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Form

990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

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Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015, and ending 12-31-2015

Name of foundation THE PAUL J CIENER BOTANICAL GARDEN		A Employer identification number 56-2105544	
Number and street (or P O box number if mail is not delivered to street address) 215 SOUTH MAIN ST		B Telephone number (see instructions) (336) 996-7888	
City or town, state or province, country, and ZIP or foreign postal code KERNERSVILLE, NC 27284		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change <input type="checkbox"/>		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 6,807,403		J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	205,115			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	9	9	9	
	4 Dividends and interest from securities	37,569	37,569	37,569	
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 _____	5,659			
	b Gross sales price for all assets on line 6a _____ 259,579				
	7 Capital gain net income (from Part IV, line 2)		5,659		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____ 17,401				
	b Less Cost of goods sold	8,906			
	c Gross profit or (loss) (attach schedule)	8,495		8,495	
	11 Other income (attach schedule)	100,780		100,780	
	12 Total. Add lines 1 through 11	357,627	43,237	146,853	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	82,000		79,200	79,200
	14 Other employee salaries and wages	225,126		225,126	185,126
	15 Pension plans, employee benefits	39,057		39,057	39,057
	16a Legal fees (attach schedule).				
	b Accounting fees (attach schedule).	11,003		11,003	11,003
	c Other professional fees (attach schedule)	7,500		7,500	7,500
	17 Interest	25,092		25,092	25,092
	18 Taxes (attach schedule) (see instructions)	3,806	44	3,762	3,762
	19 Depreciation (attach schedule) and depletion	152,736			
	20 Occupancy	26,551		26,551	20,051
	21 Travel, conferences, and meetings.	3,313		3,313	3,313
	22 Printing and publications				
	23 Other expenses (attach schedule).	137,666	14,913	101,248	95,648
	24 Total operating and administrative expenses. Add lines 13 through 23	713,850	14,957	521,852	469,752
	25 Contributions, gifts, grants paid	0			0
	26 Total expenses and disbursements. Add lines 24 and 25	713,850	14,957	521,852	469,752
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-356,223			
	b Net investment income (if negative, enter -0-)		28,280		
	c Adjusted net income (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	500	500	500
	2	Savings and temporary cash investments	129,003	52,930	52,930
	3	Accounts receivable ▶ 20,889			
		Less allowance for doubtful accounts ▶	34,724	20,889	20,889
	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 instructions).			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less allowance for doubtful accounts ▶			
	8	Inventories for sale or use	2,273	3,521	3,521
	9	Prepaid expenses and deferred charges	333	2,490	2,490
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	1,196,536	1,224,863	1,224,863
	c	Investments—corporate bonds (attach schedule)			
	Liabilities	11	Investments—land, buildings, and equipment basis ▶ 402,764		
		Less accumulated depreciation (attach schedule) ▶ 47,494	359,187	355,270	402,764
12		Investments—mortgage loans.			
13		Investments—other (attach schedule)			
14		Land, buildings, and equipment basis ▶ 5,117,345			
		Less accumulated depreciation (attach schedule) ▶ 894,017	4,375,757	4,223,328	5,099,446
15		Other assets (describe ▶)			
16		Total assets(to be completed by all filers—see the instructions Also, see page 1, item I)	6,098,313	5,883,791	6,807,403
17		Accounts payable and accrued expenses	12,748	9,975	
18		Grants payable			
19	Deferred revenue				
20	Loans from officers, directors, trustees, and other disqualified persons				
21	Mortgages and other notes payable (attach schedule).	966,794	1,116,002		
22	Other liabilities (describe ▶)	16,703	11,969		
23	Total liabilities(add lines 17 through 22)	996,245	1,137,946		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	300,000	300,000	
	29	Retained earnings, accumulated income, endowment, or other funds	4,802,068	4,445,845	
	30	Total net assets or fund balances(see instructions)	5,102,068	4,745,845	
31	Total liabilities and net assets/fund balances(see instructions)	6,098,313	5,883,791		

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return)	1	5,102,068
2	Enter amount from Part I, line 27a	2	-356,223
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	4,745,845
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	4,745,845

Part IV

Capital Gains and Losses for Tax on Investment Income

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)		How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr)	Date sold (d) (mo , day, yr)
1a	See Additional Data Table			
b				
c				
d				
e				

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or (l) Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
a See Additional Data Table			
b			
c			
d			
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	5,659
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 }		3	-4,685

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)
If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	455,725	1,248,965	0 364882
2013	523,278	1,412,190	0 370544
2012	769,420	1,488,911	0 516767
2011	947,663	2,335,507	0 405763
2010	1,847,575	3,243,344	0 569651

2	Total of line 1, column (d).	2	2 227607
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 445521
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	1,196,067
5	Multiply line 4 by line 3.	5	532,873
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	283
7	Add lines 5 and 6.	7	533,156
8	Enter qualifying distributions from Part XII, line 4.	8	487,651

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See
the Part VI instructions

Part VI

Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

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 here ☐ and enter 1% of Part I, line 27b

c

All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)

2

Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

2

3

Add lines 1 and 2.

