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OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

2010

For	cale	ndar year 2	2010, or tax '	year b	eginning 01-	-01-	·2010 , and	l end	ding 12-31-	2010	
G C1	neck a	ll that apply	Initial retu		Initial return		former public ch		Final re	turn	
		undation J CIENER BOTANI		o curri	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u>g</u> c	7 1141115			entification numbe	er
	L FAUL) CIENER BOTANI	CAL GARDEN						56-2105544		
Num	ber and	street (or P O bo	ox number if mail is	not delive	ered to street address	ss) F	Room/suite		B Telephone nu	ımber (see page 10 c	of the instructions)
22	0 SOUT	H MAIN STREET							(336) 996-7888	3	
Cıtv	or town	n, state, and ZIP o	ode						C If exemption	application is pending	a, check here ▶ □
		LLE, NC 27284	ouc						· '	rganizations, check he	· <u>'</u>
									_		• •
		ype of organiza)(3) exempt priv		oundation private foundatio	n		rganizations meeting e and attach computa	
		<pre> <et <="" all="" of="" pre="" value=""></et></pre>			ounting method		Cash Accr			undation status was t	
of	year (f	from Part II, col		_	Other (specify)	_				n 507(b)(1)(A), chec	
		\$ 6,135,213		(Part I	, column (d) mus	t be	on cash basıs.)			ation is in a 60-month n 507(b)(1)(B), chec	
Pa	rt I	total of amou	of Revenue and the state of the	c), and (d	d) may not	((a) Revenue and expenses per books	1 (d)	Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gi	fts, grants, etc , rece	eived (atta	ach schedule)		181,696				
	2	Check 🟲 🦵 ıf t	he foundation is not	t required	to attach Sch B						
	3	Interest on sa	avings and temp	orary ca	sh investments						
	4	Dividends and	d interest from se	ecurities	5		80,070		80,070		
	5a						1,900		1,900		
	Ь		ome or (loss)								
Φ.	6a	Net gain or (lo	oss) from sale of	assets	not on line 10		-107,102				
Revenue	Ь	•	for all assets on line								
	7		net income (from			-					
	8		m capital gain . fications			-					
	9		returns and allowand	1	488						
	10a b		goods sold .	-	424	_					
			r (loss) (attach s			+_	64			64	
	11		(attach schedul			囱			4,900	8,870	
	12		es 1 through 11			\vdash	170,398		86,870	8,934	
	13	Compensatio	n of officers, dire	ctors, tr	ustees, etc						
	14	Other employ	ee salaries and	wages			172,566			172,566	172,566
Expenses	15	Pension plans	s, employee bene	fits .			31,673			31,673	31,673
ě	16a	Legal fees (at	tach schedule) .								
Ë	ь	Accounting fe	es (attach sche	dule).		192	8,024			8,024	8,024
	С	Other profess	ional fees (attac	hsched	ule)	192	482			482	482
and Administrative	17	Interest .					22,744		22,744		
I St	18	•	hedule) (see page 1		•	<u>_</u>					
Ħ	19	Depreciation	(attach schedule	e) and de	epletion	193	23,701		7,638		
Αđ	20					-	10,190			10,190	10,190
P.	21	•	rences, and meet	_		_	14,688			14,688	14,688
	22		oublications			-	154 170		6.260	126.262	124.022
Operating	23	•	es (attach sched	-		195	154,179		6,260	136,363	134,923
era	24	-	ng and administr		-		420 247		26.642	272.006	272 546
Ö	25		through 23			\vdash	438,247		36,642	373,986	372,546
	25		, gıfts, grants pa			-	438,247		36,642	373,986	372,546
	26 27	·	and disbursemen	its. Add li	nes 24 and 25		430,247		50,042	373,380	372,340
	a		enue over expen	ses and	disbursements		-267,849				
	Ь		nt income (if neg				,		50,228		
	c		income (if negat	•	•						

Da	rt II	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year		Er	nd of	year
•		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Boo		-	(c) Fair Market Value
	1	Cash—non-interest-bearing	790,252			300	300
	2	Savings and temporary cash investments					
	3	Accounts receivable 22,928					
		Less allowance for doubtful accounts 🟲			22,	928	22,928
	4	Pledges receivable 🟲					
		Less allowance for doubtful accounts 🟲					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see page 15 of the					
		ınstructions)					
	7	Other notes and loans receivable (attach schedule) 🟲					
		Lance allowers for the bolt of a second .					
<u>د</u>		Less allowance for doubtful accounts -	1 011		- 1	011	1.011
25 et 5		Inventories for sale or use	1,811		1,	811	1,811
ጚ│	9	Prepaid expenses and deferred charges	1,440			_	
		Investments—U S and state government obligations (attach schedule)		.=-		_	
		Investments—corporate stock (attach schedule)	3,182,762	* 2	2,321,	352	2,515,446
		Investments—corporate bonds (attach schedule)				_	
		Investments—land, buildings, and equipment basis ▶ 402,764		_			
		Less accumulated depreciation (attach schedule) - 24,188	386,215	% ■	378,	576	325,000
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)		6	79,	040	79,040
	14	Land, buildings, and equipment basis 🟲4,401,700					
		Less accumulated depreciation (attach schedule) 🟲 35,668	2,886,562	~	4,366,	032	3,190,688
	15	Other assets (describe 🟲)					
	16	Total assets (to be completed by all filers—see the					
		ınstructions Also, see page 1, item I)	7,249,042		7,170,	039	6,135,213
	17	Accounts payable and accrued expenses	7,382		13,	742	
	18	Grants payable					
å l	19	Deferred revenue					
_	20	Loans from officers, directors, trustees, and other disqualified persons					
Liabilit	21	Mortgages and other notes payable (attach schedule)	1,400,000	%	1,500,	000	
<u> </u>	22	Other liabilities (describe 🟲)	950	%	13,	179	
	23	Total liabilities (add lines 17 through 22)	1,408,332		1,526,	921	
		Foundations that follow SFAS 117, check here 🕨 🔽					
۰		and complete lines 24 through 26 and lines 30 and 31.					
원	24	Unrestricted	5,523,801		5,343,	118	
등	25	Temporarily restricted	16,909				
ထူ	26	Permanently restricted	300,000		300,	000	
or Fund Balances		Foundations that do not follow SFAS 117, check here 🕨 🦵]	
∄∣		and complete lines 27 through 31.					
5	27	Capital stock, trust principal, or current funds					
	28	Paid-in or capital surplus, or land, bldg , and equipment fund					
Assets	29	Retained earnings, accumulated income, endowment, or other funds					
ď	30	Total net assets or fund balances (see page 17 of the					
Š		ınstructions)	5,840,710		5,643,	118	
_	31	Total liabilities and net assets/fund balances (see page 17 of					
		the instructions)	7,249,042		7,170,	039	
Pa	rt II	Analysis of Changes in Net Assets or Fund Balances					
		· · · · · · · · · · · · · · · · · · ·	(a) lung 30 (
1		Total net assets or fund balances at beginning of year—Part II, column with end-of-year figure reported on prior year's return)	(a), line 30 (must a	-	1		5,840,710
2		Enter amount from Part I, line 27a			2		-267,849
		·		 93	3		74,140
3 ⁄1		Other increases not included in line 2 (itemize) Add lines 1, 2, and 3			4		5,647,001
4 5		Decreases not included in line 2 (itemize)		· · · · · · · · · · · · · · · · · · ·	5		3,883
5 6		Total net assets or fund balances at end of year (line 4 minus line 5)—P					5,643,118

