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41554 3/10/2011 10 45 AM

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)

The organization may have to use a copy of this return to satisfy state reporting requirements

2009

Open to Public Inspection

<u> </u>	For the 200	<u>09 calendar ye</u>	ear, or tax year beginning U//U1/U9, and ending	00/30/1	<u>.U</u>		
В	Check if applica		C Name of organization			D Emplo	yer identification number
	Address chang	ge use IRS label or	Highland Christian Acade	emy			0.40.4000
X	Name change		Doing Business As		T		-2404999
\exists	Initial return	type See Specific	Number and street (or P 0 box if mail is not delivered to street address) 2206 East Hill Avenue		Room/suite		0-245-8111
\exists	Termination	Instruc-	City or town, state or country, and ZIP + 4			G Gross rece	ipts \$ 699,272
\Box	Amended retur	m tions.	Valdosta GA 31601			Į	
	Application per	nding F Name	and address of principal officer			H(a) is this affiliate H(b) Are all include	affiliates
1	Tax-exempt	t status X	501(c) (3) ◀ (insert no) 4947(a)(1) or	527		If "No,"	* attach a list (see instructions)
. J	Website:		501(6) (C) 4 (mocre no) 1 4541(a)(1) 61	521		H(c) Group	exemption number
<u></u> -	Type of organi		poration Trust Association Other ▶	L	Year of formation 1	998	M State of legal domicile GA
Р	art I	Summar	у	•		•	
Activities & Governance	2 Che	Education eck this box	ne organization's mission or most significant activities 1., K-5 to 9th grade if the organization discontinued its operations or disposed members of the governing body (Part VI, line 1a)	of more than 25%	% of its net asset	s <u>3</u>	6
<u>i</u> 63	4 Nun	nber of indepe	endent voting members of the governing body (Part VI, line 1b)			4	5
Ë			mployees (Part V, line 2a)			5	37
Aci	ı		olunteers (estimate if necessary)			6	
	1	-	ated business revenue from Part VIII, column (C), line 12			7a	
	b Net	unrelated bus	iness taxable income from Form 990-T, line 34		Prior Ye	7b	Current Year
	8 Con	ntributions and	grants (Part VIII, line 1h)			5,150	15,300
Revenue	1		revenue (Part VIII, line 2g)			7,416	549,540
¥6		-	e (Part VIII, column (A), lines 3, 4, and 7d)			4,126	4,883
ĕ	1		art VIII, colump (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			3,587	31,813
			dd lines 8 through 11 (mustlequal Agri VIII) column (A), line 12)		52	2,027	601,536
Expenses	14 Ben- 15 Sala 16a Prof b Tota 17 Othe 18 Tota	nefits paid to o anes, other co fessional fund al fundraising er expenses (l al expenses A	r amounts paid (Part IX, column (A), lines 1-3) r for members (Part IX, column (A), line 4) mpensation, employee benefits (Part IX, column (A), line 5-10) raising fees (Part IX, column (A), line 11e) expenses (Part IX, column (A), line 25) Part IX, column (A), lines 11a-11d, 11f-24) add lines 13-17 (must equal Part IX, column (A), line 25) menses. Subtract line 18 from line 12)	9	4,219 0,463 4,682 2,655	503,179 146,423 649,602 -48,066
5 8		CHUC ICOO CXP	enses. Subtract line to from line 12	_	Beginning of Cu		End of Year
Net Assets or Fund Balances	20 Tota	al assets (Part	X, line 16)		23	6,653	187,760
ad A	21 Tota	al liabilities (Pa	art X, line 26)		· · · · · · · · · · · · · · · · · · ·	827	
			d balances Subtract line 21 from line 20		23	5,826	187,760
Sig He		and belief, it	es of perjury, I declare that I have examined this return, including accomp structure, and fomplete Declaration of preparer (other than officer) in the control of the cont	s based on all inform	mation of which pre		
- Pai	id	Preparer's signature	Nicholas Valenti, Jr, CPA, CFP	Date	Check self-	. \Box	Preparer's identifying number (see instructions)
Pre	parer's	J.g. a.u.u	Nicholas Valenta, Jr, CPA, CFP Valenti Rackley & Assoc	iates I	employ	T :	<u> P00050715</u> 20-1879393
Js	e Only	Firm's name (or yours	Laces, I		EIN Phone	ZO-1013333
		if self-employed address, and					229-247-8005
/lav	the IRS de	<u></u>	um with the preparer shown above? (see instructions)			1 110	Yes No
_	Privacy A		work Reduction Act Notice, see the separate instructions.				(2009), Form 990 (2009),

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$

4e Total program service expenses ▶

622,053

) (Revenue \$

Form **990** (2009)

Form 990 (2009) Highland Christian Academy 58-2404999 Page 3 Checklist of Required Schedules Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X complete Schedule A X 2 Is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to X candidates for public office? If "Yes," complete Schedule C, Part I 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete X Schedule C. Part II 4 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 5 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes." X complete Schedule D, Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," X complete Schedule D. Part III 8 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," X complete Schedule D, Part IV 9 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or X 10 quasi-endowments? If "Yes," complete Schedule D, Part V Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, X VII, VIII, IX, or X as applicable 11 • Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI • Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. • Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII • Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX • Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X 12 Schedule D, Parts XI, XII, and XIII 12A Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional X Is the organization a school 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 United States? 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, X business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any X organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance 16

to individuals located outside the United States? If "Yes," complete Schedule F, Part III

on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G. Part I

Did the organization operate one or more hospitals? If "Yes," complete Schedule H

Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II

If "Yes," complete Schedule G, Part III

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

Form 990 (2009)

X

X

X

X

16

17

18

19

17

18

Form 990 (2009) Highland Christian Academy 58-2404999 <u> Page 4</u> Checklist of Required Schedules (continued) Yes No 21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations X in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the X United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated X 23 employees? If "Yes," complete Schedule J 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 lines X 24b through 24d and complete Schedule K If "No," go to line 25 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b 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? 24c 24d d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction X with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a pnor year, and that the transaction has not been reported on any of the organization's prior Forms 990 or X 990-EZ? If "Yes," complete Schedule L, Part I 25b 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or X disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? X If "Yes," complete Schedule L, Part III 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions) X a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete X Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, 28c X 29 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified X 30 conservation contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, X Part I 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete X Schedule N, Part II 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, X 34 III, IV, and V, line 1 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 X Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related X 36 organization? If "Yes," complete Schedule R, Part V, line 2 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, X 37

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and

19? Note. All Form 990 filers are required to complete Schedule O.