3

566

4

Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

4

5

Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-

5

566

6

Credits/Payments

a

2015 estimated tax payments and 2014 overpayment credited to 2015

6a

b

Exempt foreign organizations—tax withheld at source.

6b

c

Tax paid with application for extension of time to file (Form 8868).

6c

d

Backup withholding erroneously withheld.

6d

7

Total credits and payments. Add lines 6a through 6d.

7

8

Enter any penalty for underpayment of estimated tax. Check here ☒ if Form 2220 is attached

8

14

9

Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed.

9

580

10

Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.

10

11

Enter the amount of line 10 to be Credited to 2015 estimated tax ☐ Refunded ☐

11

Part VII-A

Statements Regarding Activities

1a

During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it 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 Instructions for definition)?
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.

1b

No

c

Did the foundation file Form 1120-POL for this year?

1c

No

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 ☐ \$ _____

e

Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ _____

2

Has the foundation engaged in any activities that have not previously been reported to the IRS?
If "Yes," attach a detailed description of the activities.

2

No

3

Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles 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

5

Was there a liquidation, termination, dissolution, or substantial contraction during the year?
If "Yes," attach the statement required by General Instruction T.

5

No

6

Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:
• 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 instructions)
☐ _____

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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)?
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

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Part VII-A

Statements Regarding Activities *(continued)*

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 instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶CIENERBOTANICALGARDEN.ORG	13	Yes	
14	The books are in care of ▶DAVID B CIENER Telephone no ▶(336) 996-7888 Located at ▶215 S MAIN ST KERNERSVILLE NC ZIP+4 ▶27284			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year ▶	15		
16	At any time during calendar year 2015, 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? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes", enter the name of the foreign country ▶	16	Yes	No

Part 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
1a	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. ▶ <input type="checkbox"/>	1b		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015? <input type="checkbox"/>	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	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 instructions). <input type="checkbox"/>	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____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2015 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? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.</i>) <input type="checkbox"/>	3b		
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 2015?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a

During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes

☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes

☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes

☒ No

(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).

☐ Yes

☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes

☒ No

b

If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b

Organizations relying on a current notice regarding disaster assistance check here.

☐

c

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

☐ Yes

☐ No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes

☒ No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

No

If "Yes" to 6b, file Form 8870.

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes

☒ No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1

List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

2

Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				

Total

number of other employees paid over \$50,000.

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Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, 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 services.

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc

	Expenses
1 BUILD AND MAINTAIN BOTANICAL GARDEN FOR EDUCATION AND BENEFIT OF COMMUNITY AND TOURISTS	469,752
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	

Part X

Minimum Investment Return

(All domestic foundations must complete this part. Foreign foundations,see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	1,214,281
b	Average of monthly cash balances.	1b	0
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	1,214,281
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	1,214,281
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	18,214
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,196,067
6	Minimum investment return. Enter 5% of line 5.	6	59,803

Part XI

Distributable Amount

(see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	59,803
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	566
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	566
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	59,237
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	59,237
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	59,237

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	469,752
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	17,899
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	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	487,651
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 instructions).	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	487,651

Note:The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				59,237
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.				
b Total for prior years 20__, 20__, 20__				
3 Excess distributions carryover, if any, to 2015				
a From 2010.	1,682,832			
b From 2011.	835,734			
c From 2012.	693,793			
d From 2013.	455,541			
e From 2014.	394,855			
f Total of lines 3a through e.	4,062,755			
4 Qualifying distributions for 2015 from Part XII, line 4	\$ 487,651			
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2015 distributable amount.				59,237
e Remaining amount distributed out of corpus	428,414			
5 Excess distributions carryover applied to 2015 (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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,491,169			
b 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.				
d Subtract line 6c from line 6b Taxable amount—see instructions.				
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions.				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015.				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions).	1,682,832			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a.	2,808,337			
10 Analysis of line 9				
a Excess from 2011.	835,734			
b Excess from 2012.	693,793			
c Excess from 2013.	455,541			
d Excess from 2014.	394,855			
e Excess from 2015.	428,414			

