

Form **990**
(Rev. January 2020)
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

- ▶ Do not enter social security numbers on this form as it may be made public.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2019

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning and ending

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

C Name of organization: **ADKINS ARBORETUM, LTD.**
 Doing business as
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
12610 EVELAND ROAD
 City or town, state or province, country, and ZIP or foreign postal code
RIDGELY, MD 21660

D Employer identification number: **52-1163405**

E Telephone number: **410-634-2847**

F Name and address of principal officer: **VIRGINIA TIERNAN**
12610 EVELAND ROAD, RIDGELY, MD 21660

G Gross receipts \$ **4,058,822.**

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c)() (insert no.) 4947(a)(1) or 527

J Website: ▶ **WWW.ADKINSARBORETUM.ORG**

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: **1979** **M** State of legal domicile: **MD**

H(c) Group exemption number ▶

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: MAINTAIN, ENHANCE AND DEVELOP ADKINS ARBORETUM AT TUCKAHOE STATE PARK, CAROLINE COUNTY		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	15
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	15
	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	11
	6	Total number of volunteers (estimate if necessary)	6	75
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, line 39	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 282,540.	Current Year 676,767.
	9	Program service revenue (Part VIII, line 2g)	67,502.	94,961.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	165,178.	545,687.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	72,442.	72,660.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	587,662.	1,390,075.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	354,131.	284,124.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 99,394.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	468,014.	444,358.
Net Assets or Fund Balances	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	822,145.	728,482.
	19	Revenue less expenses. Subtract line 18 from line 12	-234,483.	661,593.
	20	Total assets (Part X, line 16)	Beginning of Current Year 4,640,474.	End of Year 5,153,242.
	21	Total liabilities (Part X, line 26)	146,668.	67,287.
	22	Net assets or fund balances. Subtract line 21 from line 20	4,493,806.	5,085,955.

Part II Signature Block

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

Sign Here

Signature of officer: **VIRGINIA TIERNAN, EXECUTIVE DIRECTOR**
 Date: _____
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: **LISA K. DURHAM, CPA**
 Preparer's signature: **LISA K. DURHAM, CPA**
 Date: **09/18/20**
 Check if self-employed:
 PTIN: **P00749970**

Firm's name: **ACCOUNTING STRATEGIES GROUP, LLC**
 Firm's EIN: **26-3654652**

Firm's address: **PO BOX 369
PRESTON, MD 21655**
 Phone no. **410-673-1384**

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III []

1 Briefly describe the organization's mission: MAINTAIN, ENHANCE AND DEVELOP ADKINS ARBORETUM AT TUCKAHOE STATE PARK, CAROLINE COUNTY

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 438,172. including grants of \$) (Revenue \$ 336,787.) ECOLOGICAL, CULTURAL, RECREATIONAL, HORTICULTURAL, WILDLIFE TO FLORAL COMMUNITIES OF MIXED HARDWOOD UPLANDS, BOTTOMLAND FORESTS, NONTIDAL MARSHES AND OPEN MEADOWS OF THE CENTRAL DELMARVA PENINSULA, AND TO TEACH THE PUBLIC ABOUT THEIR ECOLOGICAL, CULTURAL, RECREATIONAL, HORTICULTURAL, WILDLIFE AND AESTHETIC VALUE.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 438,172.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and schedules.

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV		X
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		X
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Form with 16 numbered questions (2a-16) regarding employee reporting, tax compliance, and organizational activities. Includes checkboxes for 'Yes' and 'No' and input fields for numerical values.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI

X

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included on line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed MD
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
Own website Another's website X Upon request Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
THE ORGANIZATION - 410-634-2847
12610 EVELAND ROAD, RIDGELY, MD 21660

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees, (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JULIANNA PAX TRUSTEE	1.00	X						0.	0.	0.
(2) JAY FALSTAD TRUSTEE	1.00	X						0.	0.	0.
(3) KAREN GIANNINOTO TRUSTEE	1.00	X						0.	0.	0.
(4) ANDREW MILLER TRUSTEE	1.00	X						0.	0.	0.
(5) GREG WILLIAMS TRUSTEE	1.00	X						0.	0.	0.
(6) LORIE STAVER TRUSTEE	1.00	X						0.	0.	0.
(7) JOYCE ANDERSON TRUSTEE	1.00	X						0.	0.	0.
(8) MIKAELA BOLEY TRUSTEE	1.00	X						0.	0.	0.
(9) KATHY CARMEAN EMERITUS TRUSTEE	1.00	X						0.	0.	0.
(10) PETER STIFEL EMERITUS TRUSTEE	1.00	X						0.	0.	0.
(11) JANIS TRAINOR TRUSTEE	1.00	X						0.	0.	0.
(12) MICHAEL JENSEN TRUSTEE	1.00	X						0.	0.	0.
(13) DEBBIE COOPER-HUGHES EX OFFICIO MEMBER	1.00	X						0.	0.	0.
(14) ANNIE RUCH TRUSTEE	1.00	X						0.	0.	0.
(15) MARGOT MCCONNELL PRESIDENT	2.00			X				0.	0.	0.
(16) PATRICIA BOWELL VICE PRESIDENT	2.00			X				0.	0.	0.
(17) MARY REVELL SECRETARY	2.00			X				0.	0.	0.