X Form 990 (2009)

-Pa	Statements Regarding Other IRS Filings and Tax Compliance				ı	
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		0			
	U.S. Information Returns Enter -0- if not applicable	1a	0	4		İ
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	<u> </u>	┨		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and report	able		4.	x	
2a	gaming (gambling) winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	ı .		1c		┢
Za	Statements, filed for the calendar year ending with or within the year covered by this return	2a	37			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	20		2b	x	
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see					
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	,				
	this return?			3a		х
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 dunng the calendar year, did the organization have an interest in, or a signature or other auth	ority				
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	ıal				
	account)?			4a		X
þ	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 Ban	k				
_	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
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	ıg				
6.	Prohibited Tax Shelter Transaction?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and 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 of	nr.		Va		
_	gifts were not tax deductible?	"		6ь		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good	ls				
	and services provided to the payor?			7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
	required to file Form 8282?			7c		<u> </u>
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
6	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a perso	nal				
_	benefit contract?			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		X
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		<u> </u>
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			7h		x
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			 " 		<u>~</u>
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring] [
	organization, have excess business holdings at any time during the year?			8	1	
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	1	
0	Section 501(c)(7) organizations. Enter					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a]		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		ļ ļ		
1	Section 501(c)(12) organizations. Enter					
a	Gross income from members or shareholders	11a		. I		
þ	Gross income from other sources (Do not net amounts due or paid to other sources against					
_	amounts due or received from them.)	11b		↓ <u>.</u>	I	
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 104	- 1		12a		
<u>b</u> _	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	· · ·		990	(2009)
				rorm	JJU	(∠UUS)

Form 990 (2009) Highland Christian Academy 58-2404999 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body Enter the number of voting members that are independent 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? X 2 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? Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a material diversion of the organization's assets? 5 Does the organization have members or stockholders? 6 Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, 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 (This Section B requests information about policies not required by the Internal Revenue Code.) 10a Does the organization have local chapters, branches, or affiliates? 10a X 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? 10b 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the X 11 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 X Does the organization have a written conflict of interest policy? If "No," go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give X use to conflicts? 12b Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe in Schedule O how this is done X 12c Does the organization have a written whistleblower policy? 13 14 14 Does the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official X 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X 16a 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? 16h Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ 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 | X | Upon request 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 State the name, physical address, and telephone number of the person who possesses the books and records of the Jackie Noble 2206 E. Hill Ave. organization >

Valdosta

GA 31602

Part VII 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. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- 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

(A) Name and Title	(B) Average			(chec	C) k all t	hat a _l	oply)	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Claire Lee										
Director		X		<u> </u>				0	. 0	
Todd Wilson										,
Director Noble	1	X	<u> </u>	<u> </u>	<u> </u>			0	0	C
Jackie Noble				x				22 005	0	C
Principal John LaHood	+	\vdash	\vdash	┢┻	-			33,805	<u> </u>	
Chairman				x				ol	0	d
Donnie Warren	 	+	\vdash	^				9	U	
Financial Secretary				x				ol	o	c
Scott Wilson	 -	╁	\vdash					 		
Secretary				x				o	o	C
	-									

Pa	rt VII Section A. Office	rs, Directors, Trus	stees	, Ke	y En	nplo	yees	, an	d Highest Compensated E	mployees (continued)			
	(A) Name and Title	(B) Average hours per	—	_	(chec	_	hat a		- companeation	(E) Reportable compensation	Est	(F) mated ount of	
		week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	comp fro orga and	ther ensation m the nization related nizations	
											_		
			L										
			L								_		
	-												
		ļ											
								Ĺ	22.005				
1b 2	Total number of individuals (i				ose	listec	abo	ve)	33,805 who received more than \$10	00,000 in			
_	reportable compensation from											Yes	S No
3 4	Did the organization list any f employee on line 1a? If "Yes, For any individual listed on lin	" complete Schedu	ıle J f	for s	uch II	ndıvı	dual	-	-	n	3	-	X
	the organization and related of individual .	organizations great	er tha	an \$	150,0	000?	If "Y	es,"	complete Schedule J for su		4		x
5	Did any person listed on line services rendered to the organical Rendered to the organical Rendered Control	nızatıon? If "Yes,"									5	<u>. </u>	X
1	ction B. Independent Contract Complete this table for your fi compensation from the organ	ve highest comper	nsate	d ind	lepe	nden	t cor	ntrac	tors that received more than	\$100,000 of			-
_		(A) nd business address					_		Descript	(B) ion of services		(C) Compens	sation
						_			 				
								-		 			
								<u> </u>		· · · · · · · · · · · · · · · · · ·			
	Total number of independent	contractors (includ	ina h	ut ne	at lim	hatin	to th	OSE !	listed ahove) who received				
<u></u>	more than \$100,000 in compe								THE PERSON WITH THE PERSON			0	0

_				_	cran	Academ	<u>Y</u>	30-2404999		Page 9
<u> Pa</u>	<u>irt V</u>	III Statement	of Reve	nue			(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
9 9	12	Endorated compared		140	Γ-	_	-	revenue		512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	S	1a						
gĕ	"	Membership dues		1b						
a ţ	l c	Fundraising events		1c						İ
<u> </u>	ď	Related organizations		1d						
Sins	θ	Government grants (contribut		10						
萝	1	 All other contributions, gifts, g and similar amounts not include 				45 000				
ള				1f		15,300				
O E	g			1f	\$]				
	h	Total. Add lines 1a-1	lf			•	15,300			
Jue -						Busn. Code				
e e	2a	Program Servi	ice Reve	nue			549,540	549,540		
2	b									<u> </u>
Zi Zi	С									
Ser	d									
am	е									<u> </u>
Program Service Revenue	f	All other program ser	vice reven	ue						
ď	g	Total. Add lines 2a-2	lf .			>	549,540			
	3	Investment income (in	ncluding d	ividend	ds, interes	t, and				
		other similar amounts	;)			►l	4,883	4,883		
	4	Income from investme	ent of tax-	exemp	t bond pro	oceeds 🕨				
	5	Royalties				▶ [
			(ı) Real		(II) F	Personal				
	6a	Gross Rents								
	b	Less rental exps								
	С									
	d	Net rental income or ((loss)			•				
		Gross amount from) Securities		(u)	Other	- 11			
		sales of assets	,		<u> </u>					
	h	other than inventory Less cost or other			 					
ľ	-	basis & sales exps								
	_									
i	c d	` '			<u> </u>		•			
		Net gain or (loss) Gross income from funding		<u>ب</u> (135 - 1	
ᆿ	oa		aising even	ຣ						
퉏		(not including \$! 4-\					į		
ا څ		of contributions reported	on line 1c).			00 551		ĺ		
Other Revenue		See Part IV, line 18		a		22,551				
히		Less direct expenses		b[10,387				
_		Net income or (loss) fi		٠,	events	<u> </u>	12,164	12,164		ļ
ŀ	9a	Gross income from gamir	ng activities					[
- 1		See Part IV, line 19		a						1
		Less direct expenses		ьĮ				,		
		Net income or (loss) fi	-	ng acti	vities .	•				
	10a	Gross sales of invento		l				Ì		
- 1		returns and allowance		a		96,627				1
-	b	Less cost of goods so	old	ь[87,349				
Ĺ	С	Net income or (loss) fr	rom sales	of inve	entory	<u> </u>	9,278	9,278		
L		Miscellaneou	s Revenue			Busn. Code				
	11a			_			10,371	10,371		
	ь									
	C									
	d	All other revenue								
- 1	е	Total. Add lines 11a-	11d			▶	10,371	ſ		1
- 1	12	Total Revenue. See in		S		▶ [601,536	586,236		0
						-	,-,-,-			Form 990 (2009)

