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: 2021

1. Corporate ID No. 001707014

2. Name of Corporation Renew New England Alliance

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

813319

4. Principal Office Address

No. and Street: 91 WILLIAMS ST.
City or Town: PROVIDENCE State: RI Zip: 02906 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

THE CORPORATION IS ORGANIZED FOR SUCH EDUCATIONAL AND CHARITABLE PURPOSES AS SHALL QUALIFY IT FOR EXEMPTION FROM FEDERAL TAXATION UNDER
SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, INCLUDING, BUT NOT LIMITED TO, RESEARCH AND EDUCATION TO PROTECT AND IMPROVE THE NATURAL ENVIRONMENT AND ADVANCE ECONOMIC AND RACIAL EQUITY BY PRODUCING AND

EXECUTING A DECARBONIZATION AND JUST TRANSITION PLAN THAT WILL ENTAIL COORDINATING AND ALIGNING REGIONAL POLICY DEVELOPMENT, GRASSROOTS ORGANIZING, AND COLLECTIVE INTERSTATE GOVERNANCE ACROSS SIX STATES.

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.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
INCORPORATOR	MATTHEW BROWN	91 WILLIAMS ST. PROVIDENCE, RI 02906 USA
DIRECTOR	MATTHEW BROWN	91 WILLIAMS ST. PROVIDENCE, RI 02906 USA
DIRECTOR	VIVEK MARU	1224 W ST. NW WASHINGTON, DC 20009 USA
DIRECTOR	MARIAMA WHITE-HAMMOND	62 ROMSEY STREET, UNIT 3 DORCHESTER, MA 02125 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

MATTHEW BROWN 91 WILLIAMS ST. PROVIDENCE , RI 02906

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

Signed this 28 Day of June, 2021 at 5:00:28 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 LEO STEVENSON
Signature of Authorized Person

Form No. 631
Revised 09/07