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)

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

OMB No. 1545-0047 2007 Open to Public Inspection

Α	For the		-	ar, or tax year beginning	and ending				
	Check if app Address cha	ange	Please use IRS label or	C Name of organization YOU HAVE THE POWE					mployer identification number 52-1616253
	Name chan	•	print or	KNOW HOW TO USE I	- 			E Te	elephone number
	inibal return	.	type.	Number and street (or P.O. box if mail is r		i }	Room/suite		
\Box	Termmation		Specific	2814 12TH AVENUE					ccounting method: Cash
$\overline{\Box}$	Amended of	i i	Instruc-	City or town, state or country, and ZIP - 4 NASHVILLE	TN 37204			X Ac	ccrual Other (specify)
\equiv	Amended re	-	tions.			1		<u> </u>	
Ш	Application	pending		Section 501(c)(3) organizations and 4947(a)(1 rusts must attach a completed Schedule A (•	1	I are not applicable to see Is this a group return for		
Ġ	Website	: 5 N/.	'A				If "Yes," enter number of		
		ation type				7	Are all affiliates included		Yes No
	-	nly one)	. (37)	501(c) (3) ◀ (insert no.)	1947(a)(1) or 527	``	(If "No." attach a list. See inst		
ĸ	Check he			e organization is not a 509(a)(3) supporting organization		¬ H(d)	Is this a separate return	filed by a	an
	receipts are normally not more than \$25,000. A return is not required, but if the organization chooses organization covered by							a group r	ruling? Yes No
	-	•		a complete return		1	Group Exemption Nu	mber 🕨	
							Check ▶ if the	organiz	zation is not required
<u>L</u>	Gross re			6b, 8b, 9b, and 10b to line 12	245,149		to attach Sch. B (For		
_ <u>P</u>	art I	Reve	enue,	Expenses, and Changes in Net	Assets or Fund Ba	lances	See the instruc	<u>ctions.</u>	.)
	1	Contribution	ions, gift	ts, grants, and similar amounts received:	1				
	а	Contributi	ions to c	donor advised funds		1a		_	
	ь	Direct pub	blic supp	port (not included on line 1a)		1b	131,41		
	c	Indirect pu	ublic su	pport (not included on line 1a)	ļ	1c	2,74		
	d	Governme	ent cont	tributions (grants) (not included on line 1a		1d	41,75	4	
	е	Total (add	id lines 1	1a through 1d) (cash \$17	5,907 noncash \$)	1e	175,907
	2	Program :	service	revenue including government fees and c	ontracts (from Part VII, lin	ie 93)		2	60,002
	3	Members	hip due	s and assessments				3	
	4	Interest o	on saving	gs and temporary cash investments				4	7,637
	5	Dividends	s and in	terest from securities				5	
	6a	Gross ren	nts			6a	····	_	
	ь			6ь		_			
	c	Net renta	al incom	e or (loss). Subtract line 6b from line 6a				6c	<u> </u>
	7			t income (describe ►)			7	
Revenue	8a	Gross an	mount fro	om sales of assets other	(A) Securities		(B) Other	_	
eve	1	than inve	entory		. <u></u> .	8a	_		
ď	Ь	Less: cos	st or oth	er basis and sales expenses		8b		_	
	\ c	Gain or (I	(loss) (a	ttach schedule)	. <u>. </u>	8c		_	
	d	Net gain	or (loss). Combine line 8c, columns (A) and (B)				<u>8d</u>	
	9	Special e	events a	and activities (attach schedule). If any amo	ount is from gaming, chec	k here	▶ ∐		
	а	Gross re	evenue (not including \$	of			1	1
		contribut	tions rep	ported on line 1b)		9a			
	ь	Less: dir	rect exp	enses other than fundraising expenses		96		_	
	c			ioss) from special events. Subtract line 95	from line 9a			9c	
	10a	Gross sa	ales of i	nventory, less returns and allowances		10a			
	ь	Less: co	ost of go	ods sold		10b			
	l c	Gross pi	rofit or (loss) from sales of inventory (attach scheen	dule). Subtract line 10b fro	om line	10a	100	
	11	Other re	evenue (from Part VII, line 103)				11	
	12			Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c	, and 11			12	
_	13			es (from line 44, column (B))				13	
4				nd general (from line 44, column (C))				14	
6 6 7	5 15			om line 44, column (D))				15	5 17,749
	16			filiates (attach schedule)				16	074 026
Ų	17_			s. Add lines 16 and 44, column (A)				17	00 007
-		Excess	or (defi	cit) for the year. Subtract line 17 from line	12			18	0.25 0.45
1	os 19	Net ass	sets or fi	und balances at beginning of year (from lir	ne 73. column (A))			19	9 235,947
	Net Assorts 19 20 21	Other c	hanges	in net assets or fund balances (attach ex	olanation)			20	226 262
	2 21	Netass	2	206,860					