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b	78,956.			
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	84,867.			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	512,944.			
	g	Noncash contributions included in lines 1a-1f	1g	\$ 47,913.			
	h Total. Add lines 1a-1f				676,767.		
Program Service Revenue				Business Code			
	2 a	PROGRAM FEES		713990	94,961.	94,961.	
	b						
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f				94,961.			
Other Revenue	3			Investment income (including dividends, interest, and other similar amounts)	163,585.	163,585.	
	4			Income from investment of tax-exempt bond proceeds			
	5			Royalties			
	6 a			Gross rents			
	6 b			Less: rental expenses			
	6 c			Rental income or (loss)			
	6 d			Net rental income or (loss)			
	7 a			Gross amount from sales of assets other than inventory			
	7 b			Less: cost or other basis and sales expenses			
	7 c			Gain or (loss)			
	7 d			Net gain or (loss)	382,102.		382,102.
	8 a			Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	15,089.		
	8 b			Less: direct expenses	20,670.		
8 c			Net income or (loss) from fundraising events	-5,581.		-5,581.	
9 a			Gross income from gaming activities. See Part IV, line 19				
9 b			Less: direct expenses				
9 c			Net income or (loss) from gaming activities				
10 a			Gross sales of inventory, less returns and allowances	153,553.			
10 b			Less: cost of goods sold	75,312.			
10 c			Net income or (loss) from sales of inventory	78,241.	78,241.		
Miscellaneous Revenue	11 a						
	11 b						
	11 c						
	11 d			All other revenue			
	11 e			Total. Add lines 11a-11d			
12 Total revenue. See instructions				1,390,075.	336,787.	0.	376,521.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	245,899.	137,509.	63,168.	45,222.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	5,766.	3,017.	1,597.	1,152.
9 Other employee benefits	11,762.	6,475.	587.	4,700.
10 Payroll taxes	20,697.	12,292.	5,755.	2,650.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	18,795.		18,795.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	21,504.		21,504.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	1,994.	1,529.	50.	415.
12 Advertising and promotion	11,361.	1,283.	3,149.	6,929.
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	12,974.	12,541.	433.	
17 Travel	3,545.	3,414.	131.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	4,191.		4,191.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	124,467.	87,127.	37,340.	
23 Insurance	19,399.	14,089.	5,310.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a CONSULTANTS	133,506.	96,209.	7,150.	30,147.
b SUPPLIES/CATERING/RENTA	31,513.	31,356.	0.	157.
c BUILDING AND GROUNDS	22,583.	22,583.	0.	0.
d PRINTING AND POSTAGE	16,551.	6,120.	2,666.	7,765.
e All other expenses	21,975.	2,628.	19,090.	257.
25 Total functional expenses. Add lines 1 through 24e	728,482.	438,172.	190,916.	99,394.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing	68,891.	1	1,535.
	2	Savings and temporary cash investments	14,535.	2	136,732.
	3	Pledges and grants receivable, net	42,912.	3	9,622.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	35,490.	8	41,230.
	9	Prepaid expenses and deferred charges	3,908.	9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,570,126.		
	b	Less: accumulated depreciation	10b 1,108,489.	10c	1,461,637.
	11	Investments - publicly traded securities	2,647,560.	11	2,819,500.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	693,371.	15	682,986.
16	Total assets. Add lines 1 through 15 (must equal line 33)	4,640,474.	16	5,153,242.	
Liabilities	17	Accounts payable and accrued expenses	23,829.	17	16,670.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties	94,931.	23	40,995.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	27,908.	25	9,622.
	26	Total liabilities. Add lines 17 through 25	146,668.	26	67,287.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.				
	27	Net assets without donor restrictions	4,051,327.	27	4,643,476.
	28	Net assets with donor restrictions	442,479.	28	442,479.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
32	Total net assets or fund balances	4,493,806.	32	5,085,955.	
33	Total liabilities and net assets/fund balances	4,640,474.	33	5,153,242.	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,390,075.
2	Total expenses (must equal Part IX, column (A), line 25)	2	728,482.
3	Revenue less expenses. Subtract line 2 from line 1	3	661,593.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,493,806.
5	Net unrealized gains (losses) on investments	5	-69,444.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	5,085,955.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

Form 990 (2019)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization **ADKINS ARBORETUM, LTD.** Employer identification number **52-1163405**

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

- The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)
- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
 - 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
 - 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
 - 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
 - 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
 - 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
 - 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
 - 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
 - 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
 - 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
 - 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
 - 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations _____

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	553,020.	254,181.	209,206.	282,539.	676,767.	1975713.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	216,481.	207,207.	229,832.	252,337.	263,603.	1169460.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	769,501.	461,388.	439,038.	534,876.	940,370.	3145173.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c Add lines 7a and 7b						0.
8 Public support. (Subtract line 7c from line 6.)						3145173.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6	769,501.	461,388.	439,038.	534,876.	940,370.	3145173.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	178,829.	146,649.	423,009.	-228,768.	476,243.	995,962.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	178,829.	146,649.	423,009.	-228,768.	476,243.	995,962.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	-6,238.					-6,238.
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	942,092.	608,037.	862,047.	306,108.	1416613.	4134897.
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	76.06 %
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	80.81 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	17	24.09 %
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	19.45 %

- 19a **33 1/3% support tests - 2019.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- 19b **33 1/3% support tests - 2018.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- 20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).*
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in Part VI when and how the organization made the determination.*
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in Part VI what controls the organization put in place to ensure such use.*
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*
- b **Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c **Substitutions only.** Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in Part VI.*
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer 10b below.*
- b Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
11a		
b A family member of a person described in (a) above?		
11b		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).

a The organization satisfied the Activities Test. Complete line 2 below.

b The organization is the parent of each of its supported organizations. Complete line 3 below.

c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

2 Activities Test. Answer (a) and (b) below.

a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.

b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

3 Parent of Supported Organizations. Answer (a) and (b) below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

	Yes	No
2a		
2b		
3a		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

Part V **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

COPY

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Name of the organization

ADKINS ARBORETUM, LTD.

Employer identification number

52-1163405

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

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 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 33 1/3% 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. Don't 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 isn't covered by the **General Rule** and/or the **Special Rules** doesn't 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 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

ADKINS ARBORETUM, LTD.

52-1163405

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		\$ 77,488.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 10,800.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 7,298.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 232,332.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

ADKINS ARBORETUM, LTD.

52-1163405

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
7		\$ 5,100.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

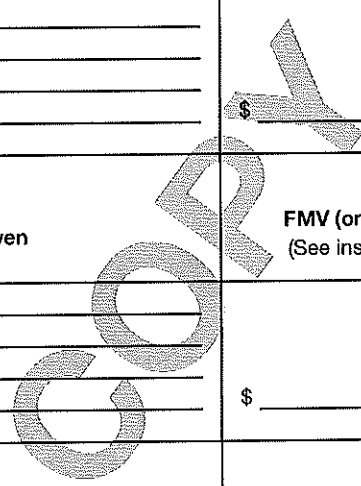
Employer identification number

ADKINS ARBORETUM, LTD.

