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Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

OMB No 1545-0047

2008

Open to Public
Inspection

A For the 2008 calendar year, or tax year beginning JUL 1, 2008 and ending JUN 30, 2009

<input type="checkbox"/> Check if applicable
<input type="checkbox"/> Address change
<input type="checkbox"/> Name change
<input type="checkbox"/> Initial return
<input type="checkbox"/> Termination
<input type="checkbox"/> Amended return
<input type="checkbox"/> Application pending

C Name of organization

HIGHSIGHT

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)	Room/suite
315 W. WALTON	
City or town, state or country, and ZIP + 4	
CHICAGO, IL 60610	

F Name and address of principal officer **MARK DUHON**
315 W. WALTON, CHICAGO, IL 60610

I Tax-exempt status: 501(c)(3) (insert no.) 4947(a)(1) or 527J Website: ► WWW.HIGHSIGHT.ORGK Type of organization: Corporation Trust Association Other ►

L Year of formation: 1996 M State of legal domicile: IL

Part I Summary

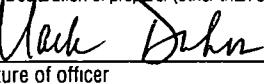
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: HIGHSIGHT'S MISSION IS TO PROVIDE ACADEMIC AND SOCIAL SUPPORT TO INNER-CITY CHICAGO HIGH		
	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.	3	7
	3 Number of voting members of the governing body (Part VI, line 1a)	4	7
	4 Number of independent voting members of the governing body (Part VI, line 1b)	5	26
	5 Total number of employees (Part V, line 2a)	6	20
	6 Total number of volunteers (estimate if necessary)	7a	0.
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7b	0.
b Net unrelated business taxable income from Form 990-T, line 34			

Revenue	8 Contributions and grants (Part VII, line 1b)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2a)	845,196.	634,864.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,171.	453.
	11 Other revenue (Part VIIb, column (A), lines 5-6a, 8c, 9c, 10c, and 11e)	195,095.	181,361.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,044,462.	816,678.
		512,247.	365,429.
		365,617.	424,667.

Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	Prior Year	Current Year
	14 Benefits paid to or for members (Part IX, column (A), line 4)	284,321.	251,135.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,162,185.	1,041,231.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	117,723.	224,553.
	b Total fundraising expenses (Part IX, column (D), line 25) ► 62,195.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		

Net Assets or Fund Balances	19 Revenue less expenses Subtract line 18 from line 12	Prior Year	Current Year
		Beginning of Year	End of Year
	20 Total assets (Part X, line 16)	422,755.	173,672.
	21 Total liabilities (Part X, line 26)	501,500.	482,910.
22 Net assets or fund balances. Subtract line 21 from line 20	<78,745.>	<309,238.>	

Part II Signature Block

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge		
	► 	Signature of officer	► April 20, 2010
	► MARK DUHON, EXECUTIVE DIRECTOR	Type or print name and title	Date

Preparer's Use Only	Preparer's signature ► 	Date 3/19/10	Check if self-employed ► <input type="checkbox"/>	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 ► PACION MATOUSEK AJDER	► EIN ►		
	► 221 N. LASALLE ST. SUITE 1300	► Phone no. ► 312-578-8000		
► CHICAGO, IL 60601				

May the IRS discuss this return with the preparer shown above? (see instructions)

832001 12-18-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2008)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

915-17

Part III: Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

HIGHSIGHT'S MISSION IS TO PROVIDE ACADEMIC AND SOCIAL SUPPORT TO INNER-CITY CHICAGO HIGH SCHOOL STUDENTS. THE PROGRAM PROVIDES SCHOLARSHIPS, MENTORS AND TUTORS TO ENABLE ITS STUDENTS TO ATTEND AND SUCCEED AT THE HIGH SCHOOL OF THEIR CHOICE.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes", describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes", describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 757,915. including grants of \$) (Revenue \$)

**TUITIONS AND SCHOLARSHIPS AWARDED TO QUALIFIED/ WORTHY STUDENTS.
FACILITIES ARE PROVIDED FOR STUDENTS AND MENTORS TO MEET PROVIDING STUDENTS AN ENVIRONMENT TO SUCCEED IN HIGH SCHOOL.**

4b (Code:) (Expenses \$ 118,773. including grants of \$) (Revenue \$)

GRADUATION AWARD CEREMONY EXPENSES, OUTINGS AND ACTIVITIES TEACHING SUPPLIES, BOOKS, STUDY FACILITIES, ETC.

