State of	of Rhode Island and Pro Office of the Secreta		Fee: \$50.00				
	Division Of Business Services 148 W. River Street Providence RI 02904-2615						
HOPE	(401) 222-304	+0					
Foreign Business Corpora Annual Report Filing Period: January 1 - March 1	ation						
In accordance with R.I.G.L. 7-1.2-							
annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501 (c&d)) is subject to a penalty fee of \$25.00.							
ANNUAL REPORT YEAR: 2019							
1. Corporate ID No. 001690319							
2. Name of Corporation State Farm Investment Management Corp.							
3. Street Address Principal Business Office:							
No. and Street: ONE STATE	E FARM PLAZA D-2						
City or Town: BLOOMING		State: IL Zip: 61710 Country	y: USA				
4. Business Phone No.							
5. State of Incorporation							
State: <u>DE</u>							
	ARTICLE III						
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.							
<u>523120</u>							
6. Brief Description of the Cha	racter of Business Conducte	d in Rhode Island					
INVESTMENT ADVISOR							
7. Names and Addresses of the Officers and Directors:							
All officers and directors must be listed.							
Title	Individual Name	Address					
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code,	Country				
PRESIDENT	MICHAEL L TIPSORD	ONE STATE FARM PLAZA BLOOMINGTON, IL 61710 USA					
TREASURER	TERRANCE LUDWIG	ONE STATE FARM PLAZA	D-2				

		BLOOMINGTON, IL 61710 USA
SECRETARY	SCOTT HINTZ	ONE STATE FARM PLAZA D-2 BLOOMINGTON, IL 61710 USA
DIRECTOR	JOE R MONK JR.	ONE STATE FARM PLAZA D-2 BLOOMINGTON, IL 61710 USA
DIRECTOR	RAND HARBERT	ONE STATE FARM PLAZA D-2 BLOOMINGTON, IL 61710 USA
DIRECTOR	MICHAEL L. TIPSORD	ONE STATE FARM PLAZA D-2 BLOOMINGTON, IL 61710 USA
DIRECTOR	LISA STEWART	ONE STATE FARM PLAZA D-2 BLOOMINGTON, IL 61710 USA

## 8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issued and Outstanding <i>Num of</i> <i>Shares</i>
CWP		\$1.0000	20,000.00	4000

9. 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.

**Signed this 25 Day of February, 2019 at 9:37:54 AM.** 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 corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.

## By SCOTT HINTZ

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

 $\textcircled{\mbox{\sc only}}$  2007 - 2019 State of Rhode Island and Providence Plantations All Rights Reserved