Part XIV

b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

b 85% of line 2a

d Amounts included in line 2c not used directly for active conduct of exempt activities

3 Complete 3a, b, or c for the alternative test relied upon

a "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) 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

[illegible]

Part XV

1

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Form **990-PF** (2015)

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount		
1 Program service revenue						
a PROGRAM SERVICE REVENUE						16,820
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
2 Membership dues and assessments.						11,415
3 Interest on savings and temporary cash investments			14	9		
4 Dividends and interest from securities.			14	37,569		
5 Net rental income or (loss) from real estate						
a Debt-financed property.						
b Not debt-financed property.						
6 Net rental income or (loss) from personal property						
7 Other investment income.						
8 Gain or (loss) from sales of assets other than inventory						5,659
9 Net income or (loss) from special events			25	26,545		
10 Gross profit or (loss) from sales of inventory			25	8,495		
11 Other revenue a _____						
b _____						
c _____						
d _____						
e _____						
12 Subtotal Add columns (b), (d), and (e).				72,618		33,894
13 Total. Add line 12, columns (b), (d), and (e).						106,512

(See worksheet in line 13 instructions to verify calculations)

[illegible]

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	Date acquired (c) (mo , day, yr)	(d) Date sold (mo , day, yr)
BB&T SECURITIES	P	2014-12-02	2015-10-15
BB&T SECURITIES	P	2013-08-23	2015-08-05
BB&T SECURITIES	P	2012-02-02	2015-12-31
BB&T SECURITIES	P	2014-10-03	2015-02-10
BB&T SECURITIES	P	2013-08-19	2015-05-19
BB&T SECURITIES	P	2013-09-09	2015-05-18

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
571		601	-30
75,000		75,120	-120
65			65
29,013		33,668	-4,655
154,176		144,031	10,145
754		500	254

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-30
			-120
			65
			-4,655
			10,145
			254

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

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
GREGORY M CIENER	VICE PRESIDE 3 00	0	0	0
PO BOX 830 KERNERSVILLE,NC 27285				
DAVID B CIENER	PRESIDENT 3 00	0	0	0
215 SOUTH MAIN ST KERNERSVILLE,NC 27284				
JOHN G WOLFE III	SECRETARY 3 00	0	0	0
101 S MAIN ST KERNERSVILLE,NC 27284				
JOE PINNIX	DIRECTOR 3 00	0	0	0
PO BOX 878 KERNERSVILLE,NC 27285				
JOHN WHISNANT	EXEC DIRECTO 40 00	82,000	0	0
215 SOUTH MAIN ST KERNERSVILLE,NC 27284				
DUANE LONG	DIRECTOR 1 00	0	0	0
215 SOUTH MAIN ST KERNERSVILLE,NC 27284				
JANE VEACH	DIRECTOR 1 00	0	0	0
215 SOUTH MAIN ST KERNERSVILLE,NC 27284				
JOELLEN PARKS	DIRECTOR 1 00	0	0	0
215 SOUTH MAIN ST KERNERSVILLE,NC 27284				
MARTHA YARBOROUGH	DIRECTOR 1 00	0	0	0
215 SOUTH MAIN ST KERNERSVILLE,NC 27284				

TY 2015 Accounting Fees Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN

EIN: 56-2105544

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING & LEGAL FEES	11,003		11,003	11,003

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

TY 2015 Amortization Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN

EIN: 56-2105544

Description of Amortized Expenses	Date Acquired, Completed, or Expended	Amount Amortized	Deduction for Prior Years	Amortization Method	Current Year Amortization	Net Investment Income	Adjusted Net Income	Total Amount of Amortization
MASTER PLAN	2010-12-01	262,490	89,603	15 0000	17,500			107,103

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

TY 2015 Depreciation Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN
EIN: 56-2105544

