

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

For the quarter beginning 09/30/2019 and endi	_{ng} 12/31/2019
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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.

SECTION I – Scholarship Granting Organization (SGO)								
SCH	DLARSHIP GRANTING ORGANIZATION NAME		FEDERAL TAX ID					
Sc	holarships for Kids, Inc.							
MAIL	NG ADDRESS OF ORGANIZATION	CITY	STATE	8	ZIP CODE			
PO Box 10204		Birmingham	AL	35202				
TELEPHONE NUMBER		EMAIL ADDRESS						
(205) 445-2908		NCunningham@mjcpa.com						
					ATOM SOLD TO SERVICE A	See II and		
SE	ECTION II - Scholarship Information			1000				
			_					
1.	1. Total number of scholarship recipients enrolled in qualifying schools. Enter amount from Attachment 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, line 1e			5		0			
6.	Total amount of educational scholarships award	ed and funded. Enter amount from Attachment 1, line 1f	,	6	\$	0		
SI	ECTION III – Signature	用于比较级的企业的企业的企业的						
UNDER PENALTIES OF PERJURY, I declare that I have examined this report and accompanying schedule, and to the best of my knowledge and belief, they, are, true, correct and complete.								
PRIN	CIPAL OFFICER'S SIGNATURE	TITLE	DAT	ΓE				
		Executive Director	0	1/1	5/2020			

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