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).

	All other organizations must		re not required to comple		
	o not include amounts reported on lines 6b, b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	<u> </u>				
•	organizations in the U.S. See Part IV, line 21	1			
2					
-	the U S See Part IV, line 22				
3	Grants and other assistance to governments,				
•	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16	1			
4	Benefits paid to or for members				
4	•		-		
5	Compensation of current officers, directors,	33,805	16,903	16,902	
_	trustees, and key employees	33,803	10,903	10,902	· · · · -
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	405 001	425 021		
7	Other salanes and wages	435,931	435,931		
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits		22 442		
10	Payroll taxes	33,443	33,443		
11	Fees for services (non-employees)				
а	Management				
b	Legal	4 455			
C	Accounting	1,850		1,850	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees		4		
g		10,763	10,763		
12	Advertising and promotion				
13	Office expenses	6,288		6,288	
14	Information technology				
15	Royalties				<u> </u>
16	Occupancy	37,496	35,621	1,875	
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	5,297	5,297		
23	Insurance	9,175	8,716	459	
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)				
а	School Activities	67,710	67,710		
ь	Miscellaneous	2,681	2,681		
С	Printing	2,146	2,039	107	
d	Repairs & Maintenance	1,650	1,650		
е	Telephone	1,367	1,299	68	
f	All other expenses		1		
25		649,602	622,053	27,549	<u> </u>
	Joint costs. Check here ▶ 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		ļ	İ	
DAA	denig constanti				5000

		(2009) Highland Christian Acad	дешу :	58-2404999		Page 11
_ <u>P</u> ;	art X	Balance Sheet		(4)		(B)
				(A) Beginning of year		(B) End of year
_	4	Cook no interest house	<u> </u>	Degining of year	1	Life of year
	1	Cash—non-interest bearing		147,529	_	95,288
	2	Savings and temporary cash investments		147,529	3	95,200
	3	Pledges and grants receivable, net			4	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directors, tr				
		employees, and highest compensated employees Compl	ete Part II of		_	
		Schedule L	. 4	-	5	
	6	Receivables from other disqualified persons (as defined u				
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			
ţ	_	Part II of Schedule L			7	· · · · · · · · · · · · · · · · · · ·
Assets	7	Notes and loans receivable, net				
As	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges	1 1		9	
	TVa	Land, buildings, and equipment cost or	05 21	12		
	١.	other basis Complete Part VI of Schedule D	10a 85,21 10b 55,57		40-	29,640
		Less accumulated depreciation	10b 55,57	57,951		62,832
	11	Investments—publicly traded securities		57,931	11	02,632
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related. See Part IV, line 11			14	- -
	14	Intangible assets	-	15		
	15	Other assets See Part IV, line 11	236,653	_	187,760	
_	16_	Total assets. Add lines 1 through 15 (must equal line 34)		827	17	107,700
	17	Accounts payable and accrued expenses		027	18	
	18 19	Grants payable Deferred revenue			19	
					20	
ຜ	20 21	Tax-exempt bond liabilities	Pahadula D		21	_
Liabilities	22	Escrow or custodial account liability Complete Part IV of S			21	
Ę	22	Payables to current and former officers, directors, trustees employees, highest compensated employees, and disqua	=			
ia		persons Complete Part II of Schedule L	inieu		22	
	23	Secured mortgages and notes payable to unrelated third p	nortine.		23	
	24	Unsecured notes and loans payable to unrelated third part			24	
	25	Other liabilities Complete Part X of Schedule D	1162		25	
	26	Total liabilities. Add lines 17 through 25		827		
9		Organizations that follow SFAS 117, check here	and			
Ö		complete lines 27 through 29, and lines 33 and 34.	, and			
an	27	Unrestricted net assets		235,826	27	187,760
3al	28	Temporanly restricted net assets			28	
р	29	Permanently restricted net assets		· · -	29	·
٦		Organizations that do not follow SFAS 117, check her	• ▶ □			
띹		and complete lines 30 through 34.				
0	30	Capital stock or trust principal, or current funds			30	
4	31	Paid-in or capital surplus, or land, building, or equipment f	und		31	<u> </u>
SS	32	Retained earnings, endowment, accumulated income, or or			32	·
Net Assets or Fund Balances	33	Total net assets or fund balances	and fulled	235,826		187,760
Ž	34	Total liabilities and net assets/fund balances		236,653		187,760
		. Juli nasimios and not acceptante salatices				Form 990 (2000)

Form **990** (2009)

Form	990 (2009) Highland Christian Academy 58-2404999		_Pa	ge 12
<u>Ра</u>	irt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	İ	X
b	Were the organization's financial statements audited by an independent accountant?	2b		X
С	If "Yes" to line 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?	2c	L	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both		İ	
	Separate basis Consolidated basis Both consolidated and separate basis			
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?	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions. OMB No 1545-0047

