818</b>		Zip <b>02852</b>	
Director Name <b>THOMAS A. KIERMAN</b>		Director Name <b>STEVEN A. KING</b>	
Street Address <b>111 WINDCAMEL WAY</b>		Street Address <b>55 CHESTNUT DR</b>	
City <b>WARWICK</b>	State <b>RI</b>	City <b>E. GREENWICH</b>	State <b>RI</b>
Zip <b>02886</b>		Zip <b>02818</b>	
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 R.I.G.L. 7-6-15 / 7-6-78			
Agent Name <b>MICHAEL S. KIERMAN ESQ</b>		Address	
Address <b>91 FRIENDSHIP ST</b>		City <b>PROVIDENCE</b>	Zip <b>02903</b>

The report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer  Date **1-4-07**  
 Print or Type Name of Officer **THOMAS A. KIERMAN**  
 Title of Officer **PRESIDENT**

**FILED**  
 File Date **MAR 31 2008**  
 Check No.  
 By **JOHN**  
 FOR SECRETARY OF STATE USE ONLY