



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2022
 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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 R.I. DEPT. OF STATE
 BUS SVCS DIV

2022 OCT 31 P 1:04

1. Entity ID Number 001716434		2. Exact name of the Corporation Ars Empirica			
3. State of Incorporation RHODE ISLAND		5. Brief description of the character of business conducted in Rhode Island ARS EMPIRICA PROVIDES DATA-CENTRIC AND LOGISTICAL SERVICES, RESEARCH, EDUCATION, AND SUPPORT FOR THE COMMON GOOD.			
4. NAICS Code 813219 - Other Grantmaking and					
6. Principal Office Address 47 BARNES STREET			City PROVIDENCE	State RI	Zip 02906
7. List ALL officers (names and addresses). Check the box to indicate an attachment <input type="checkbox"/>					
President Name DANIEL F. POTTER			Vice-President Name		
Street Address 47 BARNES STREET			Street Address		
City PROVIDENCE	State RI	Zip 02906	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name DANIEL F. POTTER			Director Name LOUIS A SCOTT		
Street Address 47 BARNES STREET			Street Address 13 WENTWORTH AVENUE, FINCHLEY		
City PROVIDENCE	State RI	Zip 02906	City LONDON N3 1YA	State	Zip GBR
Director Name WILLIAM E ZIEFF			Director Name		
Street Address 60 WOODLAWN DRIVE			Street Address		
City CHESTNUT HILL	State MA	Zip 02467	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.					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</i>					
Name of Officer/Authorized Representative Daniel F. Potter				Date 10/31/2022	
Signature of Officer/Authorized Representative <i>Dan Potter</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

OCT 31 2022
 BY *[Signature]* & MKVN 1:06