52-1163405

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
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____



Name of organization ADKINS ARBORETUM, LTD.	Employer identification number 52-1163405
---	---

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 info. once.) ▶ \$ _____
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

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

ADKINS ARBORETUM, LTD.

Employer identification number

52-1163405

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Revenue, Assets. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. 1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2019

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	2,647,560.	3,213,170.	3,031,641.	3,191,954.	3,587,491.
b Contributions	9,016.				214,305.
c Net investment earnings, gains, and losses	450,298.	-228,813.	424,910.	146,539.	-19,265.
d Grants or scholarships					
e Other expenditures for facilities and programs	287,374.	336,797.	243,381.	306,852.	590,577.
f Administrative expenses					
g End of year balance	2,819,500.	2,647,560.	3,213,170.	3,031,641.	3,191,954.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment _____%
 - c Term endowment _____%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|-----------------------------|-----|----|
| (i) Unrelated organizations | | X |
| (ii) Related organizations | | X |
- b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?
- 3b
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		2,570,126.	1,108,489.	1,461,637.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶ **1,461,637.**

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) DIVIDENDS AND INTEREST RECEIVABLE	7,420.
(2) WORKS OF ART	9,077.
(3) CONSTRUCTION IN PROGRESS	666,489.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	682,986.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
1. (1) Federal income taxes	
(2) DEFERRED REVENUE	9,622.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	9,622.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and a shaded area for calculations.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and a shaded area for calculations.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART III, LINE 4:

BOTANICAL AND NATURE RELATED WORKS OF ART ARE ON DISPLAY TO WELCOME GUESTS TO THE ARBORETUM'S VISITOR CENTER.

PART X, LINE 2:

IN ACCORDANCE WITH FASB ASC 740-10, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, THE ORGANIZATION HAS ASSESSED THE LIKELIHOOD THAT ALL TAX POSITIONS ARE MORE LIKELY THAN NOT TO BE SUSTAINED UPON EXAMINATION.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		FAIRYFEST (event type)	BEER GARDEN (event type)	3 (total number)		
Revenue	1	5,900.	4,160.	5,029.	15,089.	
	2					
	3	5,900.	4,160.	5,029.	15,089.	
Direct Expenses	4					
	5					
	6					
	7	193.	80.	3,441.	3,714.	
	8		800.	450.	1,250.	
	9	4,157.	1,394.	10,155.	15,706.	
	10	Direct expense summary. Add lines 4 through 9 in column (d) ▶				20,670.
	11	Net income summary. Subtract line 10 from line 3, column (d) ▶				-5,581.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
Revenue	1					
	2					
Direct Expenses	3					
	4					
	5					
	6	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No		
	7	Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8	Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

Part IV Supplemental Information *(continued)*

COPY

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization **ADKINS ARBORETUM, LTD.** Employer identification number **52-1163405**

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded				
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (<u>PROFESSIONAL</u>)	X	17	47,913.	FMV
26	Other ▶ (_____)				
27	Other ▶ (_____)				
28	Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2019

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public
Inspection

Name of the organization

ADKINS ARBORETUM, LTD.

Employer identification number
52-1163405

FORM 990, PART VI, SECTION B, LINE 11B:

FINAL DRAFT OF TAX RETURN EMAILED TO ALL BOARD OF TRUSTEES FOR REVIEW PRIOR
TO IT BEING SIGNED OR MAILED

FORM 990, PART VI, SECTION B, LINE 12C:

POLICY APPLIES TO BOARD MEMBERS, STAFF AND CERTAIN VOLUNTEERS OF THE
ORGANIZATION. ALL INTERESTED PARTIES ARE UNDER A CONTINUING OBLIGATION TO
DISCLOSE ANY ACTUAL OR POTENTIAL CONFLICT AS SOON AS IT IS REASONABLY KNOWN
BY COMPLETING A QUESTIONNAIRE. A DISCLOSURE STATEMENT IS ALSO REQUIRED TO
BE COMPLETED ANNUALLY BY ALL INTERESTED PARTIES.

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION OF EXECUTIVE DIRECTOR IS APPROVED BY THE BOARD. THE
COMPENSATION IS BASED ON AN EVALUATION OF THE EXECUTIVE DIRECTOR'S
PERFORMANCE WHICH IS DONE ANNUALLY, AS WELL AS COMPARING THE SALARY WITH
OTHER NONPROFITS OF THE SAME SIZE IN THE AREA.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY
AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

