



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2025

Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

2025 JUN -6 AM 11:55

1. Entity ID Number 001702447		2. Exact name of the Corporation Sight Sciences, Inc.	
3. Principal Office Address 4040 Campbell Ave, Suite 100		City Menlo Park	State CA
		Zip 94025	
4. NAICS Code 339115	6. Brief description of the character of business conducted in Rhode Island Sales of ophthalmic and optometric medical devices.		
5. State of Incorporation DE			
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name Paul Badawi		Vice-President Name David Badawi	
Street Address 4040 Campbell Avenue, Suite 100		Street Address 4040 Campbell Avenue, Suite 100	
City Menlo Park	State CA	City Menlo Park	State CA
Zip 94025		Zip 94025	
Secretary Name Jeremy Hayden		Treasurer Name Alison Bauerlein	
Street Address 4040 Campbell Avenue, Suite 100		Street Address 4040 Campbell Avenue, Suite 100	
City Menlo Park	State CA	City Menlo Park	State CA
Zip 94025		Zip 94025	
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input checked="" type="checkbox"/></span>			
Director Name Staffan Encrantz		Director Name David Badawi	
Street Address 4040 Campbell Avenue, Suite 100		Street Address 4040 Campbell Avenue, Suite 100	
City Menlo Park	State CA	City Menlo Park	State CA
Zip 94025		Zip 94025	
Director Name Paul Badawi		Director Name Brenda Becker	
Street Address 4040 Campbell Avenue, Suite 100		Street Address 4040 Campbell Avenue, Suite 100	
City Menlo Park	State CA	City Menlo Park	State CA
Zip 94025		Zip 94025	
9. Shares Authorized This information is currently of record in the Department of State. Changes require an additional filing.		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>	
		NUMBER OF SHARES	CLASS/SERIES
		50,937,999	Common
		0	Preferred
			\$0.0010
			\$0.0010
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 Alison Bauerlein		Date 5/26/2025	
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

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BY: JS&Hy

FORM 630- Revised 12/2023

8. List All Directors - Continued.

Director Name: Tamara Fountain

Street Address: 4040 Campbell Avenue, Suite 100

City: Menlo Park

State: CA

Zip: 94025

Director Name: Erica Rogers

Street Address: 4040 Campbell Avenue, Suite 100

City: Menlo Park

State: CA

Zip: 94025

Director Name: Donald Zurbay

Street Address: 4040 Campbell Avenue, Suite 100

City: Menlo Park

State: CA

Zip: 94025

Director Name: Catherine Mazzacco

Street Address: 4040 Campbell Avenue, Suite 100

City: Menlo Park

State: CA

Zip: 94025