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Part :	Capital Gains an	nd Losses for Tax on Inve	stment Income		.1	_
		e kınd(s) of property sold (e g , re se, or common stock, 200 shs M		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	PUBLICALLY TRADED	SECURITIES		Р	2010-01-01	2010-12-31
	PUBLICALLY TRADED	SECURITIES		Р	2009-01-01	2010-12-31
	CAPITAL GAINS DIVI	DENDS, LONG-TERM		Р	2008-01-01	2010-12-31
d						
e						_
	e) Gross sales price	(f) Depreciation allower	1	 t or other basis opense of sale		or (loss)) minus (g)
a	3,452	, , ,	F133 31	3,428,02	+	24,588
b	1,362			1,508,58	+	-145,619
	· · · · · · · · · · · · · · · · · · ·	,929		, ,		13,929
d		7				
			+			
e						
Co	mplete only for assets sho	owing gain in column (h) and owne	·			(h) gaın mınus less than -0-) or
(i)	FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (1) col (j), ıf any		om col (h))
		43 01 12/31/03	0,01	(J), II dilly		24,588
b						-145,619
						13,929
d						
e						
2	Capital gain net income	or (net capital loss)	If gain, also enter If (loss), enter -0-		2	-107,102
3	Net short-term capital o	- gain or (loss) as defined in section	ns 1222(5) and (6)		<u> </u>
•		rt I, line 8, column (c) (see pages			1	
	If (loss), enter -0 - in Pa	, , , , , , ,	13 and 17 or the r	instructions)	} _	24 500
		·			J 3	24,588
Part		der Section 4940(e) for R				
(For opt	ional use by domestic priv	vate foundations subject to the se	ection 4940(a) tax	on net investment	ıncome)	
Ifsection	on 4940(d)(2) applies, lea	ave this part blank				
					10	
		section 4942 tax on the distributa qualify under section 4940(e) Do			eriod/	┌ Yes ┌ No
			•			
1 En	ter the appropriate amoun	t in each column for each year, se	ee page 18 of the 11	nstructions before	making any entries	
Paga	(a) period years Calendar	(b)	(c)		(d) Distributioi	
	or tax year beginning in)	Adjusted qualifying distributions	Net value of noncha	ritable-use assets	(col (b) divided	
	2009	1,356,243		3,430,765		0 395318
	2008	785,046		3,897,935		0 201400
	2007	1,109,524		4,430,460		0 250431
	2006	290,137		4,033,528		0 071931
	2005	83,468		3,547,787		0 023527
2	Total of line 1 column ((d)			2	0 942607
3	,	tio for the 5-year base period—div		<u> </u>		0 3 12007
3	=	: foundation has been in existence			3	0 188521
	·		·			
4	Enter the net value of n	oncharıtable-use assets for 2010	from Part X, line 5	5	4	3,314,938
5	Multiply line 4 by line 3				5	624,935
				-	3	024,935
6	Enter 1% of net investn	nent income (1% of Part I, line 27	7 h \		6	502
•	Lines, 170 of her hivestil		-,		-	302
7	Add lines 5 and 6				7	625,437
•				· · · · ·	-	023,737
8	Enter qualifying distribu	itions from Part XII, line 4			8	1,848,077
		reater than line 7, check the box				
	the Part VI instructions					

