RI SOS Filing Number: 201870199030 Date: 6/21/2018 4:00:00 PM

State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2018
Non-Profit Corporation

→ Filing period: June 1 - June 30
→ Filing Fee: $20.00
→ Penalty: Additional $25.00 fee if form is not filed by July 30.

1. Entity ID Number	2. Exact name of the Corporation
000119204	**Rhode Island Public Interest Research Group Education Fund, INC**
3. State of Incorporation: **Rhode Island**	5. Brief description of the character of business conducted in Rhode Island: **RIPIRG Education Fund is an independent, non-partisan group that works for consumers and the public interest. Through research, public education and outreach, we serve as counterweights to the influence of powerful special interests that threaten our health, safety, or well-being.**
4. NAICS Code: 813211	

6. Principal Office Address	City	State	Zip
11 S. Angell Street, PO Box 150	**Providence**	**RI**	**02906**

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name: **Kate Strousse Canada**			Vice-President Name:		
Street Address: **11 S. Angell Street, PO Box 150**			Street Address:		
City: **Providence**	State: **RI**	Zip: **02906**	City:	State:	Zip:
Secretary Name: **Ken Sebesta**			Treasurer Name: **Molly Chafetz**		
Street Address: **11 S. Angell Street, PO Box 150**			Street Address: **11 S. Angell Street, PO Box 150**		
City: **Providence**	State: **RI**	Zip: **02906**	City: **Providence**	State: **RI**	Zip: **02906**

8. List ALL directors (names and addresses). RI Corporations **MUST** list at least **THREE** directors. — Check the box to indicate an attachment ☐

Director Name: **Faye Park**			Director Name: **Carla Musumeci**		
Street Address: **1543 Wazee Street, Suite 400**			Street Address: **1543 Wazee Street, Suite 400**		
City: **Denver**	State: **CO**	Zip: **80202**	City: **Denver**	State: **CO**	Zip: **80202**
Director Name: **Emily Kelly-Fischer**			Director Name:		
Street Address: **1543 Wazee Street**			Street Address:		
City: **Denver**	State: **CO**	Zip: **80202**	City:	State:	Zip:

9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.

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.

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

Name of Officer/Authorized Representative	Date
Emily Kelly-Fischer	**6/18/18**

Signature of Officer/Authorized Representative: Emily Kelly-Fischer SIGN DOCUMENT HERE

FILED
JUN 21 2018
BY 1970

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FORM 631 - Revised: 11/2017