



State of Rhode Island
Department of State - Business Services Division

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.

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1. Entity ID Number 001745434		2. Exact name of the Corporation GHD Foundation (USA)			
3. State of Incorporation Delaware		5. Brief description of the character of business conducted in Rhode Island Grant making foundation			
4. NAICS Code 813211					
6. Principal Office Address 4747 N. 22nd Street, Suite 200		City Phoenix		State AZ	Zip 85016
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input checked="" type="checkbox"/>					
President Name Iver Skavdal			Vice-President Name		
Street Address 718 Third Street			Street Address		
City Eureka	State ME	Zip 95501	City	State	Zip
Secretary Name Patricia Osoko			Treasurer Name Michael Moran		
Street Address 455 Phillip Street			Street Address 6075 Millcreek Drive, Suite 1		
City Waterloo	State ON	Zip N2L3X2	City Mississauga, Ontario	State Canada	Zip L5M 5M
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input checked="" type="checkbox"/>					
Director Name Ashley J. Wright			Director Name Joanne Metcalfe		
Street Address 999 Hay Street			Street Address 16 Marcus Clarke Street, Level 7		
City Perth, AU	State	Zip 6000	City Canberra, AU	State	Zip ACT 20
Director Name May-Ngui			Director Name Robert Davis		
Street Address 16 Marcus Clarke Street, Level 7			Street Address 16111 Hollister Street		
City Canberra, AU	State	Zip ACT 2601	City Houston	State TX	Zip 77066
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 PATRICIA OSOKO, SECRETARY					Date 4 July 2024
Signature of Officer/Authorized Representative <i>P. Osoko</i>					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

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FORM 631- Revised 12/2023

7. List ALL officers names and addresses continued:

Maria Erassova	Assistant Vice President - Tax	6075 Millcreek Drive, Suite 1 Mississauga, ON L5M 5M4, CA
Lindsay Ray	Assistant Secretary	455 Phillip Street Waterloo, ON N2L 3X2, CA

8. List ALL directors continued:

Robert Knott	7/16 Marcus Clarke St Canberra ACT 2601, AU
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