2019 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	ART														
2	WETLANDS WATERCOLOR ART	10/30/03	L				400.				400.			0.	0.
	* 990 PAGE 10 TOTAL - ART						400.				400.	0.		0.	0.
	BLUE HERON SCULPTURE														
4	BLUE HERON SCULPTURE	12/31/03	L				8,677.				8,677.			0.	0.
	* 990 PAGE 10 TOTAL - BLUE HERON SCULPTURE						8,677.				8,677.	0.		0.	0.
	* 990 PAGE 10 TOTAL - BLUE HERON SCULPTURE						8,677.				8,677.	0.		0.	0.
	BONSAI														
	* 990 PAGE 10 TOTAL - BONSAI						0.				0.	0.		0.	0.
	* 990 PAGE 10 TOTAL - BONSAI						0.				0.	0.		0.	0.
	CIP														
8	BLDG IMP - VISITORS CENTER - PLANNING						6,575.				6,575.			0.	0.
	BLDG IMP - VISITORS CENTER - PLANNING						6,575.				6,575.			0.	0.
9	LND IMP - LANDSCAPING DESIGN	12/31/04	L				29,849.				29,849.			0.	0.
	LND IMP - LANDSCAPE DESIGN - NEW														
10	LND IMP - LANDSCAPE DESIGN - NEW	09/31/05	L				20,253.				20,253.			0.	0.
	LND IMP - LANDSCAPE DESIGN - NEW						20,253.				20,253.			0.	0.
11	LND IMP - SIGNAGE	09/30/05	L				13,135.				13,135.			0.	0.
	LND IMP - MICHAEL VAN V - LANDSCAPE DESIGN														
12	LND IMP - MICHAEL VAN V - LANDSCAPE DESIGN						75,936.				75,936.			0.	0.
	LND IMP - MICHAEL VAN V - LANDSCAPE DESIGN						75,936.				75,936.			0.	0.
13	LND IMP - ANDREWS, MILLER - SITE SURVEY						74,005.				74,005.			0.	0.
	LND IMP - ANDREWS, MILLER - SITE SURVEY						74,005.				74,005.			0.	0.
16	BLDG IMP - INTRO SPEC - CIVIL ENG DOC						1,050.				1,050.			0.	0.
	BLDG IMP - INTRO SPEC - CIVIL ENG DOC						1,050.				1,050.			0.	0.
17	BLDG IMP - JOHN HYNES - STRUCTURAL TEST BORING						11,895.				11,895.			0.	0.
	BLDG IMP - JOHN HYNES - STRUCTURAL TEST BORING						11,895.				11,895.			0.	0.
19	BLDG IMP - CAROLINE COUNTY SOIL SITE TEST						270.				270.			0.	0.
	BLDG IMP - CAROLINE COUNTY SOIL SITE TEST						270.				270.			0.	0.

928111 04-01-19

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2019 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
22	BLD IMP - CONSULTING LAKE FLATO ARCHITECTS		ARCHITECTS				38,132.				38,132.			0.	
187	IND IMP - ANDREWS, MILLER & BROWN		ARCHITECTS				9,028.				9,028.			0.	
194	ARCHITECTS AND DESIGN	09/20/10	L				64,388.				64,388.			0.	
204	ARCHITECTS AND DESIGN	12/31/11	L				63,340.				63,340.			0.	
210	ARCHITECTS - NEW VISITORS CENTER	03/31/12	L				73,927.				73,927.			0.	
220	EDIS VALUE ENGINEERING STUDY	03/06/13	L				37,404.				37,404.			0.	
221	DAVIS BOWEN REENGINEERING	12/26/13	L				42,287.				42,287.			0.	
222	LAKE/FLATO ARCHITECTURAL SERVICES VC		VC				61,504.				61,504.			0.	
229	LAKE/FLATO ARCHITECTURAL SERVICES VC		VC				28,780.				28,780.			0.	
230	DAVIS BOWEN FRIEDEL VALUE ENGINEERING REVISIONS		REVISIONS				12,658.				12,658.			0.	
231	DAVIS BOWEN FRIEDEL SOUTH ENTRANCE		L				2,073.				2,073.			0.	
	* 990 PAGE 10 TOTAL - CIP						666,489.				666,489.	0.		0.	0.
	EQUIPMENT														
24	TRACTOR	08/09/91	SL	20.00		16	15,538.				15,538.			0.	15,538.
25	GREENHOUSE EQUIPMENT	06/30/92	SL	20.00		16	2,187.				2,187.			0.	2,187.
26	C-250 CUTTER	06/30/93	SL	20.00		16	358.				358.			0.	358.
27	BOOKS - 1993	06/30/93	SL	20.00		16	1,086.				1,086.			0.	1,086.
29	KUBOTA TRACTOR	03/10/94	SL	20.00		16	4,300.				4,300.			0.	4,300.

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30	BOOKS	06/30/94	SL	20.00		16	1,135.				1,135.	1,135.		0.	1,135.
31	MOWER DECK BERCO	10/06/94	SL	20.00		16	1,450.				1,450.	1,450.		0.	1,450.
32	WOODEN STORAGE SHELVES	03/30/94	SL	20.00		16	910.				910.	910.		0.	910.
33	ROTARY MOWER	12/14/95	SL	20.00		16	2,449.				2,449.	2,449.		0.	2,449.
34	STORAGE SHED	06/01/95	SL	20.00		16	1,500.				1,500.	1,500.		0.	1,500.
35	BACK PAK BLOWER	12/09/96	SL	20.00		16	450.				450.	450.		0.	450.
36	AIR COMPRESSOR	08/09/97	SL	20.00		16	210.				210.	210.		0.	210.
40	MISCELLANEOUS EQUIPMENT	07/30/98	SL	20.00		16	440.				440.	440.		0.	440.
41	GROUPS EQUIPMENT	06/30/98	SL	20.00		16	4,415.				4,415.	4,415.		0.	4,415.
42	MISCELLANEOUS EQUIPMENT	06/30/87	SL	7.00		16	21,494.				21,494.	21,494.		0.	21,494.
43	FURNITURE - AUDITORIUM	02/07/00	SL	7.00		16	5,940.				5,940.	5,940.		0.	5,940.
44	FURNITURE - AUDITORIUM	03/13/00	SL	7.00		16	2,568.				2,568.	2,568.		0.	2,568.
45	FURNITURE - AUDITORIUM	04/04/00	SL	7.00		16	2,824.				2,824.	2,824.		0.	2,824.
46	STACKING CHAIR DOLLY	05/05/00	SL	7.00		16	241.				241.	241.		0.	241.
47	1997 CLUB CAR	06/27/00	SL	5.00		16	3,259.				3,259.	3,259.		0.	3,259.
48	TABLE FOR GREENHOUSE	03/08/00	SL	15.00		16	226.				226.	226.		0.	226.
49	PROJECTOR	12/28/01	SL	7.00		16	4,934.				4,934.	4,934.		0.	4,934.
50	BRACKET W/ ARM	02/21/01	SL	7.00		16	90.				90.	90.		0.	90.