2009

Open to Public Inspection

Internal Revenue Service Name of the organization

Part I

Department of the Treasury

Highland Christian Academy

Employer identification number 58-2404999 Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The	orgai	nization is not	a private foundation because	e it is (For lines 1 through 11, che	eck only o	ne box)							
1	Ц	A church, cor	nvention of churches, or asso	ociation of churches described in	section 1	70(b)(1)(A)(i).						
2	X	A school des	cnbed in section 170(b)(1)(/	A)(ii). (Attach Schedule E)									
3		A hospital or	a cooperative hospital service	e organization described in secti	ion 170(b)(1)(A)(iii)).						
4		A medical res	search organization operated	I in conjunction with a hospital de	escribed in	section	170(b)(1)(A)(iii).	Enter th	ne hosp	ıtal's name,		
		city, and state	e										
5		An organizati	on operated for the benefit o	f a college or university owned or	r operated	by a gove	ernmenta	al unit de	escribed	l ın			
		section 170(b)(1)(A)(iv). (Complete Part	II)									
6		A federal, sta	te, or local government or go	overnmental unit described in sec	ction 170(b)(1)(A)(v	<i>(</i>).						
7		An organizati	on that normally receives a s	substantial part of its support from	n a govern	mental ur	nit or fror	n the ge	neral pu	ublic			
		described in s	section 170(b)(1)(A)(vi). (Co	omplete Part II)									
8		A community	trust described in section 1	70(b)(1)(A)(vi). (Complete Part II	1)								
9		An organizati	on that normally receives (1)) more than 33 1/3 % of its suppo	ort from co	ntribution	s, memb	ership f	ees, and	d gross			
		receipts from	activities related to its exem	pt functions—subject to certain e	exceptions	, and (2) r	no more	than 33	1/3 % o	f its			
		support from	gross investment income an	d unrelated business taxable inco	ome (less	section 5	11 tax) fi	rom busi	nesses				
		acquired by the	he organization after June 30), 1975 See section 509(a)(2) . (Complete	Part III)							
10		An organization	on organized and operated e	exclusively to test for public safety	y. See sec	tion 509(a)(4).						
11	Ш	An organization	on organized and operated e	xclusively for the benefit of, to pe	erform the	functions	of, or to	carry ou	t the				
		purposes of o	one or more publicly supporte	ed organizations described in sec	tion 509(a)(1) or se	ction 509	9(a)(2) \$	See se c	tion			
		509(a)(3). Ch	eck the box that describes th	ne type of supporting organization	n and com	plete lines	11e thr	ough 11	h				
		а Туре	I b Type II	c Type III–Functions	ally integra	ited	ď	Тур	e III–Ot	her			
е				anization is not controlled directly		• •		•					
		persons other	r than foundation managers a	and other than one or more public	cly suppor	ted organ	ızatıons	describe	ed in sec	ction			
		, . , .	section 509(a)(2).										
f				mination from the IRS that it is a	Type I, Ty	pe II, or T	ype III s	upportin	g				
			check this box										
g		=	•	on accepted any gift or contributi	ion from a	ny of the							
		following per											1
			•	ntrols, either alone or together wi	th persons	s describe	ed in (ii)				<u> </u>	Yes	No
				the supported organization?							11g(i)	┼──	
		•	member of a person describe	• • • • • • • • • • • • • • • • • • • •							11g(iı)		-
			ontrolled entity of a person de								11g(ııi)		1
<u>h</u>			ollowing information about th		[m. a		63.54		4.13		4.55.4		
(1)		of supported	(ii) EiN	(iii) Type of organization (described on lines 1–9		organization sted in your		ou notify	organizat	is the bon in col	(vii) Ame supp		
	Ū			above or IRC section		document?		of your		zed in the			
				(see instructions))	Yes	No	Yes	nort?	Yes	S?			
			<u> </u>		163	110	163	NO	163	140			
									,				
								 					
					1								
		;											
												· · · · ·	
Total													

Schedule A (Form 990 or 990-EZ) 2009

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) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 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) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Amounts from line 4 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carned on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. Add lines 7 through 10 11 12 12 Gross receipts from related activities, etc. (see instructions) 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) 13 organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 33 1/3 % support test-2009. 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 33 1/3 % support test—2008. 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 10%-facts-and-circumstances test-2009. 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 10%-facts-and-circumstances test—2008. 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 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Page	1

Part III Support Schedule for Organizations Described in Section 509(a)(2)

	(Complete only if you che	ecked the box o	on line 9 of Pa	rt I.)	<u> </u>			
	tion A. Public Support					·		_
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009		(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 through 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 \$5,000 or 1% of the							
	amount on line 13 for the year							
C	Add lines 7a and 7b						+	
8	Public support (Subtract line 7c from line 6)						İ	
Sec	tion B. Total Support	<u> </u>		L		L		
	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009		(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						4	
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned 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)	[<u> </u>	į	
14	First five years. If the Form 990 is for the organization, check this box and stop here	_	second, third, fourt	n, or fifth tax year a	s a section 501(c)(3)		
Sec	tion C. Computation of Public Su		ane					
15	Public support percentage for 2009 (line 8,			(n)		1:	5 T	%
16	Public support percentage from 2008 Sche		•	•••		10		<u> </u>
_	tion D. Computation of Investme			-				
17	Investment income percentage for 2009 (lir			olumn (f))		1:	<u>, </u>	%
18	Investment income percentage from 2008 \$					1:	3	%
19a	33 1/3 % support tests—2009. If the organ	nization did not ched	k the box on line 1	4, and line 15 is m	ore than 33 1/3 %,	and line		
	17 is not more than 33 1/3 %, check this bo		_					▶ _
b	33 1/3 % support tests—2008. If the organ							⊾
20	line 18 is not more than 33 1/3 %, check the	•	_	•				

