



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

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Non-Profit Corporation
Annual Report**

Filing Period: June 1 - June 30

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.

ANNUAL REPORT YEAR: 2016

1. Corporate ID No. 000092889

2. Name of Corporation Slater Technology Fund, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 3 DAVOL SQUARE, SUITE A340

City or Town: PROVIDENCE

State: RI Zip: 02903 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO SUPPORT SCIENTIFIC RESEARCH AND DEVELOPMENT IN THE PUBLIC INTEREST.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	RICHARD HORAN	C/O 3 DAVOL SQUARE PROVIDENCE, RI 02903 USA
VICE PRESIDENT	THORNE SPARKMAN	C/O 3 DAVOL SQUARE PROVIDENCE, RI 02903 USA
DIRECTOR	GEOFFREY DAVIS	C/O BARKER DAVIS LAW

		PROVIDENCE, RI 02903 USA
DIRECTOR	JAMES C. MAYNARD	SILICONVALLEY BANK NEWTON, MA 01462 USA
DIRECTOR	KATHERINE GORDON	BROWN UNIVERSITY PROVIDENCE, RI 02912 USA
DIRECTOR	WILLIAM FOULKES	RISD PROVIDENCE, RI 02903 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

RICHARD G. HORAN 3 DAVOL SQUARE, SUITE A340, MB 188 PROVIDENCE , RI 02903

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 18 Day of May, 2016 at 11:42:05 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By RICHARD G. HORAN
Signature of Authorized Person

Form No. 631
Revised 09/07

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