4c (Code:) (Expenses \$ 23,755. including grants of \$) (Revenue \$)

YOUTH FORWARD ACADEMY - ACADEMIC ENRICHMENT SUMMER SCHOOL PROGRAM FOR MIDDLE SCHOOL STUDENTS

4d Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► \$ 900,443. (Must equal Part IX, Line 25, column (B).)

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3 X	
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4 X	
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III		
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6 X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7 X	
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8 X	
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9 X	
10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10 X	
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11 X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12 X	
13 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 X	
14a Did the organization maintain an office, employees, or agents outside of the U.S.? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14a X 14b X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15 X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16 X	
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17 X	
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18 X	
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19 X	
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20 X	
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21 X	
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22 X	
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23 X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No", go to question 25 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24a X 24b 24c 24d	
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25a X 25b X	
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26 X	
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27 X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a	X
b Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b	X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	X

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Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a	0	
1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	26	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)</i>	2b	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	X	
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	
b If "Yes," enter the name of the foreign country ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X	
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X	
c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a Did the organization solicit any contributions that were not tax deductible?	6a	X	
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).	7a	X	
a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7b		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7c	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7d		
d If "Yes," indicate the number of Forms 8282 filed during the year	7e	X	
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f	X	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g	X	
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7h	X	
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	8		
8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	9a		
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	9b		
a Did the organization make any taxable distributions under section 4966?	10a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	10b		
10 Section 501(c)(7) organizations. Enter: N/A	11a		
a Initiation fees and capital contributions included on Part VIII, line 12	11b		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	12a		
11 Section 501(c)(12) organizations. Enter: N/A			
a Gross income from members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	N/A	12b	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

Part VI **Governance, Management, and Disclosure** (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Yes	No
1a	1a	7
1b	1b	7
2	2	X
3	3	X
4	4	X
5	5	X
6	6	X
7a	7a	X
7b	7b	X
8a	8a	X
8b	8b	X
9a	9a	X
9b	9b	
10	10	X
11	11	X

1a Enter the number of voting members of the governing body

1b Enter the number of voting members that are independent

2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?

3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?

4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?

5 Did the organization become aware during the year of a material diversion of the organization's assets?

6 Does the organization have members or stockholders?

7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?

b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:

a The governing body?

b Each committee with authority to act on behalf of the governing body?

9a Does the organization have local chapters, branches, or affiliates?

b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?

10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990

11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O

Section B. Policies

	Yes	No
12a	12a	X
b		
c		
13	13	X
14	14	X
15		
a	15a	X
b	15b	X
16a	16a	X
16b		

12a Does the organization have a written conflict of interest policy? If "No," go to line 13

b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done

13 Does the organization have a written whistleblower policy?

14 Does the organization have a written document retention and destruction policy?

15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:

a The organization's CEO, Executive Director, or top management official?

b Other officers or key employees of the organization?

Describe the process in Schedule O. (see instructions)

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?

b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► IL

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

Own website Another's website Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► MARK DUHON - 312-787-9824

315 W. WALTON ST 60610

Part VI Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees, officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not compensate any officer, director, trustee, or key employee.

Check this box if the organization did not compensate any officer, director, trustee, or key employee

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

1b Total

87,000.

0.

