



**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: February 1 - May 1

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: 2023

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

813219

4. Principal Office Address

No. and Street: 1 EAST SHORE ROAD

City or Town: JAMESTOWN

State: RI

Zip: 02835

Country: USA

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

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.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	STEPHEN C. WALUK	1 EAST SHORE ROAD JAMESTOWN, RI 02835 USA
TREASURER	RICHARD O'NEILL	1 EAST SHORE ROAD JAMESTOWN, RI 02835 USA
SECRETARY	WILLIAM E. O'GARA	1301 ATWOOD AVENUE, SUITE 215 N JOHNSTON, RI 02919 USA
DIRECTOR	WILLIAM E. O'GARA	1301 ATWOOD AVENUE, SUITE 215 N JOHNSTON, RI 02919 USA
DIRECTOR	EARL J. CROFT, III	1 EAST SHORE ROAD JAMESTOWN, RI 02835 USA
DIRECTOR	STEPHEN C. WALUK	1 EAST SHORE ROAD JAMESTOWN, RI 02835 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

WILLIAM E. O'GARA, ESQ. NORTHWOODS OFFICE PARK 1301 ATWOOD AVENUE, SUITE 215N
JOHNSTON , RI 02919

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 February, 2023 at 10:04:28 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 WILLIAM E. O'GARA
Signature of Authorized Person

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