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51	GOLF CART	05/20/02	SL	7.00		16	2,500.				2,500.	2,500.	0.	0.	2,500.
52	NURSERY/GROUND	11/27/02	SL	7.00		16	425.				425.	425.	0.	0.	425.
53	DISPLAY CASES	06/03/03	SL	7.00		16	778.				778.	778.	0.	0.	778.
54	PUMP - NURSERY	02/19/04	SL	5.00		16	1,819.				1,819.	1,819.	0.	0.	1,819.
176	SKID SPRAYER	07/31/08	SL	7.00		16	5,017.				5,017.	5,017.	0.	0.	5,017.
177	GENERATOR	08/21/08	SL	7.00		16	2,093.				2,093.	2,093.	0.	0.	2,093.
185	CRATE & BARREL OUTDOOR FURNITURE	11/09	SL	7.00		16	1,061.				1,061.	1,061.	0.	0.	1,061.
189	KUBOTA 26 HP 60" PRO COMMERCIAL TRACTOR	12/08	SL	20.00		16	11,758.				11,758.	5,831.	588.	588.	6,419.
211	SKID LOADER	02/08/12	SL	7.00		16	24,995.				24,995.	24,699.	296.	296.	24,995.
212	AT3 18.5 HP LAWN MOWER	03/16/12	SL	7.00		16	3,934.				3,934.	3,794.	140.	140.	3,934.
213	(5) 6' CAST BENCHES	10/17/12	SL	7.00		16	6,983.				6,983.	6,154.	829.	829.	6,983.
214	(10) BIKE RACKS	10/17/12	SL	7.00		16	3,340.				3,340.	2,942.	398.	398.	3,340.
225	2009 EZ-GO TXT ELECTRIC SN 2163824	08/27/13	SL	7.00		16	3,000.				3,000.	2,324.	429.	429.	2,753.
226	(6) PICNIC TABLES	06/03/13	SL	7.00		16	18,763.				18,763.	14,964.	2,680.	2,680.	17,644.
227	(1) BENCH	08/13/13	SL	7.00		16	2,518.				2,518.	1,950.	360.	360.	2,310.
232	6' CAST BENCH (MARGON GLOVER)	10/08/14	SL	7.00		16	1,610.				1,610.	978.	230.	230.	1,208.
233	72" GRAPPLE BUCKET	03/28/14	SL	7.00		16	2,765.				2,765.	1,876.	395.	395.	2,271.
242	PICNIC TABLES	07/27/18	SL	7.00		16	1,245.				1,245.	74.	178.	178.	252.

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	* 990 PAGE 10 TOTAL - EQUIPMENT						172,608.				172,608.	157,283.		6,523.	163,806.
	* 990 PAGE 10 TOTAL - EQUIPMENT														
	L/H BUILDING IMPROVEMENTS														
56	MAIN BUILDING IMPROVEMENTS	04/06/99	SL	15.00		16	45,680.				45,680.	45,680.		0.	45,680.
57	LUMBER FOR SHELVING	02/17/00	SL	15.00		16	67.				67.	63.		0.	63.
58	DEPOSIT ON 28X44 BUILDING	03/02/00	SL	15.00		16	2,500.				2,500.	2,500.		0.	2,500.
59	BALANCE IN FULL	03/02/00	SL	15.00		16	10,275.				10,275.	10,275.		0.	10,275.
60	WINDOWS FOR SHED	03/13/00	SL	15.00		16	15.				15.	15.		0.	15.
61	ELECTRIC FOR GREENHOUSE	03/21/00	SL	15.00		16	900.				900.	900.		0.	900.
62	PART & LABOR - PROPANE GREENHOUSE	05/02/00	SL	15.00		16	299.				299.	299.		0.	299.
63	ELECTRIC TO GREENHOUSE	05/02/00	SL	15.00		16	900.				900.	900.		0.	900.
64	ELECTRIC TO GREENHOUSE	06/01/00	SL	15.00		16	1,500.				1,500.	1,500.		0.	1,500.
65	GREENHOUSE - TRANS FROM CIP	06/01/00	SL	15.00		16	16,261.				16,261.	16,261.		0.	16,261.
67	BUILT IN FURNITURE	04/25/01	SL	15.00		16	1,371.				1,371.	1,367.		0.	1,367.
68	ELLIE'S BOOKSHELVES	04/17/02	SL	15.00		16	704.				704.	704.		0.	704.
69	IMPROVEMENTS	05/28/02	SL	15.00		16	1,840.				1,840.	1,840.		0.	1,840.
71	A/C REPAIRS - AUDITORIUM	04/25/02	SL	7.00		16	6,548.				6,548.	6,548.		0.	6,548.
72	HEAT PUMP	07/11/03	SL	7.00		16	5,275.				5,275.	5,275.		0.	5,275.
73	NURSERY ADDITION/OFFICE/BATH ROOM/WORKSTATION	06/30/04	SL	20.00		16	67,297.				67,297.	47,110.		3,365.	50,475.