Form 990 (2007) YOU HAVE THE POWER	_		62-1616253	,	
Part II Statement of All organizations	must co	mplete column (A). Col	umps (B) (C) and (D)	are required for english	Page 2
Functional Expenses organizations ar	nd section	4947(а)(1) полехетр	charitable trusts but o	optional for others. (See	the instructions.)
Do not include amounts reported on line			(B) Program	(C) Management	
6b, 8b, 9b, 10b, or 16 of Part I.		(A; Total	services	and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule)					
(cash \$	1 1				
If this amount includes foreign grants, check here	22a				
22b Other grants and allocations (attach schedule)					
(cash \$ cash \$)			1		
If this amount includes foreign grants, check here 🕒 📙	22b			İ	
23 Specific assistance to individuals (attach	1		1		
schedule)	23				
24 Benefits paid to or for members (attach		1			
schedule)	24				
25a Compensation of current officers, directors.	1	İ			
key employees, etc. listed in			46 70-		
Part V-A See Statement 1	25a	49,180	46,721	984	1,475
b Compensation of former officers, directors,			}		
key employees, etc. listed in	1				
Part V-B	25b	+		·	
c Compensation and other distributions, not included above.					
to disqualified persons (as defined under section	25c			1	
4958(f)(1)) and persons described in section 4958(c)(3)(B) 26 Salaries and wages of employees not included	230	-	- +		
on lines 25a, b, and c	26	87,187	73,386	780	13,021
27 Pension plan contributions not included on	1 -	/			
lines 25a, b, and c	27				
28 Employee benefits not included on lines					- , , , , , , , , , , , , , , , , , , ,
25a – 27	28				
29 Payroll taxes	29	10,578	9,201	137	1,240
30 Professional fundraising fees	30				_
31 Accounting fees	31	4,500		4,500	
32 Legal fees	32				
33 Supplies	33	5,377	5,276	101	
34 Telephone	34	3,819	3,628	191	
35 Postage and shipping	35	3,623	3,261	181	181
36 Occupancy	36	12,780	11,503	754	523
37 Equipment rental and maintenance	37	2,313	2,081	116	116
38 Printing and publications	38	11,912	11,700	212	
39 Travel	39	1,720	1,720		
40 Conferences, conventions, and meetings	40				
41 Interest	41	1 204	1 005		103
42 Depreciation, depletion, etc. (attach schedule)	42	1,284	1,065	26	193
43 Other expenses not covered above (itemize):	1	70 063	75,725	3,238	1,000
a See Statement 2	43a	79,963	13,123	3,236	
b	43b				
c	43c				
d	43d 43e				
e	43e				
to the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second se	43g				
9 44 Total functional expenses. Add lines 22a					
44 Total functional expenses. Add lines 22a					

through 43g. (Organizations completing columns (B)-(D), carry these totals to lines					
13-15)	44	274,236	245,267	11,220	17,749
Joint Costs. Check ▶ ☐ if you are following SOP 98-2. Are any joint costs from a combined educational campaign a	nd fundraising	g solicitation reported in	(B) Program services?	•	Yes X No
# "Yes," enter (1) the aggregate amount of these joint costs \$			illocated to Program service	s \$	·
(iii) the amount allocated to Management and general \$		and (iv) the amount a	allocated to Fundraising \$		- 000

Form 990 (2007) YOU HAVE THE POWER	62-1616253	Poss 3
Part III Statement of Program Service Accomp	plishments (See the instructions.)	Page 3
orm 990 is available for public inspection and, for some people, ser particular organization. How the public perceives an organization in a on its return. Therefore, please make sure the return is complete and programs and accomplishments.	SUCh cases may be determined by the information account	
What is the organization's primary exempt purpose?		
SEE BELOW All organizations must describe their exempt purpose achievements of clients served, publications issued, etc. Discuss achievements the organizations and 4947(a)(1) nonexempt charitable trusts must also a PRODUCTION OF VIDEOS AND PUBLI	at are not measurable. (Section 501(c)(3) and (4) enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) Insts; but optional for others.)
GENERAL PUBLIC ABOUT ISSUES REVICTIMS RIGHTS, AND HEIGHTENS RESOURCES AVAILABLE TO THEM IN	ELATED TO VIOLENT CRIME AND PUBLIC AWARENESS ABOUT THE	
(Grants and allocations \$)	If this amount includes foreign grants, check here	245,267
b	was amount includes foreign grants, theta fiele	245,207
· · · · · · · · · · · · · · · · · · ·	•	Į.
(Grants and alterations 5		
(Grants and allocations S)	If this amount includes foreign grants, check here	
	,	
	e de la companya de la companya de la companya de la companya de la companya de la companya de la companya de	
(Grants and allocations \$	If this amount includes foreign grants, check here	
d		
	· ·	
the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of th		
(Grants and allocations S)	If this amount includes foreign grants, check here	
e Other program services (attach schedule)		
(Grants and allocations \$	If this amount includes foreign grants, check here	
f Total of Program Service Expenses (should equal line 44, col	umn (B), Program services)	245,267

245,267 Form 990 (2007)

	Note:	Where required, attached schedules and amounts within column should be for end-of-year amounts only.	the d	escri	olion				(A) Beginning of year			(B) End of year
\neg	45	Cash—non-interest-bearing								45	1	
1	46	Savings and temporary cash investments						Ì	231,452	46		192,541
}		,										
1	47a	Accounts receivable	47a			1	.2,	739			1	
	ь	Less: allowance for doubtful accounts	47b						600	47c	:	12,739
1		•										
	48a	Pledges receivable	48a							ļ ,	1	
	ь	Less: allowance for doubtful accounts	48b	<u> </u>						48c	:	
	49	Grants receivable						1		49		
	50a	Receivables from current and former officers, directors.	truste	es. ai	nd			1		1		
	}	key employees (attach schedule)						ļ		50a	4_	
	b	Receivables from other disqualified persons (as defined	under	seci	ion 4	958(f)((1)) ar	id		ł		
		persons described in section 4958(c)(3)(B) (att. schedul	e)					1		50b	<u> </u>	
	51a	Other notes and loans receivable (attach										
10		schedule)	51a	 							}	
Assets	ь	Less: allowance for doubtful accounts	51b	ᆚ						510	-	
As	52	Inventories for sale or use								52		
	53	Prepaid expenses and deferred charges Investments—publicly-traded					$\overline{}$		1,032	1		1,025
	54a	securities		>	\Box	Cost	\vdash	FIAV		542		
	þ	Investments—other securities (attach schedule)		>		Cost		FMV		54t	<u> </u>	
	55a	Investments—land, buildings, and equipment: basis	55a	1_								
	ь	Less: accumulated depreciation (attach	1							}		
		schedule)	55b							550	c	
	56	Investments—other (attach schedule)					4			56	<u>; </u>	
	57a	Land, buildings, and equipment; basis	57a	-			6,	<u>418</u>		1	1	
	ь	Less: accumulated depreciation (attach		1			_			.]	1	
		schedule) See Statement 3	57b				4,	839	2,863	570	<u>c </u>	1,579
	58	Other assets, including program-related investments										
		(describe ►							0.25 0.45	58		007.004
_	59	Total assets (must equal line 74). Add lines 45 through	<u> 58</u>	<u></u>					235,947	$\overline{}$	+	207,884
	60	Accounts payable and accrued expenses								60		1,024
	61	Grants payable								61		
	62	Deferred revenue								62	2	
S	63	Loans from officers, directors, trustees, and key emplo	yees (attac	h					1		
ilities		schedule)								63	_	
Liab	64a									64		
_	b	- 5.5								64		
	65	Other liabilities (describe						1		65	- -	
]	O 66	اء	1,024
_	66	Total liabilities. Add lines 60 through 65	and co		alo lie					3 60	-	
	Org		and Co	JIIIDIE	ste m	E2					-	
		67 through 69 and lines 73 and 74.							160,94	7 6	7	200,860
ces	67	Unrestricted	-						75,00			6,000
130	68	Temporarily restricted								6		
or Fund Balances	69	Permanently restricted ganizations that do not follow SFAS 117, check here	L	an	d					1	-	
פיי	1 019	complete lines 70 through 74.	, r	J 5						}		
Ē	-	Capital stock, trust principal, or current funds								7	0	
Š	70	Paid-in or capital surplus, or land, building, and equipr	nent fr	חחק						-	1	
Not Assets	71	Relained earnings, endowment, accumulated income.	or oth	ier fu	nds						'2	
1 0 0	72	Total net assets or fund balances. Add lines 67 thro	ough 6	9 or	lines							
2	<u> </u>	70 through 72. (Column (A) must equal line 19 and co	olumn	(B) n	nust					l		
	1	equal line 21)							235,94		73	206,860
	74	2 Add tippe 65 and 72							235,94	7 7	74	207,884
-		17 (Vial liabilities alto her associations salement										Form 990 (2007)

