State of Rhode Island
Department of State - Business Services Division

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Annual Report for the year: 2023
Non-Profit Corporation

→ Filing period: February 1 - May 1
→ Filing Fee: $20.00
→ Penalty: Additional $25.00 fee if form is not filed by May 31.

1. Entity ID Number	2. Exact name of the Corporation
001746245	Rhode Island School of Design Part-Time Faculty Association
3. State of Incorporation: RI	5. Brief description of the character of business conducted in Rhode Island: Develop and improve working conditions for Rhode Island School of Design Part-Time Faculty
4. NAICS Code: 813930	

6. Principal Office Address	City	State	Zip
2 College St., #2	Providence	RI	02903

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name: Gloria-Jean Masciarotte			Vice-President Name: Ernesto Aparicio		
Street Address: 2 College Street			Street Address: 2 College Street		
City: Providence	State: RI	Zip: 02903	City: Providence	State: RI	Zip: 02903
Secretary Name: Susan Solomon			Treasurer Name: Andrew Savchenko		
Street Address: 2 College Street			Street Address: 2 College Street		
City: Providence	State: RI	Zip: 02903	City: Providence	State: RI	Zip: 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: Gloria-Jean Masciarotte			Director Name: Susan Solomon		
Street Address: 2 College Street			Street Address: 2 College Street		
City: Providence	State: RI	Zip: 02903	City: Providence	State:	Zip: 02903
Director Name: Andrew Savchenko			Director Name:		
Street Address: 2 College Street			Street Address:		
City: Providence	State: RI	Zip: 02903	City:	State:	Zip:

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	Date
Gloria-Jean Masciarotte	**6/22/24**

Signature of Officer/Authorized Representative: G Masciarotte

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BY

MAIL TO:
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 12/2023

State of Rhode Island

Department of State - Business Services Division

The Department of State tracks the number of new business filings on a quarterly and an annual basis.
We are seeking more information from non-profit corporations and hope these four voluntary questions will help us better present useful trends and information on the health of our economy:

Entity ID Number:	Name of the Non- Profit Corporation:
001746245	Rhode Island School of Design Part-Time Faculty Association

1. How many full-time employees does the non-profit have:

- [x] 0
- [ ] 1-5
- [ ] 6-50
- [ ] 51-200
- [ ] 201-500
- [ ] Over 500

2. How many volunteers does the non-profit have:

- [x] 0
- [ ] 1-5
- [ ] 6-50
- [ ] 51-200
- [ ] 201-500
- [ ] Over 500

3. What was the non-profit's operating budget for the past year:

- [ ] $0-$50,000
- [x] $51,000-$250,000
- [ ] $251,000-$500,000
- [ ] $501,000-$1,000,000
- [ ] Over $1,000,000

4. Identify the funding sources that contributed to the non-profit's operating budget for the past year:

- [ ] Federal Grants
- [ ] State Grants
- [ ] Donations
- [x] Fee-for-service
- [ ] Fundraising

Please note that all records maintained by or kept on file by the Department of State shall be public records unless exempt from disclosure in accordance with RIGL 38-2 Access to Public Records.

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