



**State of Rhode Island  
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:** 2020

**1. Corporate ID No.** 001659945

**2. Name of Corporation** The Rhode Island Turnpike and Bridge 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

813219

**4. Principal Office Address**

No. and Street: P. O. BOX 437

City or Town: JAMESTOWN

State: RI

Zip: 02835

Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:

City or Town:      State:      Zip:      Country:

**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**

(A) THE PURPOSES OF THE CORPORATION ARE: (I) TO ORGANIZE AND OPERATE ROAD RACES ON THE FACILITIES OF THE RHODE ISLAND TURNPIKE AND BRIDGE AUTHORITY IN ORDER TO PROMOTE HEALTH AND WELLNESS WITHIN THE COMMUNITY AND TO RAISE MONEY FOR LOCAL CHARITIES; AND (II) TO PROVIDE FINANCIAL SUPPORT TO CHARITABLE CAUSES WITHIN OR WITHOUT THE STATE OF RHODE ISLAND. (B)THE CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE AND EDUCATIONAL PURPOSES, AND THE MAKING OF DISTRIBUTIONS

TO ORGANIZATIONS WHICH QUALIFY AS EXEMPT ORGANIZATIONS UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE OF 1986, AS AMENDED, OR THE CORRESPONDING SECTION OF ANY FUTURE UNITED STATES INTERNAL REVENUE CODE.

**6. Names and Addresses of the Officers and Directors:**

**All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	JUDITH MORSE	1 EAST SHORE ROAD JAMESTOWN, RI 02835 USA
TREASURER	STEPHEN C. WALUK	1 EAST SHORE ROAD JAMESTOWN, RI 02835 USA
SECRETARY	WILLIAM E. OGARA	1301 ATWOOD AVENUE, SUITE 215 N JOHNSTON, RI 02919 USA
DIRECTOR	STEPHEN C. WALUK	1 EAST SHORE ROAD JAMESTOWN, RI 02835 USA
DIRECTOR	JUDITH MORSE	1 EAST SHORE ROAD JAMESTOWN, RI 02835 USA
DIRECTOR	WILLIAM E. OGARA	1301 ATWOOD AVENUE, SUITE 215 N JOHNSTON, RI 02919 USA
DIRECTOR	RICHARD O'NEILL	1 EAST SHORE ROAD JAMESTOWN, RI 02835 USA

**7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER**  
**Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

EARL CROFT, III 1 EAST SHORE ROAD JAMESTOWN , RI 02835

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

*Signed this 1 Day of March, 2021 at 3:04:01 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 WILLIAM E. O'GARA  
Signature of Authorized Person

Form No. 631  
Revised 09/07