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

Foreign Non-Profit 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. 001335044

2. Name of Corporation Working Families Organization, Inc.

3. State of Incorporation

State: NY

4. Corporate Address in Rhode Island

No. and Street: 222 JEFFERSON BOULEVARD, SUITE 200
City or Town: WARWICK State: RI Zip: 02888 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: ONE METROTECH NORTH

City or Town: BROOKLYN State: NY Zip: 11201 Country:

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

SOCIAL WELFARE ORGANIZATION WITH THE PURPOSE TO PROMOTE AND IMPROVE THE LIVES OF THE MIDDLE CLASS AND POOR PEOPLE

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
CHAIR, DIRECTOR	ROBERT MASTER	458 14TH STREET BROOKLYN , NY 11215 USA
TREASURER, DIRECTOR	CORINNE RAFFERTY	3901 HARRIET AVE MINNEAPOLIS , MN 55409 USA
SECRETARY, DIRECTOR	JULIE KUSHNER	2105 1ST AVENUE S MINNEAPOLIS , MN 55404 USA
DIRECTOR	HARRIET BARLOW	2015 IRVING AVENUE SOUTH

		MINNEAPOLIS , MN 55405 USA
DIRECTOR	DALE WIEHOFF	2105 1ST AVENUE S MINNEAPOLIS, MN 55404 USA
DIRECTOR	DAN CANTOR	ONE METROTECH NORTH BROOKLYN, NY 11201 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

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD SUITE 200 WARWICK , RI 02888

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

Signed this 30 Day of June, 2016 at 1:23:29 PM 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 CORRINE RAFFERTY
Signature of Authorized Person

Form No. 631
Revised 09/07