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
BUILDINGS	2010-12-01	2,076,834	215,227	S/L	39 0000	53,253			
FURNITURE & EQUIP	2009-12-01	43,057	36,332	200DB	7 0000	4,483			
FACILITY CONSTRUCTION	2009-12-31	13,925	1,785	S/L	39 0000	357			
VEHICLES	2009-12-01	14,060	2,025	200DB	5 0000				
GARDEN IN DVLPMNT	2010-12-01	626,178	169,694	150DB	15 0000	45,649			
GARDEN IN DVLPMNT	2009-12-01	4,763	1,291	150DB	15 0000	365			
NURSERY - BOST ST	2010-12-01	105,977	28,720	150DB	15 0000	7,725			
NURSERY - BOST ST	2009-12-01	9,843	2,667	150DB	15 0000	756			
PARKING LOT	2010-12-01	54,665	10,220	S/L	15 0000	2,963			
LAND	2009-12-01	1,070,984							
210 HARMON CT - LOT 69	2009-12-01	10,690							
APPLE PROPERTY	2009-12-01	31,576	4,048	S/L	39 0000	810			
BOST ST LAND	2009-12-01	34,869							
216 HARMON CT	2010-12-01	41,789	4,660	S/L	39 0000	1,072			
BUILDINGS	2011-12-31	462,786	36,093	S/L	39 0000	11,867			
NURSERY (BOST ST)	2011-12-22	6,795	530	S/L	39 0000	174			
GARDEN IN DEVPMNT	2011-01-24	299	81	150DB	15 0000	22			
PARKING LOT	2011-12-31	27,200	7,371	150DB	15 0000	1,983			
FURNITURE & EQUIP	2011-12-31	35,656	23,126	200DB	7 0000	3,580			
PARKING LOT LIGHTING	2012-10-04	12,361	7,605	150DB	15 0000	475			

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
GARDEN IN DVLPMNT	2012-02-09	3,400	2,092	150DB	15 0000	131			
FURN & EQUIP 2012	2012-05-10	4,234	3,308	200DB	7 0000	265			
LAND - 225 S MAIN ST	2007-10-22	250,000							
HOUSE - 225 S MAIN ST	2007-10-22	152,764	35,743	STRAIGHT LINE	20 0000				
DELL PC - KITTY	2013-01-02	1,085	795	200DB	7 0000	83			
3000 GALLON RAIN BARREL	2013-12-02	3,036	1,990	200DB	7 0000	299			
10 IN X 50 FT ROLL	2013-12-02	54	35	200DB	7 0000	6			
GUTTERS ON GREENHOUSE	2013-12-20	335	220	200DB	7 0000	33			
SERVER	2013-12-02	3,036	2,171	200DB	5 0000	346			
3000 GALLON RAIN CONTAINMENT	2014-01-02	3,419	1,954	200DB	7 0000	418			
CISTERN COMPONENTS	2014-09-01	875	500	200DB	7 0000	107			
HOURLGLASS GARDEN	2014-12-22	120,352	63,185	150DB	15 0000	5,717			
ROCK GARDEN	2014-11-21	11,445	6,009	150DB	15 0000	544			
HOURLGLASS GARDEN	2015-09-01	13,799		S/L	15 0000	7,130			
CCTV SURVELIANCE SYSTEM	2015-10-21	4,100		200DB	7 0000	2,123			

TY 2015 Investments Corporate Stock Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN

EIN: 56-2105544

Name of Stock	End of Year Book Value	End of Year Fair Market Value
SUNTRUST INVESTMENT	1,224,863	1,224,863

TY 2015 Investments - Land Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN

EIN: 56-2105544

Category/ Item	Cost/Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
INVESTMENT ASSETS	402,764	47,494	355,270	402,764

**TY 2015 Land, Etc.
Schedule**

Name: THE PAUL J CIENER BOTANICAL GARDEN
EIN: 56-2105544

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
ASSETS	4,000,802	894,017	3,106,785	3,982,903
LAND	1,116,543		1,116,543	1,116,543

TY 2015 Mortgages and Notes Payable Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN
EIN: 56-2105544

Total Mortgage Amount:

Item No.	1
Lender's Name	BBT
Lender's Title	
Relationship to Insider	NONE
Original Amount of Loan	550,000
Balance Due	488,806
Date of Note	2012-12
Maturity Date	
Repayment Terms	
Interest Rate	
Security Provided by Borrower	PROPERTY
Purpose of Loan	PROPERTY AND MASTER PLAN
Description of Lender Consideration	
Consideration FMV	

Item No.	2
Lender's Name	BBT
Lender's Title	
Relationship to Insider	NONE
Original Amount of Loan	407,369
Balance Due	627,196
Date of Note	2013-07
Maturity Date	
Repayment Terms	
Interest Rate	
Security Provided by Borrower	PROPERTY
Purpose of Loan	PROPERTY AND MASTER PLAN
Description of Lender Consideration	
Consideration FMV	

