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: 2019

1. Corporate ID No. 000045164

2. Name of Corporation RHODE ISLAND PBS FOUNDATION

3. State of Incorporation

State: RI

ARTICLE III

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification click here.

NAICS Code 6

813990

4. Corporate Address in Rhode Island

No. and Street: 50 PARK LANE
City or Town: PROVIDENCE State: RI Zip: 02907 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 FAISE FUNDS AND PROVIDE SUPPORT SOLELEY FOR THE BENEFIT OF THE RI PUBLIC TELECOMMUNICATIONS AUTHORITY FOR SO LONG AS SUCH AUTHORITY OWNS AND OPERATES NON-COMMERICAL TELEVISION STATION(S). TO ACQUIRE AND HOLD THE LICENSES FOR NON-COMMERICAL TELEVISION AND RADIO STATIONS AND TO OWN AND OPERATE SUCH STATIONS FOR THE ADVANCEMENT OF EDUCATIONAL PROGRAMS

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	DAVID W. PICCERELLI	50 PARK LANE PROVIDENCE, RI 02907 USA
TREASURER	TRACY SMITH	145 RABBITT HILL RD. CUMBERLAND, RI 02864 USA
SECRETARY	TIA SCIGULINSKY	368 SEAMEADOW DR. PORTSMOUTH, RI 02871 USA
CHAIRPERSON	JAMES LEACH	500 BLACKSTONE BLVD. PROVIDENCE, RI 02906 USA
DIRECTOR	ROGER P. BOUDREAU	211 OAKWOODS DRIVE WAKEFIELD, RI 02879 USA
DIRECTOR	TIA SCIGULINSKY	368 SEAMEADOW DR. PORTSMOUTH, RI 02871 USA
DIRECTOR	WILLIAM C. MAAIA	349 WARREN AVE. EAST PROVIDENCE, RI 02914 USA
DIRECTOR	MEREDITH CURREN	10 DAVOL SQ., STE. 200 PROVIDENCE, RI 02903 USA
DIRECTOR	DAVID W. PICCERELLI	50 PARK LANE PROVIDENCE, RI 02907 USA
DIRECTOR	DANTE BELLINI	24 FOREST VIEW DR NORTH PROVIDENCE, RI 02904 USA
DIRECTOR	JACK LYLE	82 CARRIAGE DR LINCOLN, RI 02865 USA
DIRECTOR	SUZANNE COSTA	27 OLD CHIMNEY RD. BARRINGTON, RI 02806 USA
DIRECTOR	ELIZABETH DELUDE-DIX	1070 EAST SHORE RD. JAMESTOWN, RI 02835 USA
DIRECTOR	JAMES LEACH	500 BLACKSTONE BLVD. PROVIDENCE, RI 02906 USA
DIRECTOR	TRACY SMITH	145 RABBITT HILL RD. CUMBERLAND, RI 02864 USA
DIRECTOR	KAS DECAVALHO	68 BOWDEN AVE. BARRINGTON, RI 02806 USA
DIRECTOR	DAVID LAVERTY	15 JASON'S GRANT DR. CUMBERLAND, RI 02864 USA
DIRECTOR	DEBORAH JACOBSON	166 ARLINGTON AVE. PROVIDENCE, RI 02906 USA
DIRECTOR	DENISE PARENT	73 EVERETT AVE. PROVIDENCE, RI 02906 USA
DIRECTOR	JOHN PALUMBO	717 ALLENS AVE. PROVIDENCE, RI 02905 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

DAVID W. PICCERELLI 50 PARK LANE PROVIDENCE , RI 02907

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

Signed this 13 Day of May, 2019 at 11:17:34 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 DAVID W. PICCERELLI
Signature of Authorized Person

Form No. 631
Revised 09/07

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