

 Department of State - Business Services Division

Annual Report for the year: **2018**

Benefit Profit Corporation

→ Filing period: within 120 days following the end of the fiscal year

→ Filing Fee: \$60.00

→ Penalty: Additional \$25.00 fee if form is not filed within 150 days of the fiscal year end.

1. Entity ID Number 1657638		2. Exact name of the Corporation Rhode Races Events Inc	
3. Principal Office Address 3 Mayo Dr.		City Warren	State RI
		Zip 02885	
4. NAICS Code 711310		5. State of Incorporation Rhode Island	
6. Brief description of the character of business conducted in Rhode Island Rhode Races produces and executes marathons, half marathons, 5ks and other sporting events. Karen			
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐			
President Name Karen Zyons		Vice-President Name Susan Rancourt	
Street Address 14 Hopkins Lane		Street Address 3 Mayo Dr	
City Peacedale	State RI	City Warren	State RI
Zip 02883		Zip 02885	
Secretary Name Karen Zyons		Treasurer Name Susan Rancourt	
Street Address 14 Hopkins Lane		Street Address 3 Mayo Dr.	
City Peacedale	State RI	City Warren	State RI
Zip 02883		Zip 02885	
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐			
Director Name As above		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
9. Shares Authorized Check the box to indicate an attachment ☐			
This information is currently of record in the Department of State. Changes require an additional filing.			
Check if stock is publicly traded. ☐			
10. Shares Issued Check the box to indicate an attachment ☐			
NUMBER OF SHARES		CLASS/SERIES	
PAR VALUE			
100	common	.01	
100	common	.01	

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov

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ing provisions require a narrative description:

in which the benefit corporation pursued general public benefit during the year and the extent to which general public benefit

ed:
developed a company culture that promotes a healthy lifestyle, fosters self-esteem and goal attainment. We have
committed to reducing our environmental impact by reviewing and changing our trash protocols and usage.

b. The ways in which the benefit corporation pursued a specific public benefit that the Articles of Incorporation state is the purpose of the benefit corporation and the extent to which that specific public benefit was created:

We actively search out and make monetary as well product donations to local charities. We provide free entries to local groups looking to raise money for programs and causes. We support local running teams through mentoring, coaching and donations.

c. Any circumstances that have hindered the creation by the benefit corporation of general public benefit or specific public benefit:

None.

d. The process and rationale for selecting or changing the third-party standard used to prepare the benefit report:

We measure ourselves against the Council for Responsible Sport. They are the industry standard for determining best practices for sporting events in ethical, environmental and responsible road races.

e. Provide an assessment of the overall social and environmental performance of the benefit corporation against a third-party standard, either applied consistently with any application of that standard in prior benefit reports or accompanied by an explanation of the reasons for any inconsistent application or the change to that standard from the one used in the immediately prior report:

We have donated over 100 lbs of food and over \$30,000 to charity. We eliminated over 6700 gallon bottles by switching to our hydration protocols. We hosted athletes from 46 states and 13 countries to provide an economic impact to our communities through travel, lodging and meals income. We treat our runners like guests in our home,

f. Name and address of the Benefit Director: *(Required if stock is publicly traded.)*

Robert Johnson, 83 Sherry Ave., Bristol, RI 02809

g. Name and address of the Benefit Officer: *(If not applicable, state "NONE.")*

NONE

h. The statement of the benefit director described in subsection 7-5.3-8(c):

In 2017 Rhode Races has continued the local running community and many other related organizations while reasonably appearing to have a positive material effect on the public benefit, even expanding their offerings to more races that support local charities. They have complied with all directives described under the articles of a benefit

i. A statement of any connection between the organization that established the third-party standard, or its directors, officers or any holder of 5% or more of the governance interests in the organization and the benefit corporation or its directors, officers or any holder of 5% or more of the outstanding shares of the benefit corporation. The statement should include any financial or governance relationship which might materially affect the credibility of the use of the third-party standard:

There is no financial connection between the benefit officer and the Rhode Races

j. If the benefit corporation has dispensed with, or restricted the discretion or powers of the board of directors, indicate the persons that exercise the powers, duties, and rights and who has the immunities of the board of directors. Name(s) and address of the person(s) that exercise the powers, duties and rights of a benefit director:

n/a

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FORM 633 - Revised:08/2017

during the year covered by this benefit report, a benefit director resigned from or refused to stand for reelection to the position of benefit director, or was removed from the position, and the benefit director furnished the benefit corporation with any written correspondence concerning the circumstances surrounding the resignation, refusal, or removal, the benefit report shall include that correspondence as an exhibit.

12. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the 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.

Name of Authorized Representative

Susan Rancourt

Date

27 Feb 2018

Signature of Authorized Representative

 SIGN DCZUWENT HERE

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