Schedule A (Form 990 or 990-EZ) 2009 Highland Christian Academy

58-2404999

Page 4

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

SCHEDULE D (Form-990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

Open to Public

Name	of t	he o	man	ization

	rtment of the Treasury hal Revenue Service		0, 7, 8, 9, 10, 11, or 12. 0. ► See separate instructions.		Open to Public Inspection
	e of the organization			Employe	r identification number
		istian Academy			404999
P		ations Maintaining Donor Advised Functions answered "Yes" to Form 990, F		counts	. Complete if
	the organ	inzation answered Tes to Form 590, i	(a) Donor advised funds	(b)	Funds and other accounts
1	Total number at end of	fyear	(a) Bollot advised falles	(6)	T dilas and outer accounts
2	Aggregate contribution	-		-	
3	Aggregate grants from				<u></u>
4	Aggregate value at end	, ,,	· · · · · · · · · · · · · · · · · · ·		
5	-	form all donors and donor advisors in writing that t	he assets held in donor advised		
	=	tion's property, subject to the organization's exclusive			Yes No
6		form all grantees, donors, and donor advisors in w	_		
_	=	e purposes and not for the benefit of the donor or o			
	•	permissible private benefit?	,,		Yes No
Pá		ation Easements. Complete if the orga	inization answered "Yes" to Form	990. Pa	
1		ation easements held by the organization (check a	•	,	
		nd for public use (e.g., recreation or pleasure)	Preservation of an historically impo	rtant land	area
	Protection of natur	ral habitat	Preservation of certified historic str		
	Preservation of op	en space			
2	Complete lines 2a thro	ough 2d if the organization held a qualified conserve	ation contribution in the form of a conservation	วก	
	easement on the last d	day of the tax year			
					Held at the End of the Tax Year
а	Total number of conse	rvation easements		2a	
þ	Total acreage restricted	d by conservation easements		2b	
C	Number of conservation	on easements on a certified historic structure include	led ın (a)	2c	
đ	Number of conservation	on easements included in (c) acquired after 8/17/06	3	2d	
3	Number of conservation	on easements modified, transferred, released, extir	iguished, or terminated by the organization o	lunng	
	the taxable year ▶ _				
4	Number of states wher	re property subject to conservation easement is loc	eated ▶		
5	Does the organization I	have a written policy regarding the periodic monitor	ring, inspection, handling of		
	violations, and enforce	ment of the conservation easements it holds?			Yes No
6	Staff and volunteer hou	urs devoted to monitoring, inspecting, and enforcing	g conservation easements during the year		
	-				
7		ncurred in monitoring, inspecting, and enforcing co	nservation easements during the year		
	> \$	· _ _			
8		on easement reported on line 2(d) above satisfy the	e requirements of section		
_	170(h)(4)(B)(ı) and sec		•	_	Yes No
9		ow the organization reports conservation easemer	·		
	· ·	lude, if applicable, the text of the footnote to the or ounting for conservation easements	ganization's financial statements that describ	oes	
			Historical Transverse or Other Si	milas A	
ra		tions Maintaining Collections of Art, e if the organization answered "Yes" to		milar A	sseis.
4.0	<u> </u>	ted, as permitted under SFAS 116, not to report in		orke of	
ıa	-	, or other similar assets held for public exhibition, o			
		e text of the footnote to its financial statements tha	·	O GOI VICE	•
h	•	ted, as permitted under SFAS 116, to report in its		of art	
~	•	other similar assets held for public exhibition, educ		•	
		mounts relating to these items	J. 10000101 III Iai dicitation of public of	,	
		in Form 990, Part VIII, line 1		•	\$
	(ii) Assets included in	•		•	<u> </u>
2	• •	ived or held works of art, historical treasures, or of	her similar assets for financial dain, provide	the	·
-	=	ured to be reported under SFAS 116 relating to the	- · ·		
а	= -	Form 990, Part VIII, line 1		•	\$
	Assets included in Form		•	•	·

		Christian A			58-240				Page Z
	irt III Organizations Maintaining						ets (conti	nued)
3	Using the organization's acquisition, accession, collection items (check all that apply)	, and other records, ch	eck any of the followi	ng that are a	significant us	e of its			
а	Public exhibition	d 🗌 Lo	an or exchange progr	rams					
b	Scholarly research	e 🗌 Ot	her				_		
C	Preservation for future generations								
4	Provide a description of the organization's colle Part XIV.	ctions and explain how	they further the orga	ınızatıon's ex	cempt purpose	ın.			
5	During the year, did the organization solicit or reassets to be sold to raise funds rather than to b				ılar			Yes	No.
Pa	art IV Escrow and Custodial Arra				swered "Y	es" to For			110
	IV, line 9, or reported an am				owered i		000, . 0		
	Is the organization an agent, trustee, custodian		· · · · · · · · · · · · · · · · · · ·		nt				
	included on Form 990, Part X?	or other intermediary i	or continuations or off	101 033013 11	o.			Yes	No
h	If "Yes," explain the arrangement in Part XIV an	nd complete the follows	na table					165	
	ii res, explain the anangement in ratt XIV an	io complete the followin	ig table				Amo	unt	
	Beginning balance					40	74110	<u></u>	
C	A 111					1c			
ď	• •								
e	Distributions during the year					1e			
1	Ending balance	- 000 D-4V L 040				1f			
	Did the organization include an amount on Form	n 990, Paπ X, line 217						Yes [No
	If "Yes," explain the arrangement in Part XIV If V Endowment Funds. Complete	to if organization	anawarad "Vaa"	to Form	OOO Bort I	/ line 10			
	rt V Endowment Funds. Comple	(a) Current year	ľ				-	0115 1100	m hoek
4-	Paris and Carabalana	(a) Current year	(b) Pnor year	(C) 1W0	years back (d) Three years	Dack (e) P	our yea	IS DACK
	0 0 ,		· · · · · · · · · · · · · · · · · · ·	_					
Ь	Contributions					 			
С	Net investment earnings, gains,				j				
	and losses								
ď	Grants or scholarships		-						
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the year er	nd balance held as:							
а	Board designated or quasi-endowment ▶	%							
b	Permanent endowment ▶ %								
C	Term endowment ▶ %								
3a	Are there endowment funds not in the possession	on of the organization t	hat are held and adm	ninistered for	the				
	organization by							Yes	No.
	(i) unrelated organizations						3a(<u>i) </u>	
	(ii) related organizations						3a(i	ii)	
b	If "Yes" to 3a(II), are the related organizations lis	sted as required on Scl	hedule R?				3b		
4	Describe in Part XIV the intended uses of the or								
Pa	rt VI Investments—Land, Buildir			90, Part <i>)</i>	(, line 10.				
	Description of investment	(a) Cost or other bas	is (b) Cost or	other	(c) Accum	nulated	(d) Bo	ok value	•
		(investment)	basis (ot	her)	depreca	ation			
1a	Land								
	Buildings						_		
	Leasehold improvements		1	9,748		3,500		16	248
	Equipment			9,933		38,347			586
	Other			5,532		13,726			806
	. Add lines 1a through 1e (Column (d) must equi	al Form 990. Part X. co				<u> </u>			640
		-,							

2. FIN 48 Footnote. 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.

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

Sche	dule D (Form 990) 2009 Highland Christian Academy	58-24049		Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	Audited Financial State	nents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	
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	
9	Total adjustments (net) Add lines 4 through 8		9	_
<u> 10</u>	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		10	
	rt XII Reconciliation of Revenue per Audited Financial Statemer	nts With Revenue per Re		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	1 - 1		
а	Net unrealized gains on investments	2a	-	
b	Donated services and use of facilities	2b	-	
C	Recoveries of prior year grants	2c	-	
	Other (Describe in Part XIV)	2d	-	
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	1 (3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	4.		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 4b	-	
D	Other (Describe in Part XIV) Add lines 4a and 4b	40	ا ۵۵	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		4c 5	
	rt XIII Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses per		
1	Total expenses and losses per audited financial statements	The trial Expenses per	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
ь	Pnor year adjustments	2b	1	
	Other losses	2c	7 1	
ď	Other (Describe in Part XIV.)	2d	7	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	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	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	
	rt XIV Supplemental Information			
omp	lete 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		
nd 2	b, Part V, line 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines	2d and 4b Also complete		
ns p	art to provide any additional information.			
				