TY 2015 Other Expenses Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN
EIN: 56-2105544

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
GIFT SHOP				
MERCHANT FEES	600		600	
SPECIAL EVENTS				
MERCHANT FEES	2,000		2,000	
JANITORIAL EXP				
REPAIRS				
PROGRAM EXP				
ADVERTISING	3,000		3,000	
EXPENSES				
ADVERTISING	13,727		13,727	13,727
BANK CHARGES	39		39	39
REPAIRS	20,525		20,525	20,525
COMPUTER	4,173		4,173	4,173
EQUIPMENT LEASE	3,824		3,824	3,824
DISCOUNTS	542		542	542
DUES & SUBSCRIPTIONS	3,522		3,522	3,522
AUTOMOBILE INS	1,288		1,288	1,288
GENERAL LIABILITY INS	3,775		3,775	3,775
PROPERTY INS	7,465		7,465	7,465
WORKERS COMP	4,916		4,916	4,916
GENERAL SUPPLIES	3,230		3,230	3,230
POSTAGE & SHIPPING	963		963	963
PLANT & GARDEN SUPPLIES	6,602		6,602	6,602
TRAINING	647		647	647
PROGRAM EXP	13,960		13,960	13,960
JANITORIAL EXP	6,450		6,450	6,450
INVESTMENT FEES	14,913	14,913		
ROUNDING	-4			
INVESTMENT DEPRECIATION	3,917			

TY 2015 Other Income Schedule**Name:** THE PAUL J CIENER BOTANICAL GARDEN**EIN:** 56-2105544

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
PROGRAM SERVICE REVENUE	16,820		16,820
MEMBERSHIP DUES	11,415		11,415
SPECIAL EVENTS	72,545		72,545

TY 2015 Other Liabilities Schedule**Name:** THE PAUL J CIENER BOTANICAL GARDEN**EIN:** 56-2105544

Description	Beginning of Year - Book Value	End of Year - Book Value
BB&T CREDIT CARD	150	714
AMERICAN EXPRESS CC	1,697	84
SALES TAX PAYABLE	295	
HEALTH INSURANCE PAYABLE	361	-89
EVENT DEPOSIT	14,200	11,260

TY 2015 Other Professional Fees Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN

EIN: 56-2105544

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OUTSIDE SERVICES	7,500		7,500	7,500

TY 2015 Sales Of Inventory Schedule

Name: THE PAUL J CIENER BOTANICAL GARDEN

EIN: 56-2105544

Category	Gross Sales	Cost of Goods Sold	Net (Gross Sales Minus Cost of Goods Sold)
GIFT SHOP	17,401	8,906	8,495

TY 2015 Taxes Schedule**Name:** THE PAUL J CIENER BOTANICAL GARDEN**EIN:** 56-2105544

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROPERTY TAX	3,197		3,197	3,197
LICENSES	565		565	565
INCOME TAX	44	44		

<div>Schedule B</div> <div>(Form 990, 990-EZ, or 990-PF)</div> <div>Department of the Treasury Internal Revenue Service</div>	<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF.</div> <div>▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.</div>	<div>OMB No 1545-0047</div> <div>2015</div>
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<div>Name of the organization</div> <div>THE PAUL J CIENER BOTANICAL GARDEN</div>	<div>Employer identification number</div> <div>56-2105544</div>
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Organization type (check one)

<div>Filers of:</div> <div>Form 990 or 990-EZ</div> <div>Form 990-PF</div>	<div>Section:</div> <div><div><input type="checkbox"/> 501(c)() (enter number) organization</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation</div><div><input type="checkbox"/> 527 political organization</div><div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div><div><input type="checkbox"/> 501(c)(3) taxable private foundation</div></div>
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Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer “No” on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization THE PAUL J CIENER BOTANICAL GARDEN	Employer identification number 56-2105544
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Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	See Additional Data Table 	 \$ 	Person Payroll Noncash (Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	 	 \$ 	Person Payroll Noncash (Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	 	 \$ 	Person Payroll Noncash (Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	 	 \$ 	Person Payroll Noncash (Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	 	 \$ 	Person Payroll Noncash (Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	 	 \$ 	Person Payroll Noncash (Complete Part II for noncash contribution)

Name of organization THE PAUL J CIENER BOTANICAL GARDEN	Employer identification number 56-2105544
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Part II **Noncash Property**
(see instructions) Use duplicate copies of Part II if additional space is needed

