

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

For the quarter beginning 04/01/2017

and ending 06/30/2017

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.

SI	ECTION I - Scholarship Granting Org	ganization (SGO)			
SCHOLARSHIP GRANTING ORGANIZATION NAME				N. Wall	N 1711 N
10	0 Black Men of Greater Mob	pile, Inc.			
MAILING ADDRESS OF ORGANIZATION		CITY	STATE ZIP C		
954 Government Street		Mobile	AL	36604	1
TELEPHONE NUMBER		EMAILADDRESS			
(251)405-5500		mjones@100mobile.org			
	the subject to an arrange of the world	V S CELE W. TE JE JULY W. T			
SI	ECTION II - Scholarship Information				
1.	Total number of scholarship recipients er	nrolled in qualifying schools. Enter amount from Attachmen	nt 1, line 1a	1	0
2.	. Total number of eligible students zoned to attend a failing school. Enter amount from Attachment 1, line 1b			2	0
3.	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.			3	0
4.	Total number of first-time scholarship recipients continuously enrolled in a public school prior to receiving an educational scholarship from SGO. Enter amount from Attachment 1, line 1d.			4	0
5.	Total number of educational scholarships	awarded and funded. Enter amount from Attachment 1, lin	ne 1e	5	0
6.	Total amount of educational scholarships	awarded and funded. Enter amount from Attachment 1, lin	ne 1f	6 \$	0
SI	ECTION III – Signature				
	DER PENALTIES OF PERJURY, I declare y, are, true, correct and complete.	that I have examined this report and accompanying so	chedule, and to the best o	of my knowled	ige and belief,
PRIN	CIPAL OFFICER'S SIGNATURE	TITLE	D	ATE	
March May		Executive Director	-	07/17/2017	

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