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74	CONSTRUCTION WORK ON NURSERY BLDG	01/05	SL	20.00		16	6,000.				6,000.	4,200.		300.	4,500.
75	ELECTRICAL WORK ON NURSERY BLDG	01/05	SL	20.00		16	2,718.				2,718.	1,904.		136.	2,040.
76	PLUMBING FOR NURSERY BATHROOM	01/01/05	SL	20.00		16	1,657.				1,657.	1,162.		83.	1,245.
77	WINDOW & THRESHOLD FOR NURSERY	01/05	SL	15.00		16	1,000.				1,000.	926.		67.	993.
78	ELECTRIC WORK FOR NURSERY OFFICE	01/14/05	SL	15.00		16	7,460.				7,460.	6,876.		497.	7,373.
79	SIGNS AT EXISTING VISITORS CENTER	01/05	SL	5.00		16	21,050.				21,050.	21,050.		0.	21,050.
80	DOORS FOR EXISTING VISITORS CENTER	08/05	SL	15.00		16	1,890.				1,890.	1,754.		126.	1,880.
81	DOORS FOR EXISTING VISITORS CENTER	01/05	SL	15.00		16	2,907.				2,907.	2,699.		194.	2,893.
82	BLINDS FOR WINDOWS IN EXISTING VISITORS CENTER	01/05	CTF	15.00		16	2,009.				2,009.	1,842.		134.	1,976.
83	HVAC FOR NURSERY	02/28/05	SL	7.00		16	6,855.				6,855.	6,855.		0.	6,855.
84	BUILT-IN TELEVISION CABINET	04/08/05	SL	15.00		16	1,500.				1,500.	1,375.		100.	1,475.
85	PHONE LINES IN NURSERY	04/18/05	SL	15.00		16	5,569.				5,569.	5,071.		371.	5,442.
86	NEW ROOF ON EXISTING VISITORS CENTER	01/05	SL	15.00		16	51,928.				51,928.	45,583.		3,462.	49,045.
87	BOOKSHELVES	01/15/07	SL	7.00		16	2,514.				2,514.	2,514.		0.	2,514.
186	VISITOR CENTER BANNERS	09/25/09	SL	7.00		16	1,671.				1,671.	1,671.		0.	1,671.
196	GOAT BARN	12/01/11	SL	20.00		16	4,646.				4,646.	1,643.		232.	1,875.
197	GOAT ENCLOSURE FENCING	12/17/11	SL	20.00		16	5,134.				5,134.	1,799.		257.	2,056.
198	GUTTERS FOR RAIN BARRELS AT NURSERY	01/11	SL	15.00		16	3,565.				3,565.	1,785.		238.	2,023.

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205	BRIDGE RESTORATION EAST WETLANDS BRIDGE			15.00		16	12,135.				12,135.	5,124.		809.	5,933.
	BRIDGE RESTORATION EAST WETLANDS BRIDGE		SL	15.00		16	42,750.				42,750.	16,863.		2,850.	19,713.
206	NEW VISITORS CENTER BRIDGE	02/14/13	SL	15.00		16	61,900.				61,900.	24,418.		4,127.	28,545.
218	ENTRANCE BRIDGE RAILINGS	02/14/13	SL	15.00		16	9,450.				9,450.	3,728.		630.	4,358.
219	ENTRANCE BRIDGE HANDRAIL	02/14/13	SL	15.00		16	12,305.				12,305.	1,230.		615.	1,845.
228	CAPITALIZED INTEREST	12/31/13	SL	20.00		16	5,899.				5,899.	590.		295.	885.
234	CAPITALIZED INTEREST	12/31/14	SL	20.00		16	36,672.				36,672.	6,724.		2,445.	9,169.
235	ARBOR	03/31/16	SL	15.00		16	132,949.				132,949.	14,956.		6,647.	21,603.
236	PAVILION	10/11/16	SL	20.00		16	1,250.				1,250.	358.		179.	537.
237	GNOME HOUSE	12/08/16	SL	7.00		16	5,504.				5,504.	734.		367.	1,101.
239	FRONT ENTRANCE GATES	12/27/16	SL	15.00		16	13,042.				13,042.	290.		869.	1,159.
240	BRIDGE REPAIR (WEEMS)	08/31/18	SL	15.00		16	49,930.				49,930.			832.	832.
247	KITCHEN	09/30/19	SL	15.00		16	675,291.				675,291.	326,961.		30,227.	357,188.
	* 990 PAGE 10 TOTAL - L/H BUILDING IMPROVEMENTS														
	* 990 PAGE 10 TOTAL - L/H BUILDING IMPROVEMENTS														
	LAND IMPROVEMENTS														
14	LAND IMP - MCMULLAN - WOOD BRIDGES ENG DESIGN		DESIGN	15.00		16	7,837.				7,837.	1,044.		522.	1,566.
	LAND IMP - MCMULLAN - WOOD BRIDGES ENG DESIGN		DESIGN	15.00		16	36,603.				36,603.	4,880.		2,440.	7,320.
15	LAND IMP - CLOUD GESHAN - SIGNAGE		DESIGN	15.00		16	418,610.				418,610.	55,814.		27,907.	83,721.
	LAND IMP - CLOUD GESHAN - SIGNAGE		DESIGN	15.00		16	64,989.				64,989.	8,666.		4,333.	12,999.
18	BLDNG IMP - LAKE/FLATO - ARCHITECTURAL DESIGNS		DESIGN	15.00		16									
	BLDNG IMP - LAKE/FLATO - ARCHITECTURAL DESIGNS		DESIGN	15.00		16									
20	LAND IMP - SIGNAGE	09/28/07	SL	15.00		16									

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21	LND IMP - ARRAY SYSTEM	03/16/07	SL	15.00		16	2,520.				2,520.	336.		168.	504.
89	GREENHOUSE	11/01/93	SL	20.00		16	2,895.				2,895.	2,895.		0.	2,895.
93	NEW IRRIGATION LINES	03/23/00	SL	15.00		16	3,128.				3,128.	3,128.		0.	3,128.
94	IRRIGATION MATERIAL	04/24/00	SL	15.00		16	1,269.				1,269.	1,269.		0.	1,269.
95	LUMBER FOR AA SHOP	06/23/00	SL	15.00		16	472.				472.	468.		0.	468.
96	INV 12038	12/29/00	SL	15.00		16	700.				700.	700.		0.	700.
97	GREENHOUSE CONTENTS	02/15/00	SL	15.00		16	1,356.				1,356.	1,353.		0.	1,353.
98	GREENHOUSE CONTENTS	02/18/00	SL	15.00		16	319.				319.	319.		0.	319.
99	GREENHOUSE CONTENTS	02/23/00	SL	15.00		16	847.				847.	843.		0.	843.
100	GREENHOUSE CONTENTS	03/09/00	SL	15.00		16	2,108.				2,108.	2,108.		0.	2,108.
101	MATERIAL FOR PERGOLA	03/31/00	SL	15.00		16	834.				834.	834.		0.	834.
102	ACCOUNT #467862	05/15/00	SL	15.00		16	299.				299.	299.		0.	299.
103	IRRIGATION SYSTEM	09/26/01	SL	15.00		16	2,422.				2,422.	2,418.		0.	2,418.
104	LANDSCAPING MAIN BUILDING	09/12/01	SL	15.00		16	10,754.				10,754.	10,754.		0.	10,754.
105	GARDEN SIGNS	09/12/01	SL	15.00		16	1,813.				1,813.	1,778.		0.	1,778.
106	DESIGN SURVEY	09/19/02	SL	15.00		16	689.				689.	689.		0.	689.
107	WEED CONTROL	11/01/02	SL	15.00		16	136.				136.	136.		0.	136.
108	NURSERY	11/11/02	SL	15.00		16	400.				400.	400.		0.	400.