Form	990-PF (2010)			age 4			
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the in	structio	ns)				
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1						
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			502			
	here 🟲 🔽 and enter 1% of Part I, line 27b						
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)						
2	2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)						
3	3 Add lines 1 and 2						
4	4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)						
5	5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0 5						
6	C redits/P ayments						
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 514						
b	Exempt foreign organizations—tax withheld at source 6b						
c	Tax paid with application for extension of time to file (Form 8868)						
d	Backup withholding erroneously withheld 6d						
7	Total credits and payments Add lines 6a through 6d			514			
8	Enter any penalty for underpayment of estimated tax. Check here 🔽 If Form 2220 is attached. 8						
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9						
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10			12			
11	Enter the amount of line 10 to be Credited to 2011 estimated tax 12 Refunded 11						
Par	t VIII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No			
	ıt participate or intervene in any political campaign?	. 1a		No			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of						
	the instructions for definition)?	. 1b		No			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials						
	published or distributed by the foundation in connection with the activities.						
С	c Did the foundation file Form 1120-POL for this year?						
d	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year						
	(1) On the foundation 🕨 \$ (2) On foundation managers 🕨 \$						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed						
_	on foundation managers 🕨 \$			l			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	. 2		No			
_	If "Yes," attach a detailed description of the activities.						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles						
4-	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	. 3		No			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	-	NI.			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	<u> </u>		No			
6	If "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
0	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions						
	that conflict with the state law remain in the governing instrument?	. 6	Yes				
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Yes				
, 8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	<u> </u>	 	<u> </u>			
	Instructions) ►NC						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney						
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)						
	or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on						
	page 27)? If "Yes," complete Part XIV	. 9		No			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		No			

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►PAULJCIENERBOTANICALGARDEN ORG			
14		\ 006	7000	
14	The books are in care of ►DAVID B CIENER Telephone no ►(336)	996-	7888	
	Located at ► 205 S MAIN STRET KERNERSVILLE NC ZIP+4 ► 27284			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			>
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over			
	a bank, securities, or other financial account in a foreign country?	16		
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the name of the foreign country			
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes Vo			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days) Yes V No			
Ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	46		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		
_	Organizations relying on a current notice regarding disaster assistance check here			
С	that were not corrected before the first day of the tax year beginning in 2010?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	<u> </u>		
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d			
-	and 6e, Part XIII) for tax year(s) beginning before 2010?			
	If "Yes," list the years 🕨 20			
ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see page 20 of the instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	> 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section $4943(c)(7)$) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	ıf the foundation had excess business holdings in 2010.).	3Ь		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b		No

Pa	rt VIII-B Statement	s Regardii	ng Activities for	Wh	ich Form 4720	May	Be Required (cont	inue	d)		
5a	During the year did the fo					•					
	(1) Carry on propaganda,	or otherwise	attempt to influence	e leg	ıslatıon (section 49	45(e)))?	√ No			
	(2) Influence the outcom	e of any spec	:ıfıc publıc electıon (see	section 4955), or to	carr	у				
	on, directly or indirec							√ No			
	(3) Provide a grant to an		-				┌ Yes ि	√ No			
	(4) Provide a grant to an					s c rıb					
	· ·	-			· -		tions) Yes	- No			
	(5) Provide for any purpo					Jirac		110			
								- No			
L	If any answer is "Yes" to										
ь									FL		
	Regulations section 53 4						_	_	5b		\vdash
	Organizations relying on										
С	If the answer is "Yes" to o							_			
	tax because it maintained					•	Yes	No			
	If "Yes," attach the statem										
6a	Did the foundation, during		•								
	premiums on a personal b										
Ь	Did the foundation, during	, the year, pa	y premiums, directly	yorı	ndırectly, on a perso	nal b	penefit contract?		6b		No
	If "Yes" to 6b, file Form 88	70.									
7a	At any time during the tax	x year, was t	he foundation a party	y to a	a prohibited tax shel	ter tr	ansaction? TYes [_ No			
b	If yes, did the foundation	receive any	proceeds or have an	y net	t income attributable	e to t	he transaction?		7b		
	Information	About Of	ficers, Directors	s, Tr	rustees, Founda	tior	n Managers, Highly	Paid	Emp	loye	es,
	and Contrac										
1	List all officers, directors,							ns).			
	(a) Name and address	(B)	Title, and average hours per week		c) Compensation If not paid, enter		(d) Contributions to nployee benefit plans		Expens		
	(a) mame and address	de	evoted to position	`-	-0-)		deferred compensation	ot	her all	owanc	es
See	Additional Data Table										
2	Compensation of five high If none, enter "NONE."	est-paid emp	oloyees (ot her t han	t hose	e included on line 1–	-see	page 23 of the instruction	ons).			
	II liolle, eliter NONE.						(d) Contributions to	1			
(a)) Name and address of eacl	h employee	(b) Title, and aver hours per week		(-) (_	employee benefit	(e) E	Expens	e acc	ount,
	paid more than \$50,0	00	devoted to positi		(c) Compensation	'''	plans and deferred	ot	herall	owanc	es
			'				compensation				
FTO	DD LASSEIGNE 🕏		EXEC DIR 40 00		63	,276	1,869				
	BUNKER HILL ROAD		40 00								
COL	FAX,NC 27235							<u> </u>			
										_	
-			1								
								1			
			-								
_ -	dan and a second		<u> </u>				<u> </u>	 			
ıota	al number of other employee	es paid over :	\$5U,UUU					1			

Part VIII Information About Officers, Directors, Tr and Contractors (continued)	ustees, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional servi	ices (see page 23 of the instructions). If none, e	enter "NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional servi	ces	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include organizations and other beneficiaries served, conferences convened, research papers		Expenses
1		
		1
		1
2		
		1
		1
3		-
4		
Part IX-B Summary of Program-Related Investmen	its (see page 24 of the instructions)	
Describe the two largest program-related investments made by the foundation de	uring the tax year on lines 1 and 2	A mount
1 N/A		
2		
]
		1
All other program-related investments See page 24 of the instruc	tions	
3		
		1
		1
		1

