



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2020

Corporation

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV

2023 NOV 14 A 11: 58

1. Entity ID Number 000555550		2. Exact name of the Corporation Deltek, Inc.			
3. Principal Office Address 2291 Wood Oak Drive			City Herndon	State VA	Zip 20171
4. NAICS Code 541519		6. Brief description of the character of business conducted in Rhode Island Sale, licensing, maintenance, support and consulting services for proprietary software solutions			
5. State of Incorporation DE					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input checked="" type="checkbox"/>					
President Name See attached			Vice-President Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input checked="" type="checkbox"/>					
Director Name See attached			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment <input checked="" type="checkbox"/>			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	
		see attached			
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee. 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.					
Name of Authorized Representative John K. Stipancich				Date Oct. 27, 2023	
Signature of Authorized Representative 				FILED	

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

NOV 14 2023

BY ML 516 YP

FORM 630- Revised: 04/2023

ID # 000555550

Title	Name	Address
CEO, President	Michael Corkery	2291 Wood Oak Drive, Herndon, VA 20171
CFO, Sr. VP	Michael Krone	2291 Wood Oak Drive , Herndon, VA 20171
Asst. Secretary	Salman Ahmad	2291 Wood Oak Drive , Herndon, VA 20171
VP, Asst. Secretary	Tracy Schampers	2291 Wood Oak Drive , Herndon, VA 20171
VP, Secretary, Director	John K. Stipancich	6496 University Parkway, Sarasota, FL 34240
VP, Asst. Secretary, Director	Jason Conley	6496 University Parkway, Sarasota, FL 34240
VP	Christina Able	6496 University Parkway, Sarasota, FL 34240
Director	Brandon Cross	6496 University Parkway, Sarasota, FL 34240

Number of Shares Issued	Class/Series	Par Value
0	CWP	0.0010
1000	PWP	0.0010
0	CWP	0.0010