1

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization

0

3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. **NONE**

Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	634,864.			
	g Noncash contributions included in lines 1a-1f \$					
	h Total. Add lines 1a-1f		634,864.			
Program Service Revenue	2 a	Business Code				
	b					
	c					
	d					
	e					
	f All other program service revenue					
g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		453.		453.	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross Rents	(i) Real	(ii) Personal			
	b Less: rental expenses					
c Rental income or (loss)						
d Net rental income or (loss)						
7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
b Less: cost or other basis and sales expenses						
c Gain or (loss)						
d Net gain or (loss)						
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a 350,837.					
b Less: direct expenses	b 169,476.					
c Net income or (loss) from fundraising events		181,361.	181,361.			
9 a Gross income from gaming activities See Part IV, line 19	a					
b Less: direct expenses	b					
c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a					
b Less: cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11 a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		816,678.	181,361.	0.	453.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	365,429.	365,429.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	87,000.	34,800.	34,800.	17,400.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	258,556.	218,556.	20,000.	20,000.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	33,436.	27,316.	3,060.	3,060.
10 Payroll taxes	45,675.	38,609.	3,533.	3,533.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	5,500.		5,500.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses	12,045.	10,545.	500.	1,000.
14 Information technology				
15 Royalties				
16 Occupancy	55,200.	44,160.	5,520.	5,520.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	21,293.	17,035.	2,129.	2,129.
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a CEREMONIES, OUTING & AC	118,773.	118,773.		
b INSURANCE	12,066.	9,652.	1,207.	1,207.
c UTILITIES	8,593.	6,875.	859.	859.
d PRINTING AND POSTAGE	7,502.	500.	500.	6,502.
e TELEPHONE	5,109.	4,089.	510.	510.
f All other expenses	5,054.	4,104.	475.	475.
25 Total functional expenses. Add lines 1 through 24f	1,041,231.	900,443.	78,593.	62,195.
26 Joint Costs. Check here ► <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	11,538.	1	3,340.
	2 Savings and temporary cash investments	49,120.	2	18,468.
	3 Pledges and grants receivable, net	233,000.	3	50,000.
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	6,800.	9	6,800.
	10a Land, buildings, and equipment: cost basis	164,561.		
	b Less: accumulated depreciation. Complete Part VI of Schedule D	95,658.	10c	68,903.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	32,100.	12	26,161.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
	16 Total assets. Add lines 1 through 15 (must equal line 34)	422,755.	16	173,672.
Liabilities	17 Accounts payable and accrued expenses	6,000.	17	6,000.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D	495,500.	25	476,910.
	26 Total liabilities. Add lines 17 through 25	501,500.	26	482,910.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	<78,745.	>27	<309,238.>
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	<78,745.	>33	<309,238.>
	34 Total liabilities and net assets/fund balances	422,755.	34	173,672.

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990: Cash Accrual Other

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

 b Were the organization's financial statements audited by an independent accountant?

 c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

 b If "Yes," did the organization undergo the required audit or audits?

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2008
Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

HIGHSIGHT

36-4042496

Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is: (Please check only one organization.)

1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H.)
 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state. _____
 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete the Part III.)
 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h

a Type I b Type II c Type III - Functionally integrated d Type III - Other

e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**.

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

Total

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990.

Schedule A (Form 950 or 950-EZ) 2008

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	505,118.	707,012.	668,318.	845,196.	634,864.	3360508.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 - 3	505,118.	707,012.	668,318.	845,196.	634,864.	3360508.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						3360508.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	505,118.	707,012.	668,318.	845,196.	634,864.	3360508.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,429.	4,646.	8,425.	4,171.	453.	20,124.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						3380632.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						► <input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	99.40	%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	99.15	%
16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		► <input checked="" type="checkbox"/>	
b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		► <input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		► <input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		► <input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		► <input type="checkbox"/>	

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 - 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						► <input type="checkbox"/>

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a **33 1/3% support tests - 2008.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

►

b **33 1/3% support tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

►

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and **see instructions**

►

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

HIGHSIGHT

Employer identification number
36-4042496

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).	<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
	<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
	<input type="checkbox"/> Preservation of open space	
2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.		
		Held at the End of the Year
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 8/17/06	2d	
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ►		
4 Number of states where property subject to conservation easement is located ►		
5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ►		
7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ► \$		
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.		

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.	► \$ _____
b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:	► \$ _____
(i) Revenues included in Form 990, Part VIII, line 1	► \$ _____
(ii) Assets included in Form 990, Part X	► \$ _____
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:	► \$ _____
a Revenues included in Form 990, Part VIII, line 1	► \$ _____
b Assets included in Form 990, Part X	► \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

a Public exhibition
 b Scholarly research
 c Preservation for future generations

d Loan or exchange programs
 e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection?

Yes

No

Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

Yes

No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21?

Yes

No

b If "Yes," explain the arrangement in Part XIV.

	Amount
1c	
1d	
1e	
1f	

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

a Board designated or quasi-endowment ► _____ %
 b Permanent endowment ► _____ %
 c Term endowment ► _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization

by:

(i) unrelated organizations
 (ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

	Yes	No
3a(i)		
3a(ii)		
3b		

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
	164,561.	95,658.	68,903.	68,903.
Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				

Schedule D (Form 990) 2008

Part VII Investments - Other Securities. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other		
MUTUAL FUND	26,161.	COST

Total. (Col (b) should equal Form 990, Part X, col (B) line 12.) ► 26,161.

