

1.) CORPORATION NAME:

NATIONAL KIDNEY FOUNDATION, INC.

DUE DATE: **7/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATE CREATIONS NETWORK INC
4445 CORPORATIONS LN 2ND FL
VIRGINIA BEACH, VA**

SCC ID NO: **F1795352**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

VIRGINIA BEACH CITY

4.) STATE OR COUNTRY OF INCORPORATION:

NY

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 30 EAST 33RD ST
CITY/ST/ZIP: NEW YORK, NY 10016

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: BETH PIRAINO, MD TITLE: PRESIDENT ADDRESS: 3504 FIFTH AVE SUITE 200 CITY/ST/ZIP/CO: PITTSBURGH, PA 15213	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: WILLIAM G DESSOFFY TITLE: SECRETARY ADDRESS: 1230 AVENUE OF THE AMERICAS CITY/ST/ZIP/CO: NEW YORK, NY 10020	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: BRUCE SKYER TITLE: CEO ADDRESS: 30 E 33RD STREET CITY/ST/ZIP/CO: NEW YORK, NY 10016	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ED WALTER TITLE: DIRECTOR ADDRESS: 6903 ROCKLEDGE DRIVE CITY/ST/ZIP/CO: BETHESDA, MD 20817	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: GEORGE L BAKRIS, MD TITLE: DIRECTOR ADDRESS: 5841 S. MARYLAND AVE MC 1027 CITY/ST/ZIP/CO: CHICAGO, IL 60637	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: BRYAN BECKER, MD TITLE: DIRECTOR ADDRESS: 1853 W. POLK STREET M/C 784 CITY/ST/ZIP/CO: CHICAGO, IL 60612	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEFFREY S. BERNS, MD DIRECTOR 3400 SPRUCE ST 1 FOUNDERS PAVILION PHILADELPHIA, PA 19104	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES CARLSON DIRECTOR 1116 CATON DRIVE VIRGINIA BEACH, VA 23454	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAUL CRAWFORD, MD DIRECTOR 9730 SOUTHWESTERN AVE SUITE 326 EVERGREEN PARK, IL 60805	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JANE DAVIS DIRECTOR 1530 3RD AVE S BIRMINGHAM, AL 35294	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRIAN DILSHEIMER DIRECTOR 229 RIGHTERS MILL ROAD GLADWYNE, PA 19035	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JIM ELKIN DIRECTOR 3480 Lythrum Way Minnetrista, MN 55364	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TOM HOUGH DIRECTOR 2613 RUTGERS COURT PLANO, TX 75093	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KEVIN LONGINO DIRECTOR 17 CHIEFTANS ROAD GREENWICH, CT 06831	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ART PASQUARELLA, CRE DIRECTOR 1500 MARKET STREET 3000 CENTRE SQUARE WEST PHILADELPHIA, PA 19102	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEPHEN PASTAN DIRECTOR 1365 CLIFTON ROAD, NE B6400 ATLANTA, GA 30322	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GREGORY SCOTT CHAIRMAN 24 INVERNESS LANE NEWPORT BEACH, CA 92660	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LYNDA SECZECH MD DIRECTOR 4419 BEN FRANKLIN BLVD DURHAM, NC 27704	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL SEXTON DIRECTOR 219 INDIAN WELLS DR SPARTANBURG, SC 29306	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL WATTS, CPA DIRECTOR 10960 WILSHIRE BLVD SUITE 2200 LOS ANGELES, CA 90024	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRENNAN HART DIRECTOR ONE OXFORD CENTRE 38TH FLOOR PITTSBURGH, PA 15219	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	FRED PODOLSKY DIRECTOR 99 PARK AVE SUITE 1910 NEW YORK, NY 10016	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL STEVENSON DIRECTOR 350 EAST FIRST AVE SUITE 150 COLUMBUS, OH 43201	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ BRUCE SKYER SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	BRUCE SKYER, CEO PRINTED NAME AND CORPORATE TITLE	5/29/2014 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			