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State of Rhode Island

## **Department of State - Business Services Division**

Annual	Report 1	for the	year:			
Non-Profit Corporation						

2023

7073 APR 28 A 11: 48

-> Filing period February 1 - May 1

→ Filing Fee \$20.00

-> Penalty Additional \$25 00 fee if form is not filed by May 31.

	1013 Well 22							
Entity ID Number	2. Exact name of the Corporation							
28292	Catholic Foundation of Rhode Island							
3. State of Incorporation	5. Brief description of the character of business conducted in Rhode Island							
Rhode Island	Religious, charitable and educational activities.							
4. NAICS Code	, , , , , , , , , , , , , , , , , , , ,							
813110 - Religious Organizations								
6. Principal Office Address	ncipal Office Address			State	Zıp			
One Cathedral Square			Providence	RI	02903			
7 List ALL officers (names and addresses)  Check the box to indicate an attachment								
President Name Most Reverend Thomas J. Tobin			Vice-President Name Rev. Msgr. Albert A. Kenney					
Street Address One Cathedral Square			Street Address One Cathedral Square					
<sup>City</sup> Providence	State RI	<sup>Zip</sup> 02903	City Providence	State RI	<sup>Zip</sup> 02903			
Secretary Name Rev. Timothy D. Reilly			Treasurer Name Most Reverend Thomas J. Tobin					
Street Address One Cathedral Square			Street Address One Cathedral Square					
<sup>City</sup> Providence	State RI	<sup>Zip</sup> 02903	City Providence	State RI	<sup>Zip</sup> 02903			
8. List ALL directors (names and addresses) RI Corporations MUST list at least THREE directors.  Check the box to indicate an attachment								
Director Name Most Reverend Thomas J. Tobin			Director Name Rev. Msgr. Albert A. Kenney					
Street Address One Cathedral Square			Street Address One Cathedral Square					
<sup>City</sup> Providence	State R1	<sup>Zip</sup> 02903	City Providence	Stale RI	<sup>Z<sub>IP</sub></sup> 02903			
Director Name Rev. Timothy D. Reilly			Director Name Rev. Msgr. Raymond B. Bastia					
Street Address One Cathedral Square			Street Address One Cathedral Square					
<sup>City</sup> Providence	State RI	<sup>Z<sub>ip</sub></sup> 02903	<sup>City</sup> Providence	State RI	<sup>Zıp</sup> 02903			
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641								
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.								
This report must be signed by either the President, Vice-President, Secretary Assistant Secretary Treasurer, duly Authorized Representative, Receiver or Trustee								
Name of Officer/Authorized Representative								
Rev. Timothy D. Reilly, Secretary					123			
Signature of Office /Authorized Representative								
	3411	No.	FILED					
MAIL TO:	1	- 1						

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

FORM 631 - Revised: 11/2021

## ADDITIONAL OFFICER:

**Assistant Treasurer** 

Michael Sabatino One Cathedral Square Providence, RI 02903

Assistant Secretary

Richard Popovic One Cathedral Square Providence, RI 02903

ADDITIONAL DIRECTORS

Michael Sabatino One Cathedral Square Providence, RI 02903