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

Total (Col (b) should equal Form 990, Part X, col (B) line 13.) ►

Part IX Other Assets. See Form 990, Part X, line 15

Total. (Column (b) should equal Form 990, Part X, col (B) line 15.)

Part X **Other Liabilities.** See Form 990, Part X, line 25.

(a) Description of liability	(b) Amount
Federal income taxes	
TUITIONS PAYABLE	476,910.

Total. (Column (b) should equal Form 990, Part X, col (B) line 25)

476,910.

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1 Total revenue (Form 990, Part VIII, column (A), line 12)	1	816,678.
2 Total expenses (Form 990, Part IX, column (A), line 25)	2	1,041,231.
3 Excess or (deficit) for the year. Subtract line 2 from line 1	3	<224,553.>
4 Net unrealized gains (losses) on investments	4	
5 Donated services and use of facilities	5	
6 Investment expenses	6	
7 Prior period adjustments	7	
8 Other (Describe in Part XIV)	8	<5,940.>
9 Total adjustments (net). Add lines 4-8	9	<5,940.>
10 Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	<230,493.>

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1 Total revenue, gains, and other support per audited financial statements	1	980,214.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments	2a	<5,940.>
b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIV)	2d	169,476.
e Add lines 2a through 2d	2e	163,536.
3 Subtract line 2e from line 1	3	816,678.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIV)	4b	
c Add lines 4a and 4b	4c	0.
5 Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	816,678.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1 Total expenses and losses per audited financial statements	1	1,210,707.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25.		
a Donated services and use of facilities	2a	
b Prior year adjustments	2b	
c Losses reported on Form 990, Part IX, line 25	2c	
d Other (Describe in Part XIV)	2d	169,476.
e Add lines 2a through 2d	2e	169,476.
3 Subtract line 2e from line 1	3	1,041,231.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIV)	4b	
c Add lines 4a and 4b	4c	0.
5 Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	1,041,231.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

PART XI, LINE 8 - OTHER ADJUSTMENTS:**UNREALIZED GAINS OR LOSSES****PART X11 LINE 2D AND PART X111 LINE 2D FUNDRAISING EXPENSES NOT NETTED ON****FINANCIAL STMTS**

Department of the Treasury
Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Name of the organization

Employer identification number
36-4042496

HIGHSIGHT

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

Total

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1 EVE OF THE EVE (event type)	(b) Event #2 MIDSUMMER NIGHTS EVE & (event type)	(c) Other Events NONE (total number)	(d) Total Events (Add col. (a) through col. (c))
Revenue	1 Gross receipts	293,088.	58,739.		351,827.
	2 Less. Charitable contributions				
	3 Gross revenue (line 1 minus line 2)	293,088.	58,739.		351,827.
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs	13,104.			13,104.
	7 Other direct expenses	139,019.	17,353.		156,372.
	8 Direct expense summary Add lines 4 through 7 in column (d)				► (169,476.)
	9 Net income summary. Combine lines 3 and 8 in column (d)				► 182,351.

Part III **Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d)				► ()
	8 Net gaming income summary. Combine lines 1 and 7 in column (d)				►

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states?

b If "No," Explain:

	Yes	No
9a		
10a		
11		
12		

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," Explain:

11 Does the organization operate gaming activities with nonmembers?

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

13 Indicate the percentage of gaming activity operated in:

- a The organization's facility
- b An outside facility

14 Provide the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____.

c If "Yes," enter name and address:

Name ► _____

Address ► _____

16 Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____
_____ Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

15a

17a

HIGHLIGHT

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
TUITION ASSISTANCE TO STUDENTS WITH FINANCIAL NEED TO ATTEND THE HIGH SCHOOL OF THEIR CHOICE	130	442,704	0 CASH		

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information

SCHEDULE O

(Form 990)

Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990**

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008Open to Public
Inspection

Name of the organization

HIGHSIGHTEmployer identification number
36-4042496**FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:**

SCHOOL STUDENTS. THE PROGRAM PROVIDES SCHOLARSHIPS, MENTORS AND TUTORS
TO ENABLE ITS STUDENTS TO ATTEND AND SUCCEED AT THE HIGH SCHOOL OF
THEIR CHOICE.