Form	990-PF (2010)		Page 8
Pa	Minimum Investment Return (All domestic foundations must complete this part. For see page 24 of the instructions.)	reign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	2,825,721
b	A verage of monthly cash balances	1b	71,594
c	Fair market value of all other assets (see page 24 of the instructions)	1c	468,104
d	Total (add lines 1a, b, and c)	1d	3,365,419
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	3,365,419
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25		
	of the instructions)	4	50,481
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,314,938
6	Minimum investment return. Enter 5% of line 5	6	165,747
Da	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) pri	vate operating
Pal	foundations and certain foreign organizations check here 🕨 🗀 and do not complete t	his pa	art.)
1	Minimum investment return from Part X, line 6	1	165,747
2a	Tax on investment income for 2010 from Part VI, line 5 2a 502		
b	Income tax for 2010 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	502
3	Distributable amount before adjustments Subtract line 2c from line 1	3	165,245
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	165,245
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	165,245
Par	t XIII Qualifying Distributions (see page 25 of the instructions)		·
1	A mounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	372,546
b	Program-related investments—total from Part IX-B	1b	
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	1,475,531
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
ь	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,848,077
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_,,_
	income Enter 1% of Part I, line 27b (see page 26 of the instructions).	5	502
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,847,575
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whetl		
	the section 4940(e) reduction of tax in those years		a ta amada a na quaminos tor

<u> </u>	Undistributed Income (see page	20 of the mstruct	ions)		
		(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1	Distributable amount for 2010 from Part XI, line 7				165,245
2	Undistributed income, if any, as of the end of 2010				
	Enter amount for 2009 only				
	Total for prior years 20, 20, 20				
	Excess distributions carryover, if any, to 2010				
	From 2005				
	From 2006 93,410				
	From 2007 900,955				
	From 2008				
	From 2009 1,186,557				
	Total of lines 3a through e	2,773,933			
	Qualifying distributions for 2010 from Part				
	XII, line 4 🕨 \$ 1,848,077				
а	Applied to 2009, but not more than line 2a				
	Applied to undistributed income of prior years				
_	(Election required—see page 26 of the instructions)				
c	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions)				
d	Applied to 2010 distributable amount				165,245
е	Remaining amount distributed out of corpus	1,682,832			
5	Excess distributions carryover applied to 2010				
	(If an amount appears in column (d), the				
	same amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:	4 456 765			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,456,765			
Ь	Prior years' undistributed income Subtract line 4b from line 2b				
c	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
а	Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions				
e	Undistributed income for 2009 Subtract line				
_	4a from line 2a Taxable amount—see page 27				
	of the instructions				
f	Undistributed income for 2010 Subtract				
	lines 4d and 5 from line 1. This amount must				0
_	be distributed in 2011				<u> </u>
,	A mounts treated as distributions out of corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see page 27				
	of the instructions)				
8	Excess distributions carryover from 2005 not				
	applied on line 5 or line 7 (see page 27 of the				
_	instructions)				+
9	Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	4,456,765			
10	Analysis of line 9	, ,,==			+
	Excess from 2006 93,410				
	Excess from 2007 900,955				
	Excess from 2008				
	Excess from 2009 1,186,557				
	Excess from 2010 1,682,832				
	1		I .		

1a	If the foundation has received a ruling or d foundation, and the ruling is effective for 2		•	•		
b	Check box to indicate whether the organiz	ation is a private o	perating foundation	n described in secti	on 「 4942(j)(3) o	or — 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year (a) 2010	(b) 2009	Prior 3 years (c) 2008	(d) 2007	(e) Total
	Investment return from Part X for each year listed					
	85% of line 2a					
	Qualifying distributions from Part XII, line 4 for each year listed					
	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Q ualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c	"Support" alternative test—enter		1	1		
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Pa	rt XV Supplementary Information assets at any time during				on had \$5,000	or more in
1	Information Regarding Foundation Manage	ers:				
а	List any managers of the foundation who habefore the close of any tax year (but only i					dation
b	List any managers of the foundation who or ownership of a partnership or other entity)		•		lly large portion of t	he
2	Information Regarding Contribution, Gran	t, Gift, Loan, Scho	larship, etc., Progra	ıms:		
	Check here F if the foundation only ma unsolicited requests for funds. If the found under other conditions, complete items 2 a	atıon makes gıfts,	to preselected char grants, etc (see p	ritable organizations age 28 of the instru	s and does not acce actions) to individual	pt Is or organizations
а	The name, address, and telephone numbe	r of the person to v	whom applications s	should be addressed	d	
b	The form in which applications should be s	submitted and info	rmation and materi	als they should incl	ude	
c	Any submission deadlines					
d	Any restrictions or limitations on awards, factors	such as by geogra	aphical areas, chari	table fields, kinds o	f institutions, or oth	er

3 Grants and Contributions Paid	During the Year or App	proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
Total		<u></u>		
Total		1	 	

	-A Analysis of Income-Produc	ing Activitie	:s			r age 🕰
	s amounts unless otherwise indicated		usiness income	Excluded by section	1 512, 513, or 514	(e)
1 Program	n service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exemp function income (See page 28 of the instructions)
а МЕМВЕ	ERSHIPS					8,87
	and contracts from government agencies					
2 Membe	rship dues and assessments					
3 Interest	on savings and temporary cash investments			14		
	nds and interest from securities			14	80,070	
5 Netren	ital income or (loss) from real estate					
	financed property					
	ebt-financed property			16	-19,195	
	al income or (loss) from personal property			25	4.000	
	nvestment income			35 14	4,900	-107,10
	(loss) from sales of assets other than inventory			14		-107,10
	ome or (loss) from special events profit or (loss) from sales of inventory	453220	64			
	evenue a	133223				
	evenue u					
e						
	al Add columns (b), (d), and (e).		64		65,775	-98,23
	Add line 12, columns (b), (d), and (e)			1	l3	-32,393
	orksheet in line 13 instructions on page 2					· .
Part XVI	B Relationship of Activities to					
Line No.	Explain below how each activity for wh					
₹	the accomplishment of the organization page 28 of the instructions)	ns exempt purp	oses (other than b	y providing tunds t	or such purposes)	(See
1A	PROMOTE KNOWLEDGE OF PLANTS A	ND GARDENS				
1B	PROMOTE KNOWLEDGE OF PLANTS A					
	, Karrara Kwa Walabala a Frankia K					

