



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2023
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 JUN 26 P 12:15

1. Entity ID Number 001694726		2. Exact name of the Corporation Tidelift, Inc.	
3. Principal Office Address 50 Milk St., 16th Floor		City Boston	State MA
		Zip 02109	
4. NAICS Code 511210	6. Brief description of the character of business conducted in Rhode Island Provide software as a service for professional development teams		
5. State of Incorporation DE			
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Donald Fischer		Vice-President Name	
Street Address 50 Milk St., 16th Floor		Street Address	
City Boston	State MA	Zip 02109	City Boston
Secretary Name Luis Villa IV		Treasurer Name Jeremy Katz	
Street Address 50 Milk St., 16th Floor		Street Address 50 Milk St., 16th Floor	
City Boston	State MA	Zip 02109	City Boston
City Boston		State MA	Zip 02109
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
Director Name Robert Pennington		Director Name	
Street Address 50 Milk St., 16th Floor		Street Address	
City Boston	State MA	Zip 02109	City
Director Name		Director Name	
Street Address		Street Address	
City	State	Zip	City
City		State	Zip
9. Shares Authorized			
This information is currently of record in the Department of State.		10. Shares Issued Check the box to indicate an attachment <input checked="" type="checkbox"/>	
Changes require an additional filing.		NUMBER OF SHARES	CLASS/SERIES
		PAR VALUE	
		9,152,325	CWP
			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. <i>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>			
Name of Authorized Representative			Date
FILED			
Signature of Authorized Representative <i>[Signature]</i>			

JUN 26 2023
BY *[Signature]* 12:18

Shares Issued	Class/Series	Par Value
6,699,778	PWP /A	0.0010
5,841,912	PWP /B	0.0010