FORM 990, PART VI, SECTION A, LINE 10: A COPY OF THE 990 WAS PROVIDED TO
THE EXECUTIVE DIRECTOR PRIOR TO FILING FOR HIS REVIEW AND
APPROVAL.

FORM 990, PART VI, SECTION B, LINE 15: BOARD OF DIRECTORS APPROVES THE
EXECUTIVE DIRECTORS SALARY ON A YEARLY BASIS

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATIONS FINANCIAL
STATEMENTS ARE AVAILABLE UPON REQUEST VIA PHONE, MAIL, OR THE ORGANIZATIONS
WEBSIGHT.

HIGHSIGHT

**FINANCIAL STATEMENTS
FOR THE YEARS ENDED
JUNE 30, 2009 AND 2008**

Pacion
Matousek
Ajder, P.C.

Certified Public Accountants

221 N. LaSalle Street
Suite 1300
Chicago, IL 60601
(312) 578-8000
Telecopier (312) 578-0518

EUGENE A. PACION C.P.A. • MICHAEL S. MATOUSEK C.P.A. • HELEN J. AJDER C.P.A.

To the Board of Directors
HIGHSPIGHT
1107 North Orleans
Chicago, Illinois 60610

We have audited the accompanying statement of financial position of HIGHSPIGHT (a nonprofit organization) as of June 30, 2009 and 2008, and the related statements of activities and cash flows for the years then ended. These financial statements are the responsibility of the organization's management. Our responsibility is to express an opinion on these financial statements based on our audit.

Except as discussed in the following paragraph, we conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

We were unable to audit the income and expenses of the organization's annual Eve of the Eve and Midsummer Eve, fundraising events. The events earnings are included in net income for the years ended June 30, 2009 and 2008. We were unable to satisfy ourselves about the net income from these events by other auditing procedures.

In our opinion, except for the effects of such adjustments, if any, as might have been determined to be necessary had the net income referred to in the preceding paragraph been susceptible to satisfactory audit tests, the financial statements referred to in the first paragraph present fairly, in all material respects, the financial position of HIGHSPIGHT as of June 30, 2009 and 2008, and the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Pacion Matousek Ajder
PACION MATOUSEK AJDER, P.C.
March 8, 2010

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Auditor's Report	(Preceding)
Statement of Financial Position At June 30, 2009 and 2008	Exhibit A
Statement of Activities For the year ended June 30, 2009 and 2008	Exhibit B
Statement of Cash Flows For the year ended June 30, 2009 and 2008	Exhibit C
Notes to Financial Statements For the years ended June 30, 2009 and 2008	Pages 1 - 3

HIGHLIGHT

EXHIBIT A

STATEMENT OF FINANCIAL POSITION
AT JUNE 30, 2009 AND 2008

	ASSETS	
	2009	2008
<u>CURRENT ASSETS</u>		
Cash in banks	\$ 21,808	\$ 60,658
Grant receivable	50,000	233,000
Prepaid expenses	6,800	6,800
Investments	<u>26,161</u>	<u>32,100</u>
Total current assets	104,769	332,558
<u>PROPERTY AND EQUIPMENT</u>		
Furniture fixtures and computers	75,878	75,878
Leasehold improvements	53,716	53,716
Transportation equipment	<u>34,967</u>	<u>34,967</u>
	164,561	164,561
Accumulated depreciation	<u>95,658</u>	<u>74,364</u>
Net	<u>68,903</u>	<u>90,197</u>
Total assets	<u>173,672</u>	<u>422,755</u>
LIABILITIES		
<u>CURRENT LIABILITIES</u>		
Accounts payable	6,000	6,000
Tuition / scholarships payable	<u>476,910</u>	<u>495,500</u>
Total current liabilities	482,910	501,500
NET ASSETS		
Net assets Unrestricted	<u>(309,238)</u>	<u>(78,745)</u>
Total liabilities and net assets	<u>\$ 173,672</u>	<u>\$ 422,755</u>

