

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

For the quarter beginning 01/01/2019

____ and ending 03/31/2019

Act 2015-434 provides for Scholarship Granting Organizations (SGOs) to report certain information to the department for the calendar quarter. The Quarterly Report of Scholarship Granting Organizations (SGO) is due by the 15th day after the close of each calendar quarter. Please complete and submit this form to the Alabama Department of Revenue.

| | CTION I — Scholarship Granting Organiza | tion (SGO) | FEDERAL TAX ID | | |
|--|---|--|-------------------------------|--------------|-------------|
| | BLACK MEN OF GREATER N | MOBILE. INC | FEDERAL IAX ID | | |
| MAILING ADDRESS OF ORGANIZATION CITY STATE | | | STATE | ZIP CODE | |
| | 4 GOVERNMENT STREET | MOBILE | AL | 36604 | |
| | HONE NUMBER | EMAIL ADDRESS | | | |
| (25 | 1)405-5500 | MJONES@100MOBILE.ORG | | | |
| SE | CTION II - Scholarship Information | | | | |
| 1. | Total number of scholarship recipients enrolled | in qualifying schools. Enter amount from Attachmen | t 1, line 1a | | 0 |
| | | nd a failing school. Enter amount from Attachment 1, | | | 0 |
| | Total number of first-time scholarship recipients continuously enrolled in a non-public school prior to receiving an educational scholarship from SGO. Enter amount from Attachment 1, line 1c. | | | | 0 |
| | | s continuously enrolled in a public school prior to D. Enter amount from Attachment 1, line 1d. | 4 | | 0 |
| 5. | Total number of educational scholarships awarded and funded. Enter amount from Attachment 1, line 1e. | | | | 0 |
| 6. | Total amount of educational scholarships aware | ded and funded. Enter amount from Attachment 1, li | ne 1f6 | \$ | 0 |
| SE | CTION III – Signature | | | | |
| | ER PENALTIES OF PERJURY, I declare that I are, true, correct and complete. | have examined this report and accompanying so | chedule, and to the best of m | ıy knowledge | and belief, |
| PR | | | | | |
| = | | | | | |

ALL SECTIONS OF THIS FORM MUST BE COMPLETED TO BE CONSIDERED A PROPERLY FILED RETURN.

Please mail this quarterly report to Alabama Department of Revenue,

ATTN: Education Scholarship Program, P.O. Box 327010, Montgomery, AL 36132-7010