Schedule D (Fo	orm 990) 2009	Highland	Christian	Academy	58-2404999	Page 5
Part XIV	Suppleme	ntal Information	Christian n (continued)			
	Сиррини		. (00.11.11.10.04)			
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			- -			
				-		
				- -		

SCHEDULE

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Schools

Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.
 ► Attach to Form 990 or Form 990-EZ.

OMB-No-1545-0047-

Open to Public Inspection

Nam	e of the organization Highland Christian Academy	Employer identification r	numbe	er 	
		_	Y	/ES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	_1		x	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2		x	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain. If you need more space, use Schedule O (Form 990)	3	,	x	
4	Does the organization maintain the following?				
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4	a .	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	_4	ь	x	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4	c :	x	
đ	Copies of all material used by the organization or on its behalf to solicit contributions?	4	d :	X	
	If you answered "No" to any of the above, please explain. If you need more space, use Schedule O (Form 990)				
5	Does the organization discriminate by race in any way with respect to				
а	Students' rights or privileges?	_ 5	а	_	X
b	Admissions policies?	_ 5	ь	_	x
С	Employment of faculty or administrative staff?	_ 5	<u>c </u>	-	X
d	Scholarships or other financial assistance?	_ 5	d		X
0	Educational policies?	_ 5	e	_	X
f	Use of facilities?	_5	f		X
g	Athletic programs?	5	9	+	X
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Schedule O (Form 990)	5	h		X
c -	Describe amounties recover any financial sides accepted to the control of the con				x
6a h	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	6	<u>а</u> Ь	\dashv	X
þ	Has the organization's right to such aid ever been revoked or suspended?	6	-	\dashv	
7	If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990) Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Schedule O (Form 990)	7		x	
	Original Act and Panaguark Paduction Act Notice see the Instructions for Form 990 or 990.E7	Schedule E (Form 990 o			2000

SCHEDULE G (Form 990 or 990 EZ)

Supplemental Information Regarding

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service

Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

See separate instructions.

Open To Public

I I raiger have 1						
				red "Yes" to Form	n 990, Part IV, li	ne 17.
1 Indicate whether the organization raised funds through	any of the following	activitie	s. Ch	eck all that apply		
a Mail solicitations	e Solicitation	of nor	n-gove	rnment grants		
b Internet and email solicitations	f Solicitation	of gov	/emm	ent grants		
c Phone solicitations	g 🗌 Special fui	ndraisir	ng eve	ents		
d In-person solicitations						
2a Did the organization have a written or oral agreement w or key employees listed in Form 990, Part VII) or entity	rith any individual (in in connection with pi	cluding	office	ers, directors, trustees indraising services?		Yes No
	undraisers) pursuan	t to agr	reeme	nts under which the fui	ndraiser is	
• •	(ii) Activity	raiser custo contr	have dy or ol of	, ,	(or retained by) fundraiser listed in	(vi) Amount paid to (or retained by) organization
		Yes	No			
	· · · · · · · · · · · · · · · · · · ·	+				-
						-
		\Box				
Total	1		•			

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

Schedule G (Form 990 or 990-EZ) 2009

Page 2

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 (b) Event #2 (c) Other events (d) Total events Fundraiser None (add col (a) through (event type) col (c)) (total number) (event type) 22,551 22,551 Gross receipts Less Charitable contributions Gross revenue (line 1 minus line 2) 22,551 22,551 Cash prizes Noncash prizes Rent/facility costs Direct Expenses Food and beverages Entertainment 10,387 10,387 Other direct expenses 10,387 Direct expense summary Add lines 4 through 9 in column (d) 12,164 Net income summary Combine line 3, column (d), and line 10 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. (b) Pull tabs/instant (d) Total gaming (Add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) Gross revenue Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes % % % Yes Yes Volunteer labor No Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Combine line 1, column d, and line 7 Yes No Enter the state(s) in which the organization operates gaming activities Is the organization licensed to operate gaming activities in each of these states? If "No," Explain Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a If "Yes," Explain Does the organization operate gaming activities with nonmembers? 11 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?

retain the state gaming license?

in the organization's own exempt activities during the tax year ▶

Sche	dule G (Form 990 or 990-EZ) 2009 Highland Christian Academy	<u>58-240499</u>	9	P	age 3
				Yes	No
13	Indicate the percentage of gaming activity operated in.				
а	The organization's facility	13a %			
b	An outside facility	13b %			
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?		15a		
b	If "Yes," enter the amount of gaming revenue received by the organization > \$	and the			
	amount of gaming revenue retained by the third party ▶ \$.				
С	If "Yes," enter name and address of the third party				
	Name ►				
	Address				
16	Gaming manager information				
	Name ►				
	Gaming manager compensation ▶ \$				
	Description of services provided ▶				
	Director/officer Employee Independent contractor				
17	Mandatory distributions				
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to				

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent

Schedule G (Form 990 or 990-EZ) 2009

SCHEDULE O

Supplemental Information to Form 990

OMB No 1545-0047

Department of the Treasury

(Form 990)

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. Attach to Form 990.

Open to Public Inspection

Internal Revenue Service Name of the organization

Highland Christian Academy

Employer identification number 58-2404999

Form 990, Part III, Line 4d - All Other Achievements Provide education and after school care to students

Form 990, Part VI, Line 11a - Organization's Process to Review Form 990 The return was prepared by Organization's independent external accountant. A copy of the return was provided to all members of the Board of Directors prior to filing the return.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy If a board member has a conflict of interest the board member must disclose that fact and abstain from participating in the deliberation and from voting.