(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<hr/>	<hr/> <hr/> <hr/> <hr/>	<hr/> \$ <hr/>	<hr/>
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<hr/>	<hr/> <hr/> <hr/> <hr/>	<hr/> \$ <hr/>	<hr/>
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<hr/>	<hr/> <hr/> <hr/> <hr/>	<hr/> \$ <hr/>	<hr/>
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<hr/>	<hr/> <hr/> <hr/> <hr/>	<hr/> \$ <hr/>	<hr/>
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<hr/>	<hr/> <hr/> <hr/> <hr/>	<hr/> \$ <hr/>	<hr/>
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<hr/>	<hr/> <hr/> <hr/> <hr/>	<hr/> \$ <hr/>	<hr/>
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<hr/>	<hr/> <hr/> <hr/> <hr/>	<hr/> \$ <hr/>	<hr/>

Name of organization THE PAUL J CIENER BOTANICAL GARDEN	Employer identification number 56-2105544
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Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____

Use duplicate copies of Part III if additional space is needed

(a) No.from Part I	(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	
	--		
(a) No.from Part I	(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	
	--		
(a) No.from Part I	(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	
	--		
(a) No.from Part I	(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	
	--		

Additional Data

Software ID:

Software Version:

EIN: 56-2105544

Name: THE PAUL J CIENER BOTANICAL GARDEN

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PAUL J CIENER CHARITABLE LEAD TRUST	\$ 59,098	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	547 S BUNKER HILL RD		
	COLFAX, NC 27235		
7	WYAT DELORES LEFEVRE	\$ 10,000	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	4536 KERNERVILLE RD		
	KERNERSVILLE, NC 27284		
13	THE DEAL FOUNDATION	\$ 5,000	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	2021 BREVARD RD		
	HIGH POINT, NC 27263		
2	THE WINSTON SALEM FOUNDATION	\$ 17,500	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	860 WEST 5TH ST		
	WINSTON SALEM, NC 271012506		
8	DAVID CIENER	\$ 10,000	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	215 SOUTH MAIN ST		
	KERNERSVILLE, NC 27284		
3	TOWN OF KERNERSVILLE	\$ 20,000	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
	PO BOX 728		
	KERNERSVILLE, NC 27284		

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>9</u>			Person <input checked="" type="checkbox"/>
	<u>SYNGENTA</u>	<u>\$ 5,000</u>	Payroll <input checked="" type="checkbox"/>
	<u>410 S SWING RD</u>		Noncash
	<u>GREENSBORO, NC 27409</u>		(Complete Part II for noncash contribution)
<u>4</u>	<u>MICHEL FAMILY FOUNDATION FUND</u>		Person <input checked="" type="checkbox"/>
	<u>116 HAWKINS DR</u>	<u>\$ 6,200</u>	Payroll <input checked="" type="checkbox"/>
	<u>GREENSBORO, NC 27410</u>		Noncash
			(Complete Part II for noncash contribution)
<u>10</u>			Person <input checked="" type="checkbox"/>
	<u>COMMUNITY FOUNDATION OF GREATER GBR</u>	<u>\$ 11,200</u>	Payroll <input checked="" type="checkbox"/>
	<u>330 S GREENE ST STE 100</u>		Noncash
	<u>GREENSBORO, NC 27401</u>		(Complete Part II for noncash contribution)
<u>5</u>			Person <input checked="" type="checkbox"/>
	<u>CLARENCE LAMB</u>	<u>\$ 5,000</u>	Payroll <input checked="" type="checkbox"/>
	<u>125 ALLEN ST</u>		Noncash
	<u>KERNERSVILLE, NC 27284</u>		(Complete Part II for noncash contribution)
<u>11</u>			Person <input checked="" type="checkbox"/>
	<u>MARION STEDMAN COVINGTON FOUNDATION</u>	<u>\$ 8,000</u>	Payroll <input checked="" type="checkbox"/>
	<u>2812 SAINT REGIS RD</u>		Noncash
	<u>GREENSBORO, NC 27408</u>		(Complete Part II for noncash contribution)
<u>6</u>	<u>LAWRENCE POPE FOUNDATION</u>		Person <input checked="" type="checkbox"/>
	<u>1349 S PARK DRIVE C</u>	<u>\$ 5,000</u>	Payroll <input checked="" type="checkbox"/>
	<u>KERNERSVILLE, NC 27284</u>		Noncash
			(Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>12</u>	<div>GREG CIENER</div> <div>PO BOX 830</div> <div>KERNERSVILLE, NC 27285</div>	<div></div> <div>\$ 5,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>