The accompanying notes are an integral part of these financial statements

HIGHLIGHT**EXHIBIT B**

STATEMENT OF ACTIVITIES
FOR THE YEARS ENDED JUNE 30, 2009 AND 2008

	2009	2008
SUPPORT AND REVENUE		
Support	\$ 541,425	\$ 748,137
Grants	93,439	97,059
Contributions	<u>634,864</u>	<u>845,196</u>
Total support	<u>634,864</u>	<u>845,196</u>
Revenue		
Special events & fundraising	350,837	433,700
Investment income	453	4,171
Realized and Unrealized gain (loss) on investments	<u>(5,940)</u>	<u>(4,356)</u>
Total revenue	<u>345,350</u>	<u>433,515</u>
Total support and revenue	980,214	1,278,711
EXPENSES		
Program services		
Tuition / scholarships - (Note 5)	365,429	512,247
Special events & fundraising	169,476	238,605
Ceremonies, outings and activities	<u>118,773</u>	<u>118,334</u>
Total program services	<u>653,678</u>	<u>869,186</u>
Support services		
Salary-director	87,000	84,000
Salary-office	258,556	237,921
Payroll tax expense and pension	45,675	54,869
Audit	5,500	5,500
Auto expense	1,699	6,399
Rent	55,200	48,000
Utilities	8,593	6,303
Insurance - general	12,066	16,848
Insurance - health	33,436	26,836
Office supplies	12,045	8,191
Telephone	5,109	6,407
Technical meetings, subscriptions, etc	307	1,171
Printing and postage	7,502	8,576
Miscellaneous	3,048	1,415
Depreciation	<u>21,293</u>	<u>19,168</u>
Total support services	<u>557,029</u>	<u>531,604</u>
Total expenses	<u>1,210,707</u>	<u>1,400,790</u>
CHANGE IN UNRESTRICTED NET ASSETS	(230,493)	(122,079)
UNRESTRICTED NET ASSETS AT THE BEGINNING OF YEAR	<u>(78,745)</u>	<u>43,334</u>
UNRESTRICTED NET ASSETS AT THE END OF YEAR	<u>\$ (309,238)</u>	<u>\$ (78,745)</u>

**STATEMENT OF CASH FLOWS
FOR THE YEARS ENDED JUNE 30, 2009 AND 2008**

	2009	2008
CASH FLOWS UTILIZED BY OPERATING ACTIVITIES:		
Change in unrestricted net assets	\$ (230,493)	\$ (122,079)
Adjustments to reconcile change in unrestricted net assets to net cash provided by (used in) operating activities		
Non - cash items		
Depreciation	21,293	19,168
Unrealized (gains) losses	5,940	4,356
(AIncrease) decrease in grants receivable	183,000	22,000
(AIncrease) decrease in prepaid expenses	-	(700)
Increase (decrease) in accounts payable and tuition payable	<u>(18,590)</u>	<u>43,346</u>
Total adjustments	<u>191,643</u>	<u>88,170</u>
Net cash provided by (used in) operating activities	(38,850)	(33,909)
CASH FLOWS FROM INVESTING ACTIVITIES:		
Capital expenditures	-	(38,583)
(Increase) decrease in investment account	<u>-</u>	<u>(6,485)</u>
Net cash provided by (used in) investing activities	<u>-</u>	<u>(45,068)</u>
NET INCREASE (DECREASE) IN CASH AND CASH EQUIVALENTS	(38,850)	(78,977)
CASH AND CASH EQUIVALENTS AT BEGINNING OF YEAR	<u>60,658</u>	<u>139,635</u>
CASH AND CASH EQUIVALENTS AT END OF YEAR	<u>\$ 21,808</u>	<u>\$ 60,658</u>

HIGHSIGHT

NOTES TO FINANCIAL STATEMENTS

June 30, 2009 and 2008

NOTE 1- SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Organization and Nature of Activities

Highsight's mission is to provide academic support to inner - city Chicago high school students. The program provides scholarships, tutoring and mentoring to enable its students to attend and succeed at the high school of their choice. Highsight's support comes primarily from private foundations and government agency grants, as well as individual donor contributions.

Highsight is a nonprofit organization as described in Section 501 (c) (3) of the Internal Revenue Code and is exempt from federal and state income taxes.

Highsight was incorporated August 31, 1995 (State of Illinois) and began operations on January 1, 1996.

It should be noted that Highsight is a continuation of a program started by Saint Joseph's Parish of Chicago, Illinois, named Saint Joseph's - Highsight. During the year ended September 30, 1996 Highsight received a contribution from its predecessor organization of cash, accounts receivable, less accounts payable and other obligations. This contribution was worth approximately \$75,000.