Forn	990 (2007) YOU HAVE THE POWER	62-16162	E 3			
P	art IV-A Reconciliation of Revenue per Audited Financi	ial Statements With Revi	2011e ner Re	turr	1Soo tha	Page 5
	mondetions.)		sinde per ive	turi	i (See the	
a	Total revenue, gains, and other support per audited financial statements			а		252,630
6	Amounts included on line a but not on Part I, line 12.		Ī			
1	Net unrealized gains on investments	b1				
2	Donated services and use of facilities	b2	7,481			
3	Recoveries of prior year grants	ьз			}	
4	Other (specify):	<u> </u>				
	Add they had shown by the	b4				
_	Add lines b1 through b4		. 1	ь		7,481
C C	Subtract line b from line a		[с		245,149
ď	Amounts included on Part I, line 12, but not on line a:		ĺ			_
1	Investment expenses not included on Part I, line 6b	<u>d1</u>			1	
2	Other (specify):		ì		l	
	Add Bassada and to	d2				
_	Add lines d1 and d2			d		
e D-	Total revenue (Part I, line 12). Add lines c and d art IV-B Reconciliation of Expenses per Audited Finance		▶	е		245,149
		cial Statements With Exp	enses per l	₹etu		
a	Total expenses and losses per audited financial statements	A Company		_a		281,717
b	Amounts included on line a but not Part I, line 17:					
1	Donated services and use of facilities	b1	7,481			
2	Prior year adjustments reported on Part I, line 20	b2				
3 4	Losses reported on Part I, line 20	b3				
4	Other (specify):	1	{		}	
	Add lines b1 through b4	b4				7 407
_	Subtract line b from line a			р		7,481
c d	the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s			<u> </u>		274,236
	Amounts included on Part I, line 17, but not on line a: Investment expenses not included on Part I, line 6b	11				
1 2		d1				
2	Other (specify):	42	j			
	Add lines d1 and d2	d2		-1	•	
	Total expenses (Part I, line 17). Add lines c and d	•		<u>d</u>		274,236
÷	art V-A Current Officers, Directors. Trustees, and Key	Employees (Liet pack earse	s who was an	e		
	or key employee at any time during the year even if they were	not compensated.) (See the inst	ructions.)	Dince	i, u nector, tre	istee,
		(B)	(C) Compensation	n (D)	Contributions to	(E) Expense
	(A) Name and address	Title and average hours per week devoted to position	(If not paid, ento	" pla	nployee benefit ans & deferred opensation plans	account and other allowances
BC	DARD MEMBERS	BOARD MEMBER		100	IDCI(SOLOT) DIGIIS	
	E LIST ATTACHED	20		اه	0	٥
VE	RNA WYATT NASHVILLE	EXEC. DIR.		1		
27	O LOCUSTWOOD TN 37211	40	49,18	0	0	0
			-			
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	0 (2007) YOU HAVE THE POWER	62-1616	253	·		ၣ	age 6
Part					\Box		No
	nter the total number of officers, directors, and trustees permitted to vote on organi	cation business at boar	đ		Γ		
	eetings	•			1	-	
	re any officers, directors, trustees, or key employees listed in Form 990. Pari V-A. (. 3	t		1	1	
	nployees listed in Schedule A, Part i, or highest compensated professional and oth	•				l	
	ontractors listed in Schedule A, Part II-A or II-B, related to each other through family				. 1		
re	lationships? If "Yes," attach a statement that identifies the individuals and explains	the relationship(s)			75b		X
_						ľ	
	o any officers, directors, trustees, or key employees listed in Form 990, Part V-A, o	•				ļ	
	ompensated employees listed in Schedule A, Part I, or highest compensated profes				. [ļ	ł
	dependent contractors listed in Schedule A, Part II-A or II-B, receive compensation	· · ·			.		
	rganizations, whether tax exempt or taxable, that are related to the organization? S	ee the instructions for			. 1		l
	e definition of "related organization."				75c		X
	"Yes," attach a statement that includes the information described in the instructions	5.			į į	ļ	ĺ
	oes the organization have a written conflict of interest policy?		 _		75d		X
Part							
	(If any former officer, director, trustee, or key employee received compe			-	year, li	ist that	t
	person below and enter the amount of compensation or other benefits it						
	(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid,	(D) Contributions to employee benefit) Expe	
	pry ribino ono bauross	107 200:3 310 7016:023	enter -0-)	employee benefil plans & deferred compensation plans		allowant	
N/A							
					_ _		
			i				
					ļ		
				ļ	1		
						-	
				ļ			
-							
			Į				
			<u> </u>				
Part				. 		Yes	No
76 C	old the organization make a change in its activities or methods of conducting activit	ies? If "Yes," attach a			}		
	letailed statement of each change				76	—	X
7 7 V	Vere any changes made in the organizing or governing documents but not reported	i to the IRS?			77	₩	X
	f "Yes," attach a conformed copy of the changes.				1	ł	
78a 🛭	Did the organization have unrelated business gross income of \$1,000 or more during	ig the year covered by			1	1	1
ti	his return?				78a	↓	X
	f "Yes," has it filed a tax return on Form 990-T for this year?				78b	 	
79 V	Nas there a liquidation, dissolution, termination, or substantial contraction during th	e year? If "Yes," attach	ı		1	}	1
	a statement				79	 	X
	s the organization related (other than by association with a statewide or nationwide						
c	common membership, governing bodies, trustees, officers, etc., to any other exem	pt or nonexempt					
	organization?				80a	4	X
	f "Yes," enter the name of the organization		· .			1	
	and checky	whether it is 🔲 exem	npt or 🔲 no	onexempt			}
81a (Enter direct and indirect political expenditures. (See line 81 instructions.)	Į	81a		<u> </u>		
	Did the organization file Form 1120-POL for this year?				81b		X
					For	m 99(0 (2007

Form	990 (2007) YOU HAVE THE POWER 62-1616253		F	age 7
	t VI Other Information (continued)		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge			
	or at substantially less than fair rental value?	82a	X	i
þ	If "Yes," you may indicate the value of these items here. Do not include this			
	amount as revenue in Part I or as an expense in Part II.			
	(See instructions in Part III.) See Stmt 4 82b 7,481	- 1		}
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	(
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? N/A	83b		
	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	84b		
85a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members? N/A	85a		
	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization	000		
	received a waiver for proxy tax owed for the prior year.			l
С	Dues, assessments, and similar amounts from members 85c			1
ď	Section 162(e) lobbying and political expenditures 85d			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e			1
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f		l	1
, g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g	}	1
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f	009		
••	to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the			
	following tax year?	85h	1	1
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	33.1	1	\vdash
ь	Gross receipts, included on line 12, for public use of club facilities 86b	İ		ł
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders 87a	1	1	1
	Gross income from other sources. (Do not net amounts due or paid to other		1	1
ь	sources against amounts due or received from them.)			ļ
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or	1	ł	
ooa	partnership, or an entity disregarded as separate from the organization under Regulations sections	Ì	1	
	301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a		x
ь	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the	- 555	\dagger	
U	meaning of section 512(b)(13)? If "Yes," complete Part XI	886		X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:	333	T	+
036	section 4911 ► 0 ; section 4912 ► 0 , section 4955 ► 0		1	1
ь	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction		1	
υ	during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach			
	a statement explaining each transaction	896		x
С	Enter: Amount of tax imposed on the organization managers or disqualified			1
·	persons during the year under sections 4912, 4955, and 4958		1	
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization			
u	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter		}	ł
e	transaction?	89e	,	x
	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f		X
,	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the			1
9	supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings			Ì
	at any time during the year?	899	9	X
902	List the states with which a copy of this return is filed TN			
	the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first term of the first te			
b	instructions.)			_ 4
01-	The books are in care of ▶ Deborah A. Kolarich Telephone no. ▶ 615	-32	0-7	888
314	2908 Poston Avenue			
	Located at ▶ Nashville, TN ZIP+4 ▶ 37203			
1-	At any time during the calendar year, did the organization have an interest in or a signature or other authority			
٥	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Ye	s No
	account)?	91	b	X
	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	1	-	
	and Financial Accounts.		_1_	
				ΩΛ

Form 990 (20		OWER		62-1	.61625:	3	_
Part VI	Other Information (cont						Page 8
c At any t	time during the calendar year, did the	organization maintain	an office out:	side of the United St	ates?		Yes No
IT Yes,	enter the name of the foreign counti	ry 🕨					91c X
92 Section	4947(a)(1) nonexempt charitable tru	sts filing Form 990 in lie	eu of Form 1	041—Check here			
and ent	er the amount of tax-exempt interest	received or accrued du	iring the tax	vear		▶ 92	and the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in the same in th
Part VII	Analysis of Income-Pro	ducing Activities	(See the	instructions.)		7 32	
Note: Enter g	ross amounts unless otherwise			d business income	Excluded	by section 512, 513, or 514	
indicated.			(A) usiness code	(B)	, ,		(E) Related or
	m service revenue:		usiness code	Amount	(C) Exclusion code	(D) Amount	exempt function
a <u>EDU</u>	JCATION MATERIALS/	VIDEOS			- 3000		income
b					_		60,002
•							
d							
е				 		 	
f Medicar	re/Medicaid payments						
g Feesar	nd contracts from government agenci	es					
	rship dues and assessments				+		
95 Interest	on savings and temporary cash inve	stments			14	7,637	
	ds and interest from securities				+	7,037	
	tal income or (loss) from real estate:				 		
	anced property				 		
	t-financed property				1		
	tal income or (loss) from personal pro	perty					
	evestment income				 		
100 Gain or	(loss) from sales of assets other than	n inventory			 		
	ome or (loss) from special events		—— <u> </u>				
	rofit or (loss) from sales of inventory			<u> </u>	1		
	evenue: a		i		1		
ь Т S	SHIRTS				12	15	
c POS	TAGE REIMBURSEMEN	T			12	1,588	
d				 	1	2/330	
e							
104 Subtota	I (add columns (B), (D), and (E))				0	9,240	60,002
	add line 104, columns (B), (D), and (E	<u> </u>		<u> </u>		<u> </u>	69,242
	5 plus line 1e, Part I, should equal th		art i	*			03,212
Part VIII	Relationship of Activitie			of Exempt Purp	oses (S	ee the instructions	3 \
Line No.	Explain how each activity for wh						
▼	of the organization's exempt pur					, 10 and 2200p	
93a	VIDEOS/PUBLICATI	ONS SOLD AT	OR BE	LOW COST I	O ORG	ANIZATIONS	
	THAT USE THE VID	EOS FOR EDU	CATION	AL PURPOSE			
Part IX	Information Regarding	Taxable Subsidiar	ries and D	isregarded Ent	ities (Se	e the instructions	5,)
	(A)	(B)		(C)		(D)	(E)
Name, ad partne	Idress, and EIN of corporation, rship, or disregarded entity	Percentage of ownership interest	,	lature of activities		Total income	End-of-year assets
N/2			9/c				
			%				
			%				
			%				
Part X	Information Regarding	Transfers Associa	ated with	Personal Benef	fit Contra	cts (See the ins	tructions.)
	he organization, during the year, rece						Yes X No
	he organization, during the year, pay						Yes X No
	Yes" to (b), file Form 8870 and Form					•	
							Form 990 (2007)

Form 990 (2007	YOU HAVE THE POWER		62-1616253	Page 9
Part XI	Information Regarding Transfers To	and From Controlle	ed Entities. Complete only if	the organization
	is a controlling organization as define	ed in section 512(b)(13).	
				Yes No
06 Did the	reporting organization make any transfers to a con-	strolled entity as defined in	section 512(b)(13) of	
	de? If "Yes," complete the schedule below for each			x
	(A)	(8)	(C)	
	Name, address, of each	Employer D	Description of	(D)
1	controlled entity	Number	transfer	Amount of transfe
 				
a				
		 		
ь				
				1
c				
<u> </u>				
	Totals			
 		<u> </u>		
				Yes No
107 Did the	e reporting organization receive any transfers from	a controlled entity as defin	ned in section	\
512(b)	(13) of the Code? If "Yes," complete the schedule b	elow for each controlled e	ntity	X
	(A)	(B)	(C)	(D)
l .	Name, address, of each	Employer IC	Description of	Amount of transfe
	controlled entity	Number	transfer	
a				
		 		
1				
Ы				
			· · · · · · · · · · · · · · · · · · ·	
С				
	Tatala			
	Totals			l
<u>_</u>		-		Yes No
108 Did the	e organization have a binding written contract in eff	ection August 17, 2006, co	overing the interest,	
rents,	royalties, and annuities described in question 107 a	above?		
	Under penalties of periury I declare that I have examine	d this return, including accome	panying schedules and statements, and to t	the best of my knowledge
	and belief, it is true, correct, and completer Declaration of	of preparer-tonner than officer)	is based on all infofmation of which prepare	er has any knowledge
Please	IN TOUR BUILDING	t (IlN/K	W WARDS	
Sign	Signature of officer			Date
Here	L VERNA A. LL VAT	S. S. S. S. S. S. S. S. S. S. S. S. S. S		
	Type or print name and title			
			Date Check if	Preparer's SSN or PTIN
Paid	Preparer's signature	//	self.	► X (See Gen. Instr. X) 418-78-034
Preparer's	Little II.	Kalariah CD	6/26/08 employed	
Use Only	Firm's name (or yours Debotati A.	Kolarich, CP	n	EIN ► 62-121041
, ,	if self-employed), 2908 Poston			Phone 615_220_700
	address, and ZIP+4 Nashville,	TN 37203		no. ▶ 615-320-788
				Form 990 (200

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No. 1545-0047

lame of the organ				_		· •	ification number
			USE IT, IN			62-16162	53
Part I	Compensation of the Five Highest Pa (See page 1 of the instructions. List ea					d Trustees	
	(a) Name and address of each employee paid more than \$50,000		(b) Title and aver	age hours	(c) Compensation	(d) Contributions empl. benefit plan	
NONE	(ng) 330,000		per week devoted	to position		& deferred comp	. aliowances
						1	
							
Total number o	f other employees paid over \$50,000	>					
Part II-A	Compensation of the Five Highest Pa						
	(See page 2 of the instructions. List e.			or firms	s). If there are		
			·		(b) Type of	service	(c) Compensation
	lms, Inc.	Nashville Tu = 3000					
1015 Father	land Street	TN 37206			/ideoProducti	on	60,611
	f others receiving over \$50,000 for						
professional se		المحمد المناه	0	(0	41		_
Part II-B	Compensation of the Five Highest P (List each contractor who performed firms. If there are none, enter "None."	services other	than profession	nal ser			s or
	(a) Name and address of each independent contract	-		1	(b) Type of	service	(c) Compensation
NONE		<u></u> _					
							-
							. –
Total number	of other contractors receiving over						
\$50,000 for ot		>					
	rk Reduction Act Notice, see the Instructions fo	or Form 990 and F	orm 990-EZ.		Sched	ule A (Form 99	0 or 990-EZ) 200

Sche	tule A (Form 990 or 990-EZ) 2007 YOU HAVE THE POWER	62-1616253			age 2
Pa	rt III Statements About Activities (See page 2 of the instructions.)			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? if "Yes," enter the total expenses paid or incurred in connection with the lobbying activities \$	n line 38.	1		х
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.				
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes." attach a detailed statement explaining the transactions.)	е			
а	Sale, exchange, or leasing of property?		2a		x
b	Lending of money or other extension of credit?		2 <u>b</u>		x
с	Furnishing of goods, services, or facilities?		2c		x
đ	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Part V-A	, Form 990	2d	х	igspace
е	Transfer of any part of its income or assets?		2e		X
3a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanat of how the organization determines that recipients qualify to receive payments.)	ion	3a		x
b	Did the organization have a section 403(b) annuity plan for its employees?	· · · · · · · · · · · · · · · · · · ·	3b		x
С	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement		3c		x
đ	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?		34		x
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g, If "No," complete	e			
b	lines 4f and 4g Did the organization make any taxable distributions under section 4966?		4a 4b		X
С	Did the organization make a distribution to a donor, donor advisor, or related person?		4c		
d	Enter the total number of donor advised funds owned at the end of the tax year				
ę	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year	·	_		
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advise funds included on line 4d) where donors have the right to provide advice on the distribution or investment of	d			
	amounts in such funds or accounts	· ·			0
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year				

Pa	art i'	Reason for Non-Private Founda	tion Status (See p	ages 4 through 8	of the instru	ctions.)					
cer 5	tify th	at the organization is not a private foundation bed A church, convention of churches, or association).x.)						
6	A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)										
7	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).										
8	A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).										
9	A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii). Enter the hospital's name, city,										
		and state					*****				
10		An organization operated for the benefit of a colle (Also complete the Support Schedule in Part IV		or operated by a govern	mental unit. Se	ction 170(b)(1)('A)(iv).				
11a		An organization that normally receives a substant 170(b)(1)(A)(vi). (Also complete the Support Sc		m a governmental unit o	or from the gene	eral public. Sect	tion				
11b		A community trust. Section 170(b)(1)(A)(vi). (Als	o complete the Support	Schedule in Part IV-A.)	•						
12	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 charitable, etc., 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). (Also complete the Support Schedule in Part IV-A.)										
13	An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:										
			Type III-Functionally Inte		e III-Other						
	Provide the following information about the supported organizations. (See page 8 of the instructions.) (a) (b) (c) (d) (e) Name(s) of supported organization(s) Employer Type of Is the supported Amount of identification organization organization listed in support number (EIN) (described in lines the supporting 5 through 12 organization's above or IRC governing documents?										
					Yes	No					
	_										
							·				
Tot	al .					, >					
14	Γ	An organization organized and operated to test	for public safety. Section	n 509(a)(4). (See page 8	of the instructi	ons.)					

Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting (d) 2003 (b) 2005 (a) 2006 (c) 2004 (e) Total Calendar year (or fiscal year beginning in) ▶ Gifts, grants, and contributions received. (Do 223,408 296,173 138,087 245,680 903,348 not include unusual grants. See line 28.) 0 16 Membership fees received Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the 41,314 38,632 41,417 organization's charitable, etc., purpose 28,551 149,914 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the 795 6,974 2,992 1,684 12,445 organization after June 30, 1975 Net income from unrelated business 0 activities not included in line 18 20 Tax revenues levied for the organization's benefit and either paid to it or expended on 0 its behalf The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the 0 public without charge Other Income, Attach a schedule. Do not include gain or (loss) from sale of capital assets 1,893 1,753 544 7,614 273,589 339,550 180,843 283,529 23 Total of lines 15 through 22 978 232,275 300,918 139,426 254, 24 Line 23 minus line 17 736 3,396 1,808 835 25 Enter 1% of line 23 0 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 26a b. Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts 26b Total support for section 509(a)(1) test: Enter line 24, column (e) 26c d Add: Amounts from column (e) for lines: 18 22 26b 26d e Public support (line 26c minus line 26d total) 26e Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 26f % Organizations described on line 12: a. For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person," Do not file this list with your return. Enter the sum of such amounts for each year 94,614 82,520 136,262 (2005)(2004)103,191 b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: 33,632 36,417 22,314 36,314 (2004) (2003)903,348 Add: Amounts from column (e) for lines: 16 149,914 1,053,262 27c 545,264 128,677 416,587 and line 27b total 27d d Add: Line 27a total 507,998 e Public support (line 27c total minus line 27d total) 27e ▶ 27f 077 Total support for section 509(a)(2) test: Enter amount from line 23, column (e) 511 27g 47.1455% Public support percentage (line 27e (numerator) divided by line 27f (denominator)) 1.1550% h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) 27h Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006. prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Pa	rt V Private School Questionnaire (See page 9 of the instructions.)	oo 6 in Bart IVI				
	(To be completed ONLY by schools that checked the box on lin		N/A		Yes	Ala
9	Does the organization have a racially nondiscriminatory policy toward students by statement in	its charter, bylaws.	ו	20	res	No
	other governing instrument, or in a resolution of its governing body? Does the organization include a statement of its racially nondiscriminatory policy toward stude.	ata in all ita	}	29		
10						
	brochures, catalogues, and other written communications with the public dealing with student a	admissions.				İ
	programs, and scholarships?		. ,	30		
17	Has the organization publicized its racially nondiscriminatory policy through newspaper or broad the period of callette line (as a trade of callette line (as a trade of callette line).			. 1		ì
	the period of solicitation for students, or during the registration period if it has no solicitation pro	ogram, in a way	ļ			1
	that makes the policy known to all parts of the general community it serves?			31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate s	tatement.)				1
		• • • • • • • • • • • • •		ļ		ł
		•				
	Book and the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first					
32	Does the organization maintain the following:	•				
a	Records indicating the racial composition of the student body, faculty, and administrative staff			32a		
Ь	Records documenting that scholarships and other financial assistance are awarded on a racia	illy nondiscriminatory				1
	basis?	and the second		326		
С	Copies of all catalogues, brochures, announcements, and other written communications to the	e public dealing				
	with student admissions, programs, and scholarships?		4	32c		 -
d	Copies of all material used by the organization or on its behalf to solicit contributions?	• • • • • • • • • • • • • • • • • • • •		32d		₩
			i			
	If you answered "No" to any of the above, please explain. (If you need more space, attach a s	eparate statement.)				
	· · · · · · · · · · · · · · · · · · ·			Ì		
	and the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control of the second control					ļ.
33	Does the organization discriminate by race in any way with respect to:					
а	Students' rights or privileges?			33a	 	├—
					1	
b	Admissions policies?			33b	-	—
					1	
С	Employment of faculty or administrative staff?	• • •		33c		}
				l		-
d	Scholarships or other financial assistance?			33d	-	
е	Educational policies?	$(x_1, \dots, x_n) = (x_1, \dots, x_n) = (x_1, \dots, x_n)$		33e		+
					İ	İ
f	Use of facilities?	• • • • • • • • • • • • • • • • • • • •		33f		+
g	Athletic programs?			33g		+
				 	1	Ì
h	Other extracurricular activities?		÷	33h	+	
				1	1	ł
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a	separate statement.)			1	1
				1	1	
	Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Contro				1	1
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				1		
34a	Does the organization receive any financial aid or assistance from a governmental agency?			34a	+-	+
b	Has the organization's right to such aid ever been revoked or suspended?			34b	'	+
	If you answered "Yes" to either 34a or b, please explain using an attached statement.					1
35	Does the organization certify that it has complied with the applicable requirements of section	s 4.01 through 4.05		1		Ì
	of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an e	xplanation		35		

- Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c Media advertisements
- Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- Grants to other organizations for lobbying purposes
- Direct contact with legislators, their staffs, government officials, or a legislative body q
- Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means h
- Total lobbying expenditures (Add lines c through h.)

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

								_
_	chadu	le Δ	Form	990	or 990)-EZ)	200	_ 7

Scheaule A (Form	n 990 or 990-EZ) 2007	YOU HA	VE THE POWER	62-1616253		Pa	ge 7
Part VII				s and Relationships With Noncharitable)		
			e page 14 of the instruction			_	
				h any other organization described in section			
			organizations) or in section 527 re	ating to political organizations?	٦		
		ation to a no	ncharitable exempt organization of			Yes	No
(i) Cash	* * * * * * * * * * * * * * * * * * * *				51a(i)		X
• •			• •		a(ii)		<u> X</u>
b Other trans					j j		17
* *	=		naritable exempt organization		b(i) !		X
	hases of assets from a n		•		b(ii)		X
• •	al of facilities, equipment		sets	e de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition de la composition della composition della composition della composition della composition della composition della composition della composition della composition della composition della composition della composition della composition della composition della composition della composition della composition della composition della composition della composition della comp	b(iii)		X
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	is or loan guarantees				b(v)		X
• •			r fundraising solicitations		b(vi)		X
_	, ,	-	er assets, or paid employees	the chartest always about the fair and the sales	С		<u> </u>
	•		•	(b) should always show the fair market value of the			
•		•		tion received less than fair market value in any			
		, snow in cor	umn (d) the value of the goods, oth				
(a) Line no.	(b) Amount involved	Name o	(c) Inoncharitable exempt organization	(d) Description of transfers, transactions, and sharing	arrangem	ents	
N/A							
A/ A	 						
	 	<u></u>					
	 						
		_					
	 						
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	- -			 			
		 					
							
	- 						
 							
F2a Is the orga	poization disastly or indise	ctly offiliated	with, or related to, one or more tax	evampt organizations			
-	•	-	han section 501(c)(3)) or in section	•		٠. ٦	X No
	omplete the following sch	•	man acciton ao rici(a)) or in section	<i>52</i> 7 :	1	es [X No
D 11 185, CC	(a)	icuuie.	(b)	(c)			
	(a) Name of organization		Type of organization	Description of relationship			
N/A							
11/12				 			
			-				
			 				
				 			
							
							
			 	 			
-	-		 				
			 	 			

Schedule A (Form 990 or 990-EZ) 2007

Form 4562

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

OMB No. 1545-0172

Name(s) shown on return

YOU HAVE THE POWER...

Identifying number

		W TO USE I	T, INC.				62-:	тρті	0253
Business or activity to which this fo									
Indirect Depr	_								
		e Certain Prope							
Maximum amount. See		ny listed property			you cor	npiete Pai	11.		105.000
2 Total cost of section 17				ses				1	125,000
3 Threshold cost of section								2	F00 000
4 Reduction in limitation.								3	500,000
5 Dollar limitation for tax year				ried illies essent	ala ann inni		· · · ·	4	
) Description		ess, enter o- it mai	(b) Cost (busin			Elected cost	5	
6				(4) 003. (803.)		(0)	-iecieu cosi		
						 			
7 Listed property. Enter th	ne amount fro	om line 29		· · · · · · · · · · · · · · · · · · ·	7				
8 Total elected cost of se			n column (c) lines	6 20d 7	<u> </u>			8	
9 Tentative deduction. En			(0),				ţ	9	
10 Carryover of disallowed		· · · · · · ·	06 Form 4562				[10	
11 Business income limitat		•		than zero) or lin	e 5 (see ir	structions)	1	11	
12 Section 179 expense de					,		• •	12	
13 Carryover of disallowed	deduction to	2008. Add lines 9 ar	nd 10, less line 12		▶ 13				
Note: Do not use Part II or Pa	ert III below fo	or listed property. Inst	lead, use Parl V.						
Part II Special D	e p reciatio	n Allowance an	d Other Depr	eciation (Do	not inc	ude listed	propert	v.) (S	See instructions.)
14 Special allowance for q									
property) and cellulosic	biomass eth	anol plant property pl	laced in service di	iring the tax ye	er (see ins	tructions)		14	
15 Property subject to sec	tion 168(f)(1)	election				-	ĺ	15	
16 Other depreciation (incl					<u> </u>			16	
	oprociatio	on IDa makinaliya	4- 1:		4 1 ° -		_		
Part III MACRS D	eprecialit	on (Do not includ	de listed prope	е пу.) (See п	ISTructio	<u>ns.)</u>			
Part III MACRS D	epreciatio	on (Do not includ		ion A	istructio	ns.)			
			Sect	ion A	ISTRUCTIO	ns.)		17	1,284
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Federal Statements

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FYE: 12/31/2007

Statement 1 - Form 990, Part II, Line 25a - Compensation of Current Officers

Name	Program Services	Management & General	Fundraising
Expenses	\$	\$	\$
EXECUTIVE DIRECTOR Compensation	46,721	984	1,475
Total	\$ 46,721	\$ 984	\$ 1,475

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Federal Statements

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FYE: 12/31/2007

Statement 2 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
Expenses	\$. \$	ı	\$	\$
PROFESSIONAL SERVICES	7,386	7,101	285	·
VIDEO PRODUCTION	67,3 5 8	67 ,3 5 8		
LICENSES & FEES	521		521	
INSURANCE	1,5 i 8		1,518	
MISCELLANEOUS	1,680	766	914	
EVENT ESPENSE	1,000			1,000
TRAINING	500	500		
Total	s 79,963 s	75,725	\$ 3,238	\$ 1,000

62-1616253

Federal Statements

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FYE: 12/31/2007

Statement 3 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

Description							
	 Beginning of Year		Accum Depr	_	End of Year	_	Accum Depr
COMPUTER EQUIPMENT					•		
	\$ 14,443	\$_	11,580	\$_	6,418	\$	4,839
Total	\$ 14,443	\$	11,580	\$_	6,418	\$_	4,839

62-1616253

Federal Statements

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FYE: 12/31/2007

Statement 4 - Form 990, Part VI, Line 82b - Donated Services

SEDVICES	Description	TOU DETV	ices
SERVICES CONTRIBUTED Total			Amount
10041			\$ 7,481
			\$ 7,481

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YOU HAVE THE POWER BOARD MEMBERS 2007

Ms. Cristina O. Allen May 2007 - Present

President. Caliente Consulting

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Ms. Mabel Arroyo, Attorney at Law May 2005- Present Baker, Donelson, Bearman, Caldwell & Berkowitz Commerce Center, Suite 1000 211 Commerce Street Nashville, Tennessee 37201 Phone 726-7387 Fax: 744-7387

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Mr. Nick Bailey, Attorney at Law May 2000 – Present (Board Secretary) 4700 Elkins Avenue Nashville, Tennessee 37209 Phone: 383-1095 Fax: 279-8106 e-mail: nickbailey@coincast.net

Ms. Andrea Conte Sept 1995 – Present (Board President) First Lady of Tennessee 2814 12th Avenue South Nashville, Tennessee 37204 Phone: 373-2787 Fax: 373-2759 e-mail: ac@aconte.com

Ms. Linda Davis February 2007 – Present P. O. Box 767 Hermitage, TN 37076 Phone: 566-6638

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Ms. Jody Folk
Sept. 1995 – Present (Board Treasurer)
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Ms. Pamela Lewis, PLA Media May 2001 – Present 1303 16th Avenue South Nashville, Tennessee 37212 Phone: 327-0100 Fax: 320-1061

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Ms. Pam Martin, President May 2005 - Present Cushion Employer Services Three Lakeview Place Bldg 22 Century Blvd, Suite 550 Nashville, Tennessee 37214

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YOU HAVE THE POWER BOARD MEMBERS 2007

Mr. John Tighe
May 2001 - Present
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Beth Wright
November 2003 - Present
Director of Marketing Services
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Ms. Brenda Wynn
May 2001 - Present
Office of Senator Jim Cooper
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Board meets on the 2nd Tuesday of February, May, August, and November at 8:30 a.m. at You Have the Power office, 2814 12th Avenue South, Nashville, Tennessee. All board members are unpaid.

Young Leaders Board Intern: Ashley M. Shearin May 2007 - Present LBMC Investment Advisors, LLC 5250 Virginia Way Brentwood, TN 37027 Phone: (615) 309-2389 Fax: (615) 309-2689

e-mail: ashearin@lbmc.com

Form 8868 (Rev April 2007)

(Rev. April 2007)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev. 4-2007)

Internal Revenue	Service				,
If you are	filing for an Au	tomatic 3-Month Extension,	complete only Part I and check this box		▶ X
If you are	filing for an Ad	ditional (not automatic) 3-Mo	onth Extension, complete only Part II (on page 2	of this form).	
			anted an automatic 3-month extension on a previou		
Part I	Automati	c 3-Month Extension of	f Time. Only submit original (no copies	s needed).	
Section 501(c)	corporations	required to file Form 990-T and	requesting an automatic 6-month extension-check	k this box and	
complete Part	I only			v.	
	orations (includ ome tax return	_	REMICs, and trusts must use Form 7004 to requ	est an extension of	
Electronic Fil	ing (e-file). G	enerally, you can electronically	file Form 8868 if you want a 3-month automatic ex	ctension of time to file	
			corporations required to file Form 990-T). However		
8868 electroni	ically if (1) you	want the additional (not autom	atic) 3-month extension or (2) you file Forms 990-f	BL, 6 069. o r 8870. grou	qı
returns, or a c	omposite or co	onsolidated Form 990-T. Instea	d, you must submit the fully completed and signed	page 2 (Part II) of Forn	1
8868. For mor	e details on th	e electronic filing of this form, v	risit www.irs.gov/efile and click on e-file for Charitie	s & Nonprofits.	
Type or	1	empt Organization		Employe	r identification number
print		AVE THE POWER		60.1	
File by the due date for	·	-	INC.	1 62-1	516253
filing your return. See		reet, and room or suite no. If a lact 12TH AVENUE SOU			
instructions.	City, town o		de. For a foreign address, see instructions. TN 37204		
Form 99 Form 99 Form 99 Form 99 The book Telephon If the orgi If this is for the whole a list with the 1 I reque	90 90-BL 90-EZ 90-PF s are in the ca e No. ▶ 63 enization does or a Group Ret group, check t names and EI st an automati	turn, enter the organization's for his box Ns of all members the extension and a section and a section are turn for: 1 2007 or	Form 990-T (corporation) Form 990-T (sec 401(a) or 408(a) trust) Form 990-T (trust other than above) Form 1041-A Kolarich FAX No. ► 615-320-43 Dusiness in the United Stales, check this box are digit Group Exemption Number (GEN) is for part of the group, check this box	0 6 !f this is If this is and attach extension of time e extension is	Form 4720 Form 5227 Form 6069 Form 8870
		ess than 12 months, check rea		Change in accoun	ting period
		or Form 990-BL, 990-PF, 990-T ble credits. See instructions.	, 4720, or 6069, enter the tentative tax,		\$
			any refundable credits and estimated tax		*
	• •	ude any prior year overpaymer	-	3b	\$
			your payment with this form, or, if required,		
			TPS (Electronic Federal Tax Payment		
Syster	n). See instruc	tions.		3c	s
	ou are going to	o make an electronic fund witho	drawal with this Form 8868, see Form 8453-EO an	id Form 8879-EO	

For Privacy Act and Paperwork Reduction Act Notice, see Instructions