

ALABAMA DEPARTMENT OF REVENUE
EDUCATIONAL SCHOLARSHIP PROGRAM
Scholarship Granting Organization
Annual Report

2014

For the year beginning 01/01, 2014 and ending December 31, 2014

Section 16-6D-1. Code of Alabama 1975 provides for Scholarship Granting Organizations (SGOs) to report certain information to the department for the previous calendar year. The Annual Report of Scholarship Granting Organizations (SGO) is due by June 1 of each year. Please complete and submit this form with required attachments, to the Alabama Department of Revenue.

SECTION I – Scholarship Granting Organization (SGO)			
SCHOLARSHIP GRANTING ORGANIZATION NAME		FEDERAL TAX ID	
Montessori Society of Huntsville		[REDACTED]	
MAILING ADDRESS OF ORGANIZATION		CITY	STATE ZIP CODE
15975 Chaney Thompson Rd		Huntsville	AL 35803
TELEPHONE NUMBER	EMAIL ADDRESS		
(256) 8813790	jennifer@montessorihuntsville.org		

SECTION II – Donation Information	
TOTAL DONATIONS RECEIVED	
1. Enter the total number of donations received during the year.....	1 5
2. Enter the total amount of donations received during the year.....	2 \$ 26,878

SECTION III – Scholarship Information	
TOTAL EDUCATIONAL SCHOLARSHIPS AWARDED (ACTUALLY PAID OUT)	
1. Total number of educational scholarships awarded. Enter amount from attachment 1, line 19a.....	1 0
2. Total amount of educational scholarships awarded. Enter amount from attachment 1, line 19b.....	2 \$ 0

MAJORITY OF EDUCATIONAL SCHOLARSHIPS AWARDED	
3. Enter the name of the county in which the majority of educational scholarship funds were expended this year.....	3 Madison
4. Total amount of scholarship funds awarded in the county listed on line 3.....	4 \$ 0
5. Percentage of low-income eligible students in the county listed on line 3.....	5 0.0000 %
6. Total amount of scholarship funds awarded to all low-income eligible students.....	6 \$ 0
7. Percentage of total scholarship funds awarded to all low-income eligible students. Divide line 6 by line 2.....	7 0.0000 %

FIRST-TIME RECIPIENTS	
8. Total number of first-time scholarship recipients.....	8 0
9. Total number of first-time scholarship recipients continuously enrolled in a public school for the entire previous school year.....	9 0
10. Percentage of first-time scholarship recipients continuously enrolled in a public school for the entire previous school year. Divide line 9 by line 8 and enter results here.....	10 0.0000 %
11. Total number of first-time scholarship recipients continuously enrolled in a private school for the entire previous school year.....	11 0
12. Percentage of first-time scholarship recipients continuously enrolled in a private school for the entire previous school year. Divide line 11 by line 8 and enter results here.....	12 0.0000 %
13. Percentage of first-time scholarship recipients not continuously enrolled in a private school during the previous school year. (100% minus line 12).....	13 0.0000 %

RECEIVED
JUN 30 2015
INDIVIDUAL AND CORPORATE TAX

SECTION IV – Reconciliation of Scholarship Funds

1a. Enter the scholarship funds on hand, beginning of report year	1a	\$	0
1b. Enter the amount of commitments for the remainder of school year, beginning of report year	1b	\$	0
1c. Unaccounted for scholarship funds*, beginning of report year. Subtract line 1b from line 1a.	1c	\$	0
2. Plus: Interest and revenue from investment of scholarship funds	2	\$	1
3. Plus: Scholarship donations received during the year. Enter the amount from Section II, line 2	3	\$	26,878
4. Less: Actual scholarship grants paid during the year. Enter the amount from Section III, line 2	4	\$	0
5. Less: Allowable non-scholarship expenditures made during the year. (Cannot be greater than 5% of scholarship funds received during the year.)	5	\$	0
6a. Scholarship funds on hand, end of report year. Add lines 1a, 2, and 3 and subtract lines 4 and 5.	6a	\$	26,879
6b. Enter the amount of commitments for the remainder of the school year, end of report year	6b	\$	0
6c. Unaccounted for scholarship funds*, end of report year. Subtract line 6b from line 6a.	6c	\$	26,879

SECTION V – Summary of Compliance with Eligibility Requirements

- Was the percentage awarded to low-income eligible recipients (**Section III, line 7**) equal to or greater than the percentage of low-income eligible students in the county where the majority of your educational scholarships were expended (**Section III, line 5**)? Yes No
- Was the percentage of first time recipients not continuously enrolled in a private school during the previous year (**Section III, line 13**) equal to or greater than 75%? Yes No
- Was the amount of scholarship funds awarded during the year (**Section III, line 2**) equal to or greater than the unaccounted for scholarship funds on hand at the beginning of the year (**Section IV, line 1**)? Yes No
- Was the amount of allowable non-scholarship expenditures (**Section IV, line 5**) made during the year less than 5% of scholarship funds received during the year (**Section II, line 2**)? Yes No
- Is the cumulative amount of allowable non-scholarship expenditures made during the current and all previous years less than 5% of the cumulative amount of all scholarship funds received during the current and all previous years, in which the SGO has operated? Yes No

If any of the above are checked "No" then please attach documentation explaining any extraordinary circumstances preventing the requirement from being met.

SECTION VI – Required Attachments

Please include a copy of the following required attachments:

- A financial information report prepared by a certified public accountant.
- A copy of the SGO's required annual federal form 990.
- Has the SGO received any complaints of discrimination? Yes No *If "Yes", please attach a description of the action taken.*

SECTION VII – Signature

UNDER PENALTIES OF PERJURY, I declare that I have examined this report and accompanying schedules and statements, and to the best of my knowledge and belief, they, are, true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

PRINCIPAL OFFICER'S SIGNATURE	TITLE	DATE
PREPARER'S SIGNATURE	DATE	CHECK IF SELF-EMPLOYED <input type="checkbox"/>
PREPARER'S PRINTED NAME (MUST BE A CPA)		
FIRM'S NAME (OR YOURS, IF SELF-EMPLOYED)		E.I. NUMBER
FIRM'S ADDRESS		TELEPHONE NUMBER ()
EMAIL ADDRESS		

ALL SECTIONS OF THIS FORM MUST BE COMPLETED TO BE CONSIDERED A PROPERLY FILED RETURN.
 Please mail this annual report and all required attachments to Alabama Department of Revenue,
 ATTN: Education Scholarship Program, P.O. Box 327010, Montgomery, AL 36132-7010