Form 990, Part VI, Line 15a - Compensation Process for Top Official The salary of the executive director is determined annually by the board of directors.

Form 990, Part VI, Line 15b - Compensation Process for Officers Faculty salaries are set a beginning pay with increases following the cost of living allowance. Administrative salaries are set to comply with Georgia Department of Labor minimum wage law and similar salaries in the ares.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Upon request the governing documents, conflict of interest policy and financial statements are made available for public inspection at 2206 E.

Depreciation and Amortization (Including Information on Listed Property)

OMB No 1545-0172

2009

Department of the Treasury Internal Revenue Service

► See separate instructions.

► Attach to your tax return.

Attachment Sequence No 67

Nam	e(s) shown on return Highlar	nd Christi	an Academy	7						number)4999
	ness or activity to which this form relates							_		
$\overline{}$	ndirect Depreciat:									
Р	art I Election To Exper									
	Note: If you have a				<u>efore you</u>	com	<u>plete Pa</u>	<u>rt I.</u>		
1	Maximum amount See the instruct	-		sses					1	250,000
2	Total cost of section 179 property p	•	•						2	
3	Threshold cost of section 179 prop	•	•	struction	ns)				3_	800,000
4	Reduction in limitation Subtract lin								4	
5	Dollar limitation for tax year Subtract lin		r less, enter -0- If ma						5	
6	(a) Descriptio	n of property		(b) Cos	t (business use	only)	(c) I	Elected co:	st	4
		· · · · · · · · · · · · · · · · · · ·					1			
_	landari de Edul			<u> </u>		T _				4
7	Listed property Enter the amount f				_	_ 7	1		T -	
8	Total elected cost of section 179 pr		, ,	s 6 and 7	7				8	
9	Tentative deduction. Enter the sma								9	 - -
10 11	Carryover of disallowed deduction	•		4					10	<u> </u>
12	Business income limitation Enter the Section 179 expense deduction Action 179 expense deduction Action 179 expense deduction Action 179 expense deduction					see ins	tructions)		11	<u>. </u>
13) 11 •		<u> </u>		12	
	Carryover of disallowed deduction to: Do not use Part II or Part III below					13				
	art II Special Depreciati			rociatio	on (Do no	t inc	uda lista	d prop	orty)	(Soo instr.)
14	Special depreciation allowance for						aue liste	u prop	=1 (y.)	(See ilisti.)
	during the tax year (see instructions		ner man nsted prop	city) pia	CEU III SEI VICE	-			14	
15	Property subject to section 168(f)(1	•							15	 -
16	Other depreciation (including ACRS	•							16	5,297
	art III MACRS Depreciat		ide listed propi	erty) (See instru	ction	<u> </u>		1 10	3,231
		on (Do not more	***	ion A	OCC IIIStiu	CLIOI	<u></u>			
17	MACRS deductions for assets place	ed in service in tax ve	ears beginning befo	re 2009					17	
18	If you are electing to group any assets pl	•	• •		eral asset acco	unts c	heck here		<u> </u>	l
		Assets Placed in Se						iation S	/stem	
_	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depre (business/investme only—see instruct	ent use	(d) Recovery period	(e) (Convention	(f) Me	thod	(g) Depreciation deduction
19a	3-year property									
b	5-year property		-							
С	7-year property									
d	10-year property	1								
е	15-year property									
f	20-year property									
9	25-year property				25 yrs			S/l	_	-
h	Residential rental				27 5 yrs		мм	S/L	_	
	property				27 5 yrs.		ММ	S/L		
i	Nonresidential real				39 yrs		ММ	S/L		
	property						MM	S/l		
	Section C—As	sets Placed in Serv	rice During 2009 T	ax Year	Using the A	lterna	tive Depre	ciation S	System	
20a	Class life_							S/L		
b	12-year				12 yrs			S/l		
	40-year				40 yrs		MM	S/l		
<u> Pa</u>	rt IV Summary (See inst			_						
21	Listed property Enter amount from								21	
22	Total. Add amounts from line 12, lin	es 14 through 17, lin	es 19 and 20 in col	umn (g),	and line 21.	Enter	here			. =
	and on the appropriate lines of your	· ·	•		structions				22	5,297
23	For assets shown above and placed	-	e current year, ente	r the	ļ					
	portion of the basis attributable to se	ection 263A costs				23		_		

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF AMENDMENT

NAME CHANGE

I, Brian P. Kemp, the Secretary of State and the Corporations Commissioner of the State of Georgia, hereby certify under the seal of my office that

SOUTHLAND CHRISTIAN SCHOOL, INC.

a Domestic Non-Profit Corporation

has filed articles/certificate of amendment in the Office of the Secretary of State on 10/01/2010 changing its name to

HIGHLAND CHRISTIAN ACADEMY, INC.

and has paid the required fees as provided by Title 14 of the Official Code of Georgia Annotated. Attached hereto is a true and correct copy of said articles/ certificate of amendment.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on October 1, 2010



Brian P. Kemp Secretary of State و تلک س

10-00T-1 AM 10: 17

ARTICLES OF AMENDMENT

RECEIVED SECRETARY OF STATE SOUTH GA OFFICE

OF

ARTICLES OF INCORPORATION

Pursuant to O.C.G.A. Section 14-3-1005 of the Georgia Nonprofit Corporation Code, SOUTHLAND CHRISTIAN SCHOOL, INC., a Georgia corporation, hereby submits the following Articles of Amendment:

Article One

The name of the corporation is SOUTHLAND CHRISTIAN SCHOOL, INC.

Article Two

The Corporation hereby adopts the following Amendment to Change the Name Of the Corporation. The new name of the Corporation is:

HIGHLAND CHRISTIAN ACADEMY, INC.

Article Three

The foregoing amendment was adopted by unanimous vote of the board of directors pursuant to O.C.G.A. § 14-3-1002 without member approval as member approval was not required.

Article Four

The date of the Adoption of the Amendment was August 25, 2010.

Article Five

The undersigned does hereby certify that a Notice To Publish The Filing Of Articles Of

State of Georgia Name Change 3 Page(s)



Amendment To Change The Corporation's Name along with the publication fee of \$40.00 has been forwarded to The Valdosta Daily Times, the legal organ of the county of the registered office, as required by O.C.G.A. § 14-3-1005.1.

IN WITNESS WHEREOF, the undersigned has executed this Articles of Amendment on the 29th day of September, 2010.

WILTON E. STONE JR.

Attorney for Southland Christian School, Inc.