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109	RANGINE CORP.	12/15/02	SL	15.00		16	289.				289.	289.		0.	289.
110	BOARDWALK	10/07/02	SL	15.00		16	4,500.				4,500.	4,500.		0.	4,500.
111	GRASS PLANTING	07/29/02	SL	15.00		16	200.				200.	197.		0.	197.
112	LAND IMP - BOARDWALK	01/01/06	SL	15.00		16	8,759.				8,759.	7,592.		584.	8,176.
113	LAND IMPROVEMENTS	03/04/03	SL	15.00		16	2,970.				2,970.	2,970.		0.	2,970.
114	SIGNS	10/23/03	SL	15.00		16	3,938.				3,938.	3,938.		0.	3,938.
115	BENCH	04/08/04	SL	7.00		16	1,143.				1,143.	1,143.		0.	1,143.
116	BOARDWALK	09/30/04	SL	15.00		16	81,258.				81,258.	77,193.		4,065.	81,258.
117	LAND IMP - LANG MEMORIAL BENCH	03/21/06	SL	7.00		16	2,150.				2,150.	2,150.		0.	2,150.
118	100 AMP ELECTRICAL BENCH	03/14/05	SL	15.00		16	2,095.				2,095.	1,936.		140.	2,076.
119	ELECTRICAL SUPPLY LINES	01/04/05	SL	15.00		16	10,729.				10,729.	10,011.		715.	10,726.
120	MEMORIAL BENCHES	07/18/05	SL	7.00		16	4,550.				4,550.	4,550.		0.	4,550.
178	BENCH	10/09/08	SL	7.00		16	2,150.				2,150.	2,150.		0.	2,150.
179	LAND IMP - SITE DEVELOPMENT/SIGNAGE	08/05/08	SL	15.00		16	34,723.				34,723.	4,630.		2,315.	6,945.
183	COMPOST BIN INSTALLATION	08/19/09	SL	15.00		16	6,440.				6,440.	4,004.		429.	4,433.
184	GREENHOUSE IRRIGATION/INJECTION FEEDER	08/05/08	SL	15.00		16	11,282.				11,282.	6,956.		752.	7,708.
188	LAND IMP - M. VAN WALKEN BIKE PATH REDSIGN	08/05/08	SL	15.00		16	7,323.				7,323.	976.		488.	1,464.
190	WALKING PATH SIGNAGE DESIGN	12/31/09	SL	15.00		16	11,750.				11,750.	1,566.		783.	2,349.

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(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
193	MAP MOUNT	03/17/10	SL	7.00		16	450.				450.	16.		0.	16.
195	WALKING PATH SIGNAGE DESIGN	12/31/10	SL	15.00		16	94,671.				94,671.	12,622.		6,311.	18,933.
199	RAIN GARDEN INTERPRETIVE SIGN	11/22/11	SL	15.00		16	9,940.				9,940.	4,696.		663.	5,359.
200	ENTRANCE SIGNAGE	07/13/11	SL	15.00		16	1,159.				1,159.	539.		77.	616.
201	TRAIL SIGNAGE	04/28/11	SL	15.00		16	4,849.				4,849.	2,477.		323.	2,800.
207	LANDSCAPING - FRONT ENTRANCE VISTORS AND SOUTH PARKING AREAS														
207	LANDSCAPING - FRONT ENTRANCE VISTORS AND SOUTH PARKING AREAS, 148.										71,148.	28,853.		4,743.	33,596.
208	NEW IRRIGATION WELL, PUMPS AND LINES - ENTRANCE AND SOUTH PARKING AREA										25,705.	10,570.		1,714.	12,284.
208	NEW IRRIGATION WELL, PUMPS AND LINES - ENTRANCE AND SOUTH PARKING AREA														
209	CONSTRUCTION/EXCAVATION - VISTORS AND SOUTH PARKING AREAS										124,130.	51,029.		8,275.	59,304.
209	CONSTRUCTION/EXCAVATION - VISTORS AND SOUTH PARKING AREAS, 124,130.														
215	ENTRANCE SIGNAGE	05/29/13	SL	15.00		16	6,000.				6,000.	2,233.		400.	2,633.
216	ENTRANCE AND SOUTH ENTRANCE SIGNS	09/29/13	SL	15.00		16	63,191.				63,191.	23,522.		4,213.	27,735.
217	UGRR SIGNAGE	05/15/13	SL	15.00		16	1,366.				1,366.	516.		91.	607.
238	TRAIL CONSTRUCTION	09/28/16	SL	15.00		16	41,390.				41,390.	6,208.		2,759.	8,967.
241	PARKING LOT ALIVE LANDSCAPE ARCHITECT		SL	15.00		16	14,742.				14,742.			491.	491.
243	PARKING LOT ALIVE	06/25/19	SL	15.00		16	292,789.				292,789.			9,760.	9,760.
244	SHA TRAIL BRIDGES	03/15/19	SL	15.00		16	24,876.				24,876.			1,382.	1,382.
245	LOW FENCE	06/07/19	SL	15.00		16	3,460.				3,460.			135.	135.
246	MEADOW PLATFORM	10/16/19	SL	15.00		16	66,500.				66,500.			739.	739.
	* 990 PAGE 10 TOTAL - LAND IMPROVEMENTS														
	* 990 PAGE 10 TOTAL - LAND IMPROVEMENTS						1,603,615.				1,603,615.	381,163.		87,717.	468,880.

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction in Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	OFFICE EQUIPMENT														
123	PHONE UPGRADE	10/02/97	SL	7.00		16	1,931.				1,931.	1,931.		0.	1,931.
124	FIREPROOF FILING CABINET	06/23/97	SL	7.00		16	886.				886.	886.		0.	886.
126	BOOKCASES	03/18/97	SL	7.00		16	520.				520.	520.		0.	520.
127	BOOKCASE, ETC	05/27/97	SL	7.00		16	260.				260.	260.		0.	260.
128	COMPUTER HARDWARE	12/29/97	SL	5.00		16	797.				797.	797.		0.	797.
129	FIRE KING FILE CABINET	04/16/99	SL	7.00		16	1,390.				1,390.	1,390.		0.	1,390.
130	50% OF PHONE SYSTEM INSTALLATION	10/31/00	SL	5.00		16	1,434.				1,434.	1,434.		0.	1,434.
131	50% OF PHONE SYSTEM INSTALLATION	10/01/00	SL	5.00		16	1,434.				1,434.	1,434.		0.	1,434.
132	DIGITAL CAMERA	12/31/01	SL	7.00		16	2,009.				2,009.	2,009.		0.	2,009.
134	BOOKSHELVES	03/16/01	SL	7.00		16	48.				48.	48.		0.	48.
135	FURNITURE	04/13/01	SL	7.00		16	1,034.				1,034.	1,034.		0.	1,034.
136	FURNITURE	05/08/01	SL	7.00		16	575.				575.	575.		0.	575.
137	FURNITURE	03/01/01	SL	7.00		16	75.				75.	75.		0.	75.
138	COMPUTERS	08/15/02	SL	5.00		16	2,432.				2,432.	2,432.		0.	2,432.
140	FILE CABINETS	02/27/02	SL	7.00		16	670.				670.	670.		0.	670.
141	SHELVES	03/13/02	SL	7.00		16	400.				400.	400.		0.	400.
145	EPSON PRINTER	02/15/03	SL	5.00		16	394.				394.	394.		0.	394.

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(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2019 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
146	HERBARIUM CASES	01/15/03	SL	7.00		16	200.				200.	200.		0.	200.
148	DELL COMPUTER	10/22/04	SL	5.00		16	898.				898.	898.		0.	898.
149	COMPUTER - DELL	12/15/04	SL	5.00		16	974.				974.	974.		0.	974.
150	TELEPHONE SYSTEM	02/14/04	SL	5.00		16	4,215.				4,215.	4,215.		0.	4,215.
151	SLIDE PROJECTOR	04/02/04	SL	5.00		16	1,875.				1,875.	1,875.		0.	1,875.
152	NURSERY PHONE SYSTEM	05/31/05	SL	5.00		16	5,249.				5,249.	5,249.		0.	5,249.
153	DELL NOTEBOOK COMPUTER	03/15/06	SL	5.00		16	2,782.				2,782.	2,782.		0.	2,782.
154	DELL COMPUTER & PRINTER	09/21/06	SL	5.00		16	3,981.				3,981.	3,981.		0.	3,981.
155	SPECIALTY TAG THERMAL PRINTER	02/01/06	SL	5.00		16	3,083.				3,083.	3,083.		0.	3,083.
180	FILE CABINETS (3)	10/21/09	SL	7.00		16	1,314.				1,314.	1,314.		0.	1,314.
181	DELL LATITUDE E6500 LAPTOP - ELLIE	04/05/09	SL	5.00		16	4,006.				4,006.	4,006.		0.	4,006.
182	DELL LATITUDE E6500 LAPTOP - KATE	08/08/09	SL	5.00		16	1,548.				1,548.	1,548.		0.	1,548.
191	COMPUTER SERVER - JOANNE AND GINNA	06/15/10	SL	5.00		16	1,966.				1,966.	1,966.		0.	1,966.
192	LAPTOP - L TISON	03/03/11	SL	5.00		16	2,136.				2,136.	2,136.		0.	2,136.
203	DELL PE T610 SERVER	08/07/13	SL	5.00		16	1,869.				1,869.	1,869.		0.	1,869.
224	DELL LATITUDE 3540BTX LAPTOP	12/23/13	SL	5.00		16	635.				635.	635.		0.	635.
	* 990 PAGE 10 TOTAL - OFFICE EQUIPMENT						56,469.				56,469.	56,469.		0.	56,469.

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(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	SOFTWARE														
158	ED. SOFTWARE	11/26/97	SL	3.00		16	658.				658.	658.	0.	0.	658.
159	ED. SOFTWARE	12/10/97	SL	3.00		16	133.				133.	133.	0.	0.	133.
160	COMPUTER SOFTWARE	01/23/97	SL	3.00		16	100.				100.	100.	0.	0.	100.
161	ED. SOFTWARE	11/18/97	SL	3.00		16	416.				416.	416.	0.	0.	416.
163	SOFTWARE	04/15/02	SL	3.00		16	2,030.				2,030.	2,030.	0.	0.	2,030.
164	MISC SOFTWARE	06/30/03	SL	3.00		16	2,755.				2,755.	2,755.	0.	0.	2,755.
166	INVASIVE PLANT CONTROL CUSTOMIZED SOFTWARE		SOFTWARE	3.00		16	6,492.				6,492.	6,492.	0.	0.	6,492.
167	EDWARD SARGENT PUBLIC ACCESS SOFTWARE		SOFTWARE	3.00		16	3,424.				3,424.	3,424.	0.	0.	3,424.
168	EDWARD SARGENT PUBLIC ACCESS INTERNET SOFTWARE		SOFTWARE	3.00		16	2,975.				2,975.	2,975.	0.	0.	2,975.
169	RAISERS EDGE SOFTWARE	01/09/07	SL	3.00		16	2,910.				2,910.	2,910.	0.	0.	2,910.
170	GREEN VENUES SOFTWARE	06/03/07	SL	3.00		16	2,100.				2,100.	2,100.	0.	0.	2,100.
202	QUICKBOOKS POS SOFTWARE AND HARDWