

Form **990**  
 Department of the Treasury  
 Internal Revenue Service

**Return of Organization Exempt From Income Tax**  
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047  
**2006**  
 Open to Public Inspection

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

**A** For the 2006 calendar year, or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return  
 Amended return  
 Application pending

**C** Name of organization: **PROJECT CURE, INC.**  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
**6005 17TH STREET EAST**  
 City or town, state or country, and ZIP + 4  
**BRADENTON FL 34203**

**D** Employer identification number: **52-1317559**

**E** Telephone number: **888-234-9055**

**F** Accounting method:  Cash  Accrual  Other (specify) \_\_\_\_\_

**G** Website: **N/A**

**J** Organization type (check only one):  501(c) ( **4** ) (insert no.)  4947(a)(1) or  527

**K** Check here  if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

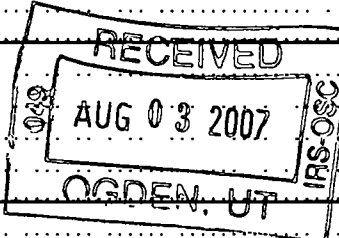
**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **5,115,252**

**H** and are not applicable to section 527 organizations. I  
**H(a)** Is this a group return for affiliates?  Yes  No  
**H(b)** If "Yes," enter number of affiliates **.....**  
**H(c)** Are all affiliates included?  Yes  No  
 (If "No," attach a list. See instructions.)  
**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No  
**I** Group Exemption Number **.....**  
**M** Check  if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

**Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)**

<b>1</b>	Contributions, gifts, grants, and similar amounts received:			
<b>a</b>	Contributions to donor advised funds	<b>1a</b>		
<b>b</b>	Direct public support (not included on line 1a)	<b>1b</b>	<b>5,059,834</b>	
<b>c</b>	Indirect public support (not included on line 1a)	<b>1c</b>		
<b>d</b>	Government contributions (grants) (not included on line 1a)	<b>1d</b>		
<b>e</b>	Total (add lines 1a through 1d) (cash \$ <b>5,059,834</b> noncash \$ _____ )	<b>1e</b>		<b>5,059,834</b>
<b>2</b>	Program service revenue including government fees and contracts (from Part VII, line 93)	<b>2</b>		
<b>3</b>	Membership dues and assessments	<b>3</b>		
<b>4</b>	Interest on savings and temporary cash investments	<b>4</b>		
<b>5</b>	Dividends and interest from securities	<b>5</b>		
<b>6a</b>	Gross rents	<b>6a</b>		
<b>b</b>	Less: rental expenses	<b>6b</b>		
<b>c</b>	Net rental income or (loss). Subtract line 6b from line 6a	<b>6c</b>		
<b>7</b>	Other investment income (describe _____ )	<b>7</b>		
<b>8a</b>	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	
<b>b</b>	Less: cost or other basis and sales expenses	<b>8a</b>		
<b>c</b>	Gain or (loss) (attach schedule)	<b>8b</b>		
<b>d</b>	Net gain or (loss). Combine line 8c, columns (A) and (B)	<b>8c</b>		
<b>8d</b>				
<b>9</b>	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>			
<b>a</b>	Gross revenue (not including \$ _____ of contributions reported on line 1b)	<b>9a</b>		
<b>b</b>	Less: direct expenses other than fundraising expenses	<b>9b</b>		
<b>c</b>	Net income or (loss) from special events. Subtract line 9b from line 9a	<b>9c</b>		
<b>10a</b>	Gross sales of inventory, less returns and allowances	<b>10a</b>		
<b>b</b>	Less: cost of goods sold	<b>10b</b>		
<b>c</b>	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	<b>10c</b>		
<b>11</b>	Other revenue (from Part VII, line 103)	<b>11</b>		<b>55,418</b>
<b>12</b>	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	<b>12</b>		<b>5,115,252</b>
<b>Expenses</b>	<b>13</b> Program services (from line 44, column (B))	<b>13</b>		<b>1,241,356</b>
	<b>14</b> Management and general (from line 44, column (C))	<b>14</b>		<b>76,745</b>
	<b>15</b> Fundraising (from line 44, column (D))	<b>15</b>		<b>3,681,916</b>
	<b>16</b> Payments to affiliates (attach schedule)	<b>16</b>		
	<b>17</b> Total expenses. Add lines 16 and 44, column (A)	<b>17</b>		<b>5,000,017</b>
<b>Net Assets</b>	<b>18</b> Excess or (deficit) for the year. Subtract line 17 from line 12	<b>18</b>		<b>115,235</b>
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	<b>19</b>		<b>-1,487,578</b>
	<b>20</b> Other changes in net assets or fund balances (attach explanation)	<b>20</b>		
	<b>21</b> Net assets or fund balances at end of year. Combine lines 18, 19, and 20	<b>21</b>		<b>-1,372,343</b>



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**Part II Statement of Functional Expenses**

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See the instructions)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>22a</b>	Grants paid from donor advised funds (attach schedule) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
<b>22b</b>	Other grants and allocations (attach schedule) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
<b>23</b>	Specific assistance to individuals (attach schedule)				
<b>24</b>	Benefits paid to or for members (attach schedule)				
<b>25a</b>	Compensation of current officers, directors, key employees, etc listed in Part V-A (attach schedule) <b>See Statement 1</b>	188,074	112,844	37,615	37,615
<b>25b</b>	Compensation of former officers, directors, key employees, etc listed in Part V-B (attach schedule)				
<b>25c</b>	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)				
<b>26</b>	Salaries and wages of employees not included on lines 25a, b, and c				
<b>27</b>	Pension plan contributions not included on lines 25a, b, and c				
<b>28</b>	Employee benefits not included on lines 25a - 27				
<b>29</b>	Payroll taxes	8,004	4,802	1,601	1,601
<b>30</b>	Professional fundraising fees	509,932	127,483		382,449
<b>31</b>	Accounting fees	20,350		14,245	6,105
<b>32</b>	Legal fees	4,097	410	2,458	1,229
<b>33</b>	Supplies	10,611	9,100	211	1,300
<b>34</b>	Telephone	5,975	4,780	598	597
<b>35</b>	Postage and shipping	1,202,054	300,315	795	900,944
<b>36</b>	Occupancy	9,540	5,724	1,908	1,908
<b>37</b>	Equipment rental and maintenance				
<b>38</b>	Printing and publications	1,168,282	177,463		990,819
<b>39</b>	Travel	42,543	36,678	625	5,240
<b>40</b>	Conferences, conventions, and meetings				
<b>41</b>	Interest				
<b>42</b>	Depreciation, depletion, etc (attach schedule)	10,857	0	10,857	
<b>43</b>	Other expenses not covered above (itemize):				
<b>a</b>	<b>See Statement 2</b>	1,819,698	461,757	5,832	1,352,109
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>f</b>					
<b>g</b>					
<b>44</b>	<b>Total functional expenses.</b> Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	5,000,017	1,241,356	76,745	3,681,916

**Joint Costs.** Check  if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ **4,483,848**, (ii) the amount allocated to Program services \$ **968,050**,  
 (iii) the amount allocated to Management and general \$ **795**, and (iv) the amount allocated to Fundraising \$ **3,515,003**

**Part III Statement of Program Service Accomplishments (See the instructions.)**

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose?

▶ **SEE ATTACHED LISTING**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

**Program Service Expenses**  
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others.)

**a See Statement 3**

(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶

**b**

(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶

**c**

(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶

**d**

(Grants and allocations \$ ) 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, column (B), Program services)**

**1,241,356**  
**1,241,356**

**Part IV Balance Sheets (See the instructions.)**

**Note:** Where required, attached schedules and amounts within the description column, should be for end-of-year amounts only

		(A) Beginning of year		(B) End of year		
<b>Assets</b>	45	Cash-non-interest-bearing	177,598	45	116,399	
	46	Savings and temporary cash investments		46		
	47a	Accounts receivable				
	b	Less allowance for doubtful accounts		47c		
	48a	Pledges receivable				
	b	Less allowance for doubtful accounts		48c		
	49	Grants receivable		49		
	50a	Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		50a		
	b	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (att schedule)		50b		
	51a	Other notes and loans receivable (attach schedule)				
	b	Less allowance for doubtful accounts		51c		
	52	Inventories for sale or use		52		
	53	Prepaid expenses and deferred charges		53		
	54a	Investments—publicly-traded securities		54a		
	b	Investments—other securities (attach schedule)		54b		
	55a	Investments-land, buildings, and equipment, basis				
	b	Less accumulated depreciation (attach schedule)		55c		
	56	Investments-other (attach schedule)		56		
57a	Land, buildings, and equipment, basis	210,777				
b	Less accumulated depreciation (attach schedule) <b>See Statement 4</b>	90,254	107,618	57c	120,523	
58	Other assets, including program-related investments (describe <b>See Statement 5</b> )		34,171	58	49,752	
59	<b>Total assets</b> (must equal line 74) Add lines 45 through 58		319,387	59	286,674	
<b>Liabilities</b>	60	Accounts payable and accrued expenses	1,764,881	60	1,646,143	
	61	Grants payable		61		
	62	Deferred revenue		62		
	63	Loans from officers, directors, trustees, and key employees (attach schedule)		63		
	64a	Tax-exempt bond liabilities (attach schedule)		64a		
	b	Mortgages and other notes payable (attach schedule)		64b		
	65	Other liabilities (describe <b>See Statement 6</b> )		42,084	65	12,874
	66	<b>Total liabilities.</b> Add lines 60 through 65		1,806,965	66	1,659,017
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74					
	67	Unrestricted		67		
	68	Temporarily restricted		68		
	69	Permanently restricted		69		
	Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 70 through 74					
	70	Capital stock, trust principal, or current funds		70		
	71	Paid-in or capital surplus, or land, building, and equipment fund		71		
	72	Retained earnings, endowment, accumulated income, or other funds	-1,487,578	72	-1,372,343	
73	<b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21))	-1,487,578	73	-1,372,343		
74	<b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73	319,387	74	286,674		

**Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)**

<b>a</b>	Total revenue, gains, and other support per audited financial statements	<b>a</b>	<b>5,115,252</b>
<b>b</b>	Amounts included on line a but not on Part I, line 12:		
<b>1</b>	Net unrealized gains on investments	<b>b1</b>	
<b>2</b>	Donated services and use of facilities	<b>b2</b>	
<b>3</b>	Recoveries of prior year grants	<b>b3</b>	
<b>4</b>	Other (specify):	<b>b4</b>	
	Add lines b1 through b4	<b>b</b>	
<b>c</b>	Subtract line b from line a	<b>c</b>	<b>5,115,252</b>
<b>d</b>	Amounts included on Part I, line 12, but not on line a:		
<b>1</b>	Investment expenses not included on Part I, line 6b	<b>d1</b>	
<b>2</b>	Other (specify):	<b>d2</b>	
	Add lines d1 and d2	<b>d</b>	
<b>e</b>	Total revenue (Part I, line 12). Add lines c and d	<b>e</b>	<b>5,115,252</b>

**Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

<b>a</b>	Total expenses and losses per audited financial statements	<b>a</b>	<b>5,000,017</b>
<b>b</b>	Amounts included on line a but not Part I, line 17:		
<b>1</b>	Donated services and use of facilities	<b>b1</b>	
<b>2</b>	Prior year adjustments reported on Part I, line 20	<b>b2</b>	
<b>3</b>	Losses reported on Part I, line 20	<b>b3</b>	
<b>4</b>	Other (specify):	<b>b4</b>	
	Add lines b1 through b4	<b>b</b>	
<b>c</b>	Subtract line b from line a	<b>c</b>	<b>5,000,017</b>
<b>d</b>	Amounts included on Part I, line 17, but not on line a:		
<b>1</b>	Investment expenses not included on Part I, line 6b	<b>d1</b>	
<b>2</b>	Other (specify):	<b>d2</b>	
	Add lines d1 and d2	<b>d</b>	
<b>e</b>	Total expenses (Part I, line 17). Add lines c and d	<b>e</b>	<b>5,000,017</b>

**Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)**

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
MICHAEL EVERS 6005 17TH STREET EAST BRADENTON FL 34203	PRESIDENT 0	188,074	0	0
RICHARD REITER 6005 17TH STREET EAST BRADENTON FL 34203	TREASURER 0	0	0	0
SCOTT ANDERSON 3824 W. ARGO STREET TUCSON AZ 85274	DIRECTOR 0	0	0	0



Part 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?		X
b	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.)		
82b			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	N/A	
83b			
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
84b		X	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		X
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		X
c	Dues, assessments, and similar amounts from members	85c	0
d	Section 162(e) lobbying and political expenditures	85d	0
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	0
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	0
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	N/A	
85g			
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	N/A	
85h			
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a	
b	Gross receipts, included on line 12, for public use of club facilities	86b	
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a	X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b	X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction 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	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶		0
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶		0
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	X
90a	List the states with which a copy of this return is filed ▶ <b>AL, AR, AZ, CA</b>		
b	Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)	90b	1
91a	The books are in care of ▶ <b>MICHAEL EVERS</b> <b>6005 17TH STREET EAST</b> Located at ▶ <b>BRADENTON, FL</b>	Telephone no. ▶	<b>888-234-9055</b>
		ZIP + 4 ▶	<b>34203</b>
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	91b	X





**Part XI Information Regarding Transfers To and From Controlled Entities.** Complete only if the organization is a controlling organization as defined in section 512(b)(13).

**106** Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity

Yes	No
	<b>X</b>

	(A) Name, address, of each controlled entity	(B) Employer ID Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
<b>Totals</b>				

**107** Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity

Yes	No
	<b>X</b>

	(A) Name, address, of each controlled entity	(B) Employer ID Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
<b>Totals</b>				

**108** Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Please Sign Here**

Signature of officer: *Michael S. Evers* Date: *7/30/07*

Type or print name and title: *Michael S. Evers, President*

**Paid Preparer's Use Only**

Preparer's signature: *Brent Browning CAA* Date: *7/16/07* Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: **Bevis Eberhart Browning Walker & Stewart**  
**PO Box 1456**  
**Ozark, AL 36361-1456**

Preparer's SSN or PTIN (See Gen Instr X): **P00278500**  
 EIN: **63-1241501**  
 Phone no: **334-774-0514**

## Federal Statements

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

Name	Program Services	Management & General	Fundraising
Expenses	\$	\$	\$
Compensation	112,844	37,615	37,615
Total	<u>\$ 112,844</u>	<u>\$ 37,615</u>	<u>\$ 37,615</u>

52-1317559

## Federal Statements

FYE: 12/31/2006

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

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
	\$	\$	\$	\$
Expenses				
BANK CHARGES	59,016	16,675	1,074	41,267
CAGING & CASHIERING	243,196	60,799		182,397
DATA PROCESSING	79,263	19,816		59,447
DONATIONS	30,732	30,000	732	
DUES & SUBSCRIPTIONS	1,465		1,465	
KIT FULFILLMENT PACKAGES	152,810	152,810		
INSURANCE	12,585	7,551	2,517	2,517
LICENSES & TAXES	44		44	
LIST RENTALS	540,961	135,240		405,721
MAIL HOUSE FEES	2,220	555		1,665
OUTSIDE SERVICES	22,230	22,230		
PRODUCTION FEES	55,760	13,940		41,820
STATE REGISTRATIONS	8,563	2,141		6,422
TELEMARKETING	610,853			610,853
<b>Total</b>	<u>\$ 1,819,698</u>	<u>\$ 461,757</u>	<u>\$ 5,832</u>	<u>\$ 1,352,109</u>

# Federal Statements

## Statement 3 - Form 990, Part III, Line a - Statement of Program Service Accomplishments

### Description

LOBBYING - PROJECT CURE, INC.'S LOBBYING PROGRAM IS DIRECTED AT THE WHITE HOUSE AND CONGRESS, PROMOTING FOUR PROGRAMS: THE ALZHEIMER'S DISEASE FUND, CENTER FOR ADVANCED HEART RESEARCH, THE NATIONAL DIABETES FUND, AND THE PROSTATE CANCER FUND. AT THE CORE OF EACH OF THESE PROGRAMS IS THE BASIC PREMISE THAT AMERICA'S HEALTH CARE SYSTEM, WHICH IS GEARED TOWARD SERVING THE INTERESTS OF HEALTH CARE PROVIDERS, MUST BE RADICALLY ALTERED TO SERVE THE INTEREST OF THE AMERICAN PUBLIC. THESE PROGRAMS ENCOURAGE CITIZENS TO COMMUNICATE THEIR VIEWS TO LAWMAKERS VIA PETITIONS, LETTERS, PHONE CALLS, AND PERSONAL VISITS. MEETINGS WITH LAWMAKERS AND THEIR AIDES ARE ALSO CONDUCTED TO DISCUSS PERTINENT HEALTH ISSUES AND LEGISLATION.

EDUCATION - INFORMATION REGARDING HEART DISEASE, ALZHEIMER DISEASE, DIABETES, AND PROSTATE CANCER TREATMENTS ARE DISSEMINATED TO THE PUBLIC VIA LETTERS, BROCHURES, PRINTED MATERIAL, RADIO AND TELEVISION PRESENTATIONS AND PARTICIPATION IN SEMINARS, WORKSHOPS, AND DEBATES. HEALTH CARE PROVIDERS, MEDIA AND OTHERS INTERESTED IN EXPANDING THEIR KNOWLEDGE IN THESE AREAS ARE PROVIDED EDUCATIONAL INFORMATION IN AN EFFORT TO BROADEN THE BASE OF RESEARCH, LOOKING INTO NEW CUTTING EDGE TREATMENTS.

**Federal Statements**

**Statement 4 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment**

<u>Description</u>	<u>Beginning of Year</u>	<u>Accum Deprec</u>	<u>End of Year</u>	<u>Accum Deprec</u>
Total	\$ 0	\$ 0	\$ 210,777	\$ 90,254
	<u>0</u>	<u>0</u>	<u>210,777</u>	<u>90,254</u>

**Statement 5 - Form 990, Part IV, Line 58 - Other Assets**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
EMPLOYEE ADVANCES	\$ 34,171	\$ 49,752
Total	\$ 34,171	\$ 49,752
	<u>34,171</u>	<u>49,752</u>

**Statement 6 - Form 990, Part IV, Line 65 - Other Liabilities**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
ACCRUED MEDICARE	\$ 277	\$ 407
ACCRUED FEDERAL WITHHOLDING	1,500	3,050
ACCRUED STATE WITHHOLDING	1,866	460
ACCRUED SOCIAL SECURITY		434
ACCRUED FUTA		-56
N/P AMERICAN EXPRESS	38,441	8,579
Total	\$ 42,084	\$ 12,874
	<u>42,084</u>	<u>12,874</u>

**Depreciation and Amortization**  
**(Including Information on Listed Property)**

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

Name(s) shown on return <b>PROJECT CURE, INC.</b>	Identifying number <b>52-1317559</b>
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Business or activity to which this form relates

**Indirect Depreciation**

**Part I Election To Expense Certain Property Under Section 179**

**Note: If you have any listed property, complete Part V before you complete Part I.**

1 Maximum amount See the instructions for a higher limit for certain businesses	1	108,000
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation	3	430,000
4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
<b>(a) Description of property</b>		
<b>(b) Cost (business use only)</b>		
<b>(c) Elected cost</b>		
6		
7 Listed property Enter the amount from line 29	7	
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2005 Form 4562	10	
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2007 Add lines 9 and 10, less line 12	13	

**Note: Do not use Part II or Part III below for listed property. Instead, use Part V.**

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

14 Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	718

**Part III MACRS Depreciation (Do not include listed property.) (See instructions)**

**Section A**

17 MACRS deductions for assets placed in service in tax years beginning before 2006	17	6,744
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	<input type="checkbox"/>	

**Section B-Assets Placed in Service During 2006 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property		23,762	7.0	HY	200DB	3,395
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

**Section C-Assets Placed in Service During 2006 Tax Year Using the Alternative Depreciation System**

20a Class life						
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

**Part IV Summary (see instructions)**

21 Listed property Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations-see instr	22	10,857
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.