	90-PF (2 XVII		egarding '	Transfers To and Tran	sac	tions and Relations	hins With		Pa	ge 13
		Noncharitable								
1 Did t	the organi	zation directly or indirectly	y engage in any	of the following with any other org	janız	ation described in section			Yes	No
501(c) of the	Code (other than section	501(c)(3) orga	nizations) or in section 527, relating	to p	olitical organizations?				
a Tra	nsfers fr	om the reporting four	ndation to a	noncharitable exempt organiz	atio	n of				
(1)	Cash.							1a(1)		No
(2)	Othera	assets						1a(2)		No
b Oth	er trans	actions								
(1)	Sales	fassets to a noncha	rıtable exem	pt organization	•			1b(1)		No
(2)	Purcha	ses of assets from a	noncharitab	le exempt organization				1b(2)		No
(3) Rental of facilities, equipment, or other assets										No
(4)	Reimbu	ırsement arrangemen	nts					1b(4)		No
(5)	Loans	or loan guarantees.						1b(5)		No
(6)	Perform	ance of services or n	nembership	or fundraising solicitations.				1b(6)		No
c Sha	ring of fa	acılıtıes, equipment,	maılıng lısts	, other assets, or paid employ	/ees			1 c		No
of tl	he goods	s, other assets, or se	rvices given	emplete the following schedule by the reporting foundation how in column (d) the value o	Ifth	e foundation received les	s than fair marke	et value		
(a) Line	No	(b) Amount involved	(c) Name of	noncharitable exempt organization	\perp	(d) Description of transfers,	ransactions, and sha	ring arra	ngemer	nts
					-					
					+					
					+					
					\vdash					
					_					
-					\vdash					
					+					
					+					
					\vdash					
des	crıbed ır		ne Code (oth schedule	ed with, or related to, one or er than section 501(c)(3)) or (b) Type of organiza	'ın s	section 527?		.厂Y€ onship	∍s F	No
	the be based	st of my knowledge a	and belief, it	at I have examined this retur is true, correct, and complete rer has any knowledge						
	Sig	gnature of officer or t	rustee			Date	Title			
e e						Date	Check if self-	PTIN		
Sign Here	કુ મું જે સ્વ	Preparer's KEVI Signature	IN P CHRES	TMAN		2011-08-10	employed ►			
v)	Paid Preparer's Use Only	Firm's name ▶		KEVIN P CHRESTMAN CP	A P	A	Firm's EIN ►			
	<u> </u>			3805 FORRESTGATE DR			Phone no (336	1) 765-	5123	
		Firm's address ▶		WINSTON SALEM, NC 27	10:	32930	(330	.,,,	J 1 2 J	

efile GRAPHIC print	- DO NOT PROCESS	As Filed Data -		DLN: 93491223004021							
Schedule B		Schedul	e of Contributors		OMB No 1545-0047						
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		► Attach to Fo	orm 990, 990-EZ, or 990-PF.		2010						
Name of organization THE PAUL J CIENER BOTANI	CAL GADDEN			Employer ide	entification number						
——————————————————————————————————————	CAL GARDEN			56-210554	4						
Organization type (ch	neck one)										
Filers of:	Section:										
Form 990 or 990-EZ	「 501(c)() (enter number) organization									
	~ 4947(a)(1)	4947(a)(1) nonexempt charitable trust not treated as a private foundation									
	☐ 527 politica	527 political organization									
Form 990-PF	▽ 501(c)(3) €	501(c)(3) exempt private foundation									
	~ 4947(a)(1)	4947(a)(1) nonexempt charitable trust treated as a private foundation									
	Г 501(c)(3) t	1(c)(3) taxable private foundation									
property) from a	tion filing Form 990, 99 any one contributor Co	·	received, during the year, \$5,000 or more	(in money or							
Special Rules											
under sections	509(a)(1) and 170(b)(1)(A)(vi), and receive	-EZ, that met the 33 ¹ /3% support test of the ed from any one contributor, during the ye 190, Part VIII, line 1h, or (II) Form 990-EZ, lir	ar, a contributi							
during the year,	aggregate contribution	ns of more than \$1,0	n 990, or 990-EZ, that received from any o 00 for use <i>exclusively</i> for religious, charit on of cruelty to children or animals Compl	able,							
during the year, not aggregate to the year for an applies to this o	contributions for use of more than \$1,000 if the exclusively religious, conganization because it	exclusively for religionships box is checked, of haritable, etc., purporreceived nonexclusions.	n 990, or 990-EZ, that received from any obus, charitable, etc., purposes, but these center here the total contributions that were ose. Do not complete any of the parts unlevely religious, charitable, etc., contribution	contributions di e received duri ss the Gener a s of \$5,000 or	id ing al Rule						
990-EZ, or 990-PF), but	ıt must answer "No"	on Part IV, line 2 of it	and/or the Special Rules does not file Sch is Form 990, or check the box on lin H of it not meet the filing requirements of Schedu	s							

Name of organization
THE PAUL J CIENER BOTANICAL GARDEN

Employer identification number

56-2105544

Part I	Contributors (see Instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	PAUL J CIENER CHARITABLE LEAD TRUST 547 S BUNKER HILL ROAD COLFAX, NC 27235	\$	Person Payroll Noncash Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	SUNTRUST BANK 2410 COUNTRY CLUB ROAD WINSTON SALEM, NC 27104	\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	GLENN BOYD 704 GARNETT STREET HENDERSON, NC 27028	\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_4	FIEDELITY BANK PO BOX 339 KERNERSVILLE, NC 27284	\$ 8,500	Person P Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	BBT POBOX 219 KERNERSVILLE, NC 27285	\$\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6	WYATT DELORES LEFEVRE 4536 KERNERSVILLE ROAD KERNERSVILLE, NC 27284	\$\$	Person

Name of organization
THE PAUL J CIENER BOTANICAL GARDEN

Employer identification number

56-2105544

Part II	Noncash Property (see Instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
		-	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		_	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		- - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		- - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		- - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		- - - - - - -	

Name of organization THE PAUL J CIENER BOTANICAL GARDEN Employer identification number

56-2105544

contributions of \$1,000 or less for the year (b)	(Enter this information once See insti	ructions) 🟲 \$								
Purpose of gift	(c) Use of gift	(d) Description of how gift is held								
Transferee's name, address, and	(e) Transfer of gift ZIP + 4 Relatio	nship of transferor to transferee								
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held								
(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee										
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held								
(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee										
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held								
(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee										
	(b) Purpose of gift Transferee's name, address, and (b) Purpose of gift Transferee's name, address, and (b) Purpose of gift	Transferee's name, address, and ZIP + 4 (b) Purpose of gift Transferee's name, address, and ZIP + 4 (c) Use of gift Transfer of gift Transfer of gift (e) Transfer of gift Relatio (c) Use of gift Transfer of gift Relatio (e) Transfer of gift Relatio (b) Purpose of gift Transferee's name, address, and ZIP + 4 (e) Transfer of gift Relatio (b) Purpose of gift (c) Use of gift (c) Use of gift Transfer of gift Relatio								

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Form 4562

Depreciation and Amortization

(Including Information on Listed Property)

DLN: 93491223004021

OMB No 1545-0172

Department of the Treasury ► See separate instructions. Attach to your tax return. Sequence No 67 Internal Revenue Service (99) Name(s) shown on return Business or activity to which this form relates Identifying number THE PAUL J CIENER BOTANICAL GARDEN INVENTORY SALES 56-2105544 **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 1 500,000 2 Total cost of section 179 property placed in service (see instructions) . . . 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 2,000,000 4 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (b) Cost (business use 6 (a) Description of property (c) Elected cost only) 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 **10** Carryover of disallowed deduction from line 13 of your 2009 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 13 Carryover of disallowed deduction to 2011 Add lines 9 and 10, less line 12 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 depreciation allowance for qualified 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) 13,843 MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2010 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 Section B—Assets Placed in Service During 2010 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (a)Depreciation (e) Convention vear placed in (business/investment (f) Method deduction property period service use only—see instructions) 19a 3-year property **b** 5-year property c 7 - year property d 10-year property e 15-year property f 20-year property 27 5 yrs ММ S/L h Residential rental property 27 5 yrs ММ S/L ΜМ i Nonresidential real 2010-12 2,076,834 39 yrs S/L 2,219 property MMS/L 39 vrs Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System 20a Class life **b** 12-year 12 yrs S/L **c** 40-year 40 yrs ММ 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 22 16,062 and on the appropriate lines of your return Partnerships and S corporations—see instructions 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Part V
Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depre	ciation a	nd Other I	nforma	tion (C	Caution	: See	the i	nstruct	tions fo	or limi	its fo	or pa	sseng	er au	tomot	iles.)
24a Do you have evider	nce to support	the business/inv	estment u	ise claime	d? ┌ Yes	Гпо		24	lb If "Ye	s," is th	e ev i	dence	written?	Гүе	sГN)
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d Cost or bas	rother	(busines	(e) r deprecia ss/investr se only)		(f) Recovery period	(c Meth Conve	nod/	С	(h) Depreck deduc	ation/		(i) Electe section 1 cost	179
25 Special depreciation allo 50% in a qualified busi			rty placed	ın service (during the	tax year	and u	ised more	e than	25						
26 Property used more	e than 50%		business	use												
		%												+-		
		%														
27 Property used 50%	orless in a		ıness us	е					la u							
		%							S/L - S/L -					-		
		%							S/L -							
28 Add amounts in c	olumn (h), lır	nes 25 throug	h 27 En	ter here a	and on lı	ne 21, _l	page	1 .	28							
29 Add amounts in c	olumn (ı), lın	e 26 Enterhe	ere and o	n line 7,	page 1							29				
				_Infor												
Complete this section If you provided vehicles to														e vehic	les	
30 Total business/in	vestment mi	les driven dur	una the	_	a))		(c)		(d)	-	-	≘)		f)
year (do not inclu			•	Vehi	ıcle 1	Vehi	cle 2	V e	hicle 3		ehic	le 4	Vehi	cle 5	Vehi	cle 6
31 Total commuting	milas drivan	during the ve	25							+						
32 Total other person																
33 Total miles driver	•															
through 32																
34 Was the vehicle a	vaılable for p	ersonal use		Yes	No	Yes	No	Yes	No	Ye	es	No	Yes	No	Yes	No
during off-duty ho	urs? .															
35 Was the vehicle u		by a more th	nan 5%													
owner or related p 36 Is another vehicle		r porconal uc	• •		1						\dashv					+
		stions for		vore W	ho Dro	vida \	/ohi	clas f	or He	hy 7	Γha	ir En	anlov			
Answer these questio 5% owners or related	ns to determ	ine if you mee	et an exc												not mo	re thai
37 Do you maintain a employees?		y statement											our •	Y	es	No
30 D											I			_		
38 Do you maintain a employees? See t												, our				
39 Do you treat all us	se of vehicle:	s by employee	es as per	sonal us	e? .											
40 Do you provide movehicles, and reta		•	•	oyees, o	btaın ınfo	ormatio •	n froi	m your e	employe	ees ab	out t	he us	e of the	3		
41 Do you meet the r	equirements	concerning q	ualified a	automobi	ıle demoi	nstratio	n us	e? (See	ınstruc	tions)) .					
Note: If your ansv	ver to 37, 38	, 39, 40, or 4	1 is "Yes	s," do no	t comple	te Sect	ion E	for the	covere	d vehi	cles					
	rtization	, , ,		,	•											
(a)	(b)		(c A mort a mo	ızable	able ((d) Code section		(e) A mortizatio period or percentage		A mort			(f) Ization for s year		
42 A mortization of co	sts that beg		ur 2010	tax year	(see ins	truction	ns)									
				•	-		-									
43 A mortization of co	sts that beg	an before you	ır 2010 t	ax year		•				4	3					
44 Total. Add amoun	ts ın column	(f) See the in	nstructio	ns for wh	ere to re	port				4	4					

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Depreciation and Amortization

(Including Information on Listed Property)

DLN: 93491223004021

OMB No 1545-0172

Form 4562

Department of the Treasury ► See separate instructions. Attach to your tax return. Sequence No 67 Internal Revenue Service (99) Name(s) shown on return Business or activity to which this form relates Identifying number THE PAUL J CIENER BOTANICAL GARDEN REAL ESTATE RENTAL 56-2105544 **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 1 500,000 2 Total cost of section 179 property placed in service (see instructions) . . . 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 2,000,000 4 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (b) Cost (business use 6 (a) Description of property (c) Elected cost only) 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 10 Carryover of disallowed deduction from line 13 of your 2009 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 13 Carryover of disallowed deduction to 2011 Add lines 9 and 10, less line 12 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 depreciation allowance for qualified 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) 7.639 MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2010 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 Section B—Assets Placed in Service During 2010 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (a)Depreciation (e) Convention vear placed in (business/investment (f) Method deduction property period service use only—see instructions) 19a 3-year property **b** 5-year property c 7 - year property d 10-year property e 15-year property f 20-year property 27 5 yrs мм S/L h Residential rental property 27 5 yrs ММ S/L ΜМ i Nonresidential real 39 yrs S/L property MMS/L Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System 20a Class life **b** 12-year 12 yrs **c** 40-year ММ 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 22 7,639 and on the appropriate lines of your return Partnerships and S corporations—see instructions 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Part V
Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depre	ciation a	nd Other I	nforma	tion (C	Caution	: See	the i	nstruct	tions fo	or limi	its fo	or pa	sseng	er au	tomot	iles.)
24a Do you have evider	nce to support	the business/inv	estment u	ise claime	d? ┌ Yes	Гпо		24	lb If "Ye	s," is th	e ev i	dence	written?	Гүе	sГN)
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d Cost or bas	rother	(busines	(e) r deprecia ss/investr se only)		(f) Recovery period	(c Meth Conve	nod/	С	(h) Depreck deduc	ation/		(i) Electe section 1 cost	179
25 Special depreciation allo 50% in a qualified busi			rty placed	ın service (during the	tax year	and u	ised more	e than	25						
26 Property used more	e than 50%		business	use												
		%												+-		
		%														
27 Property used 50%	orless in a		ıness us	е					la u							
		%							S/L - S/L -					-		
		%							S/L -							
28 Add amounts in c	olumn (h), lır	nes 25 throug	h 27 En	ter here a	and on lı	ne 21, _l	page	1 .	28							
29 Add amounts in c	olumn (ı), lın	e 26 Enterhe	ere and o	n line 7,	page 1							29				
				_Infor												
Complete this section If you provided vehicles to														e vehic	les	
30 Total business/in	vestment mi	les driven dur	una the	_	a))		(c)		(d)	-	-	≘)		f)
year (do not inclu			•	Vehi	ıcle 1	Vehi	cle 2	V e	hicle 3		ehic	le 4	Vehi	cle 5	Vehi	cle 6
31 Total commuting	milas drivan	during the ve	25							+						
32 Total other person																
33 Total miles driver	•															
through 32																
34 Was the vehicle a	vaılable for p	ersonal use		Yes	No	Yes	No	Yes	No	Ye	es	No	Yes	No	Yes	No
during off-duty ho	urs? .															
35 Was the vehicle u		by a more the	nan 5%													
owner or related p 36 Is another vehicle		r porconal uc	• •		1						\dashv			 		+
		stions for		vore W	ho Dro	vida \	/ohi	clas f	or He	hy 7	Γha	ir En	anlov			
Answer these questio 5% owners or related	ns to determ	ine if you mee	et an exc												not mo	re thai
37 Do you maintain a employees?		y statement											our •	Y	es	No
30 D											I			_		
38 Do you maintain a employees? See t												, our				
39 Do you treat all us	se of vehicle:	s by employee	es as per	sonal us	e? .											
40 Do you provide movehicles, and reta		•	•	oyees, o	btaın ınfo	ormatio •	n froi	m your e	employe	ees ab	out t	he us	e of the	3		
41 Do you meet the r	equirements	concerning q	ualified a	automobi	ıle demoi	nstratio	n us	e? (See	ınstruc	tions)) .					
Note: If your ansv	ver to 37, 38	, 39, 40, or 4	1 is "Yes	s," do no	t comple	te Sect	ion E	for the	covere	d vehi	cles					
	rtization	, , ,		,	•											
(a)	(b)		(c A mort a mo	ızable	able ((d) Code section		(e) A mortizatio period or percentage		A mort			(f) Ization for s year		
42 A mortization of co	sts that beg		ur 2010	tax year	(see ins	truction	ns)									
				•	-		-									
43 A mortization of co	sts that beg	an before you	ır 2010 t	ax year		•				4	3					
44 Total. Add amoun	ts ın column	(f) See the in	nstructio	ns for wh	ere to re	port				4	4					

TY 2010 Accounting Fees Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING & LEGAL FEES	8,024		8,024	8,024

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TY 2010 Compensation Explanation

Name: THE PAUL J CIENER BOTANICAL GARDEN

Person Name	Explanation					
GREGORY M CIENER						
DAVID B CIENER						
JOHN G WOLFE III						
MICHAEL K HAYES						
JOE PINNIX						

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DLN: 93491223004021

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2010 Depreciation Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
LAND, 225 S MAIN	2007-10-22	250,000							
HOUSE, 225 S MAIN STREET	2007-10-22	152,764	16,549	S/L	20 0000	7,639	7,639		
DEPR AND AMORT - ALLOWABLE						16,061			

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TY 2010 Employee Compensation Explanation

Name: THE PAUL J CIENER BOTANICAL GARDEN

Employee	Explanation
FTODD LASSEIGNE	

TY 2010 Investments Corporate Stock Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN

Name of Stock	End of Year Book Value	End of Year Fair Market Value
SUNTRUST INVESTMENT	2,321,352	2,515,446

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TY 2010 Investments - Land Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN

Category/ Item	Cost/Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
225 S. MAIN STREET - HOUSE	152,764	24,188	128,576	325,000
LAND, 225 S. MAIN STREET	250,000		250,000	

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TY 2010 Investments - Other Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value	
INSURANCE CASH VALUES	AT COST	79,040	79,040	

TY 2010 Land, Etc. Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
BUILDINGS	2,076,834	35,668	2,041,166	2,077,000
FURNITURE AND EQUIPMENT	43,057		43,057	25,000
FACILITY CONSTRUCTION	13,925		13,925	13,925
VEHICLES	14,060		14,060	10,000
GARDEN IN DVLPMNT (DEPREC.	626,178		626,178	627,000
GARDEN IN DVLPMNT(NON DEPREC.	4,763		4,763	4,763
MASTER PLAN	262,490		262,490	262,500
NURSERY (BOST ST.) DEPREC.	105,977		105,977	106,000
NURSERY (BOST ST.) NON-DEPRE	9,843		9,843	9,800
PARKING LOT	54,665		54,665	54,700
PARKING LOT				
LAND	1,070,984		1,070,984	
210 HARMON COURT, LOT 69	10,690		10,690	
APPLE PROPERTY	31,576		31,576	
BOST STREET LAND	34,869		34,869	
216 HARMON COURT	41,789		41,789	

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TY 2010 Mortgages and Notes Payable Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN

EIN: 56-2105544

Total Mortgage Amount: 1500000



TY 2010 Other Decreases Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN

Description	Amount
CORECTION OF 2009 BALANCE	3,883

TY 2010 Other Expenses Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
REAL ESTATE RENTAL				
INVESTMENT DEPRECIATION	8,951	8,951		
EXPENSES				
EXCESS RENTAL EXPENSES		-11,556		
MISCELLANEOUS	175		175	175
BANK CHARGES	1,347		1,347	1,347
COMPUTER	421		421	421
HARDWARE	1,035		1,035	1,035
SOFTWARE	1,487		1,487	1,487
EQUIPMENT LEASE	4,704		4,704	4,704
DUES & SUBSCRIPTIONS	1,265		1,265	1,265
MERCHANT FEES	892		892	892
GENERAL	105		105	105
INSURANCE	1,192		1,192	1,192
AUTOMOBILE	1,023		1,023	1,023
GENERAL LIABILITY	3,090		3,090	3,090
LICENSES	438		438	438
OFFICE SUPPLIES	4,071		4,071	4,071
GENERAL SUPPLIES	4,955		4,955	4,955
POSTAGE & SHIPPING	1,037		1,037	1,037
ACCESSORIES	850		850	850
PLANTS	13,029		13,029	13,029
SUPPLIES	10,443		10,443	10,443
OUTSIDE SERVICES	43,156		43,156	43,156
RENT	7,291		7,291	7,291
TAX	233		233	233
PROPERTY	14,306		14,306	14,306
TRAINING	486		486	486
FUEL	6,356		6,356	6,356
TELEPHONE	4,895		4,895	4,895
OTHER UTILITIES	1,202	385	817	817
INVESTMENT FEES	11,998	11,998		
RENTAL INSURANCE	1,313	1,313		
REPAIRS - RENTAL	1,836	1,836		
PROPERTY TAX - RENTAL	2,284	2,284		
OFFSET DEPRECIATION GENERATED	-8,951	-8,951		
ADVERTISING	5,824		5,824	5,824
INCOME TAXES PAID	1,440		1,440	

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TY 2010 Other Income Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
MEMBERSHIPS	8,870		8,870
INCREEASE IN CASH VALUES	4,900	4,900	



TY 2010 Other Increases Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN

Description	Amount
PRIOR YEAR CORRECTION - VALUE OF LIFE INSURANCE	74,140

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TY 2010 Other Liabilities Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN

Description	Beginning of Year - Book Value	End of Year - Book Value
RENTAL DEPOSIT	950	
BANK OVERDRAFT		13,179

TY 2010 Other Professional Fees Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL FEES	482		482	482



TY 2010 Sales Of Inventory Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN

Category	Gross Sales	Cost of Goods Sold	Net (Gross Sales Minus Cost of Goods Sold)
INVENTORY SALES	488	424	64

Software ID: Software Version:

EIN: 56-2105544

Name: THE PAUL J CIENER BOTANICAL GARDEN

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(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 and deferred compensation	(e) Expense account, other allowances
GREGORY M CIENER	PRESIDENT	0	0	0
P O BOX 830 KERNERSVILLE, NC 27285	5 00			
DAVID B CIENER 🕏	VICE-PRES	0	0	0
647 S BUNKER HILL R COLFAX, NC 27235	5 00			
JOHN G WOLFE III	SECRETARY	0	0	0
101 S MAIN STREET KERNERSVILLE, NC 27284	1 00			
MICHAEL K HAYES	TREASURER	0	0	0
3805 FORRESTGATE DRIVE WINSTON SALEM,NC 27103	1 00			
JOE PINNIX 📆	DIRECTOR	0	0	0
PO BOX 878 KERNERSVILLE, NC 27285	1 00			