VERIFICATION

OF

REQUEST FOR PUBLICATION

The undersigned hereby certifies that he is attorney for SOUTHLAND CHRISTIAN SCHOOL, a Georgia corporation (the "Corporation"), and further certifies, pursuant to O.C.G.A. § 14-3-1005.1 (GCA § 22-1005.1) of the Georgia Business Corporation Code (the "Code") that:

1.

An amendment to the Articles of Incorporation of the Corporation changing the name of the Corporation to HIGHLAND CHRISTIAN ACADEMY, INC., was duly adopted on the 29th day of September, 2010.

2.

A request for publication of a notice of intent to file articles of amendment to change the name of the Corporation and payment therefor will be submitted to The Valdosta Daily Times as required by O.C.G.A. § 14-3-1005.1 (GCA § 22-1005.1).

IN WITNESS WHEREOF, the undersigned has hereunto set his hand, this 29th day of September, 2010.

SOUTHLAND CHRISTIAN ACADEMY, INC.

BY: With C. Mm



Georgia Secretary of State Britan P. Kemp

Archives · Corporations · Elections · News Room · Professional Licensure · Securities · State Capitol

Search

By Business Name

By Control No

By Officer

By Registered Agent

Verify

Verify Certification

New Filing

Click here to file online for:

New Limited Liability Company (LLC)

New Business Corporation

New Non-Profit Corporation

New Professional Corporation (PC)

Annual Registration

Annual Registration

Name Reservation

File Name Reservation

Online

Online Orders

Register for Online

Orders
Order Certificate of Existence

Order Certified Documents

View Filed Documents

Date: 2/8/2011

(Annual Registration History etc.)

File Annual Registration Online

or

Print A Paper Annual Registration Form

PLEASE NOTE: To download your Annual Registration forms you will need Adobe Reader to view and/or print. If you do not have Adobe Reader installed on your computer, click the "Get Adobe Reader" button on the right to download the reader free of charge from the Adobe website.



Annual Registrations

The Georgia Code only requires the Office of Secretary of State to retain annual registrations for a period of five years from the date in which it was filed. Annual registrations older than five years may no longer be available for certification or viewing on the web.

Business Name History

Name

Name Type

HIGHLAND CHRISTIAN ACADEMY, INC.

Current Name

SOUTHLAND CHRISTIAN SCHOOL, INC.

PRIOR NAME

Non-Profit Corporation - Domestic - Information

Control No.:

K821541

Status:

Active/Owes Current Year AR

Entity Creation Date:

6/5/1998

Jurisdiction:

GA

Principal Office Address:

2206 E HILL AVE VALDOSTA GA 31602

Last Annual Registration Filed

Date:

3/19/2010

Last Annual Registration Filed:

2010

Registered Agent

Agent Name:

W. E. PETE STONE, JR.

Office Address:

701 N PATTERSON ST

VALDOSTA GA 31601

Agent County: LOWNDES

Officers

Title:

CEO

Name:

Jackie Noble

Address:

2206 E. Hill Ave Valdosta GA 31601

Title:	CFO
Name:	Donald Warren
Address:	2870 Kinderlou Clyattville Road Valdosta GA 31602
Title:	Secretary
Name:	Stephanie Wilson
Address:	3008 Schroer Drive Valdosta GA 31602

]		
3/10/2011 10:45 AM	Fund Raising	
	Management & General	
ements	Program Service \$ 10,763	
Federal Statements	Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee) Total Program Ma Expenses Service \$ 10,763 \$ \$ 10,763 \$ \$ 10,763 \$	
41552 Highland Christian Academy 58-2404999 FYE: 6/30/2010	Form 990, P Description Professional Fees Total	

Form 8868 (F	Rev. 1-2011)					Page
	filing for an Additional (Not Automatic) 3-Month Extension, co	mplete only Part II and check this	oox		▶ X
Note. Only co	omplete Part II if you have already been g	ranted an automatic 3-mo	onth extension on a previously filed	Form 8868.		
• If you are	filing for an Automatic 3-Month Extens	ion, complete only Part	I (on page 1).			
Part II	Additional (Not Automatic)	3-Month Extension	of Time. Only file the origin	al (no copi	es needed).	
Type or	Name of exempt organization				oyer identificat	ion number
print		ľ				
File by the	Highland Christian	Academy		58-	2404999	
extended	Number, street, and room or suite no.	If a P.O. box, see instruc	tions			
due date for filing your	2206 East Hill Ave	nue				
return. See	City, town or post office, state, and ZII	P code. For a foreign add	ess, see instructions.			
instructions	Valdosta	GA 3160	1			
Enter the Retu	um code for the return that this applicatio	n is för (filë a separātē ap	plication for each return)			01
Application	1	Return	Application			Return
is For		Code	Is For			Code
Form 990		01	10.0.			Jour
Form 990-B	1	02	Form 1041-A			08
Form 990-E		03	Form 4720		·	09
Form 990-P		04	Form 5227		· · ·	10
	(sec. 401(a) or 408(a) trust)	05	Form 6069			11
	(trust other than above)	06	Form 8870			12
	complete Part II if you were not alread			sly filed Form	8868.	<u>'</u>
st with the nan I request For calen	roup, check this box nes and EINs of all members the extension and additional 3-month extension of time adar year year , or other tax year year entered in line 5 is for less than 12 is	on is for. until 05/15/11 ar beginning 07/0	01/09 , and ending_06/30			
☐ Ch	ange in accounting period					
Addi	letail why you need the extension tional time is reques accurate return.	ested to gath	er information to	prepai	re a com	plete
la If this app	olication is for Form 990-BL, 990-PF, 990	-T, 4720, or 6069, enter t	ne tentative tax, less any		<u> </u>	
nonrefund	fable credits. See instructions.		·	8a	\$	
b If this app	lication is for Form 990-PF, 990-T, 4720	or 6069, enter any refun	dable credits and			
estimated	tax payments made. Include any prior y	ear overpayment allowed	as a credit and any		1	
amount pa	aid previously with Form 8868.			8b	\$	
c Balance I	Due. Subtract line 8b from line 8a. Includ	e your payment with this	form, or, if required, deposit with			
FTD coup	on or, if required, by using EFTPS (Elect			8c	\$	
		Signature an	d Verification			
	perjury, I declare that I have examined this for omplete, and that I am authonzed to prepare th		hedules and statements, and to the best	of my knowledge	e and belief, it is	
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					Form 88	68 (Rev. 1-2011