Financial Statement Presentation

Highsight adopted Statement of Financial Accounting Standards (SFAS) No. 117, "Financial Statements of Not-for-Profit Organizations." Under SFAS No. 117 Highsight is required to report information regarding its financial position and activities according to three classes of net assets (unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets) based upon the existence or absence of donor-imposed restrictions.

Highsight also adopted SFAS No. 116; "Accounting for Contributions Received and Contributions Made." In accordance with SFAS No. 116, contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support, depending on the existence and/or nature of any donor restrictions. In addition, Highsight has not received any contributions with donor-imposed restrictions that would result in temporarily or permanently restricted net assets. There were no restricted net assets at June 30, 2009 and 2008.

Basis of Accounting

The accompanying financial statements have been prepared on the accrual basis of accounting in accordance with generally accepted accounting principles.

HIGHSIGHT

NOTES TO FINANCIAL STATEMENTS

June 30, 2009 and 2008

NOTE -1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - (continued)

Cash Equivalents

Cash equivalents consist of short-term, highly liquid investments, which are readily convertible into cash within (90) days of purchase.

Concentration of Risk

The Organization's cash funds are held in several accounts at various financial institutions. During the year, the Organizations cash balance has not exceeded the maximum insured by the Federal Deposit Insurance Corporation.

Investments-Marketable Securities

The Organizations' marketable securities consist of equity securities that have a readily determinable fair market value. Management determines the appropriate classification of its investments at the time of purchase or donation and re-evaluates such determinations at each balance sheet date.

Cost and fair value of marketable securities available for sale at June 30, 2009 and 2008 are as follows:

	Cost	Unrealized Gains	Unrealized Losses	Fair Value
<u>2009</u> Equities	\$36,501	\$ 0	\$10,340	\$26,161
<u>2008</u> Equities	\$ 36,501	\$ 0	\$4,401	\$32,100

Estimates

The preparation of financial statements in conformity with generally accepted accounting principles require management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Functional Allocation of Expenses

The costs of providing the various programs and other activities have been summarized on a functional basis in the statement of activities. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

HIGHSIGHT

NOTES TO FINANCIAL STATEMENTS

June 30, 2009 and 2008

NOTE -2 DONATED SERVICES AND MATERIALS

Highsight receives donated services from a variety of unpaid volunteers that act as tutors and mentors working with the students. No amounts have been recognized in the accompanying statement of activities because the criteria for recognition of such volunteer effort under SFAS No. 116 have not been satisfied.

NOTE -3 PROPERTY AND EQUIPMENT

Property and equipment are recorded at cost or at estimated fair value at the date of gift. Donations are unrestricted support unless the donor has restricted the donated asset to a specific purpose. The Foundation follows the practice of capitalizing all expenditures for equipment in excess of \$1,000. Deprecation is provided using the straight-line method over the estimated useful lives of the assets.

NOTE -4 OPERATING LEASE COMMITMENT

On April 7, 2006, effective July 1, 2006 the organization entered a lease agreement for office and schoolroom space at 315 Walton Street, Chicago, Illinois. The lease is for a term of five years at an annual rental of \$48,000, payable quarterly.

NOTE -5 TUITIONS / SCHOLARSHIPS PAYABLE

Highsight's mission is to provide scholarships to enable its students to attend various private high schools for the school years 2009/2007 and 2008/2007. The Organization estimates the balance of its tuition support payable to be \$476,910 and \$495,500 for the years ended June 30, 2009 and 2008.

Application for Extension of Time To File an
Exempt Organization Return

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete **Part II** unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Type or print	Name of Exempt Organization HIGHSIGHT	Employer identification number 36-4042496
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P O. box, see instructions. 315 W. WALTON	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. CHICAGO, IL 60610	

Check type of return to be filed(file a separate application for each return):

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

MARK DUHON

- The books are in the care of ► 315 W. WALTON ST - 60610 FAX No. ► _____
- Telephone No. ► 312-787-9824
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box ► If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 2010, to file the exempt organization return for the organization named above. The extension is for the organization's return for.

► calendar year _____ or
► tax year beginning JUL 1, 2008, and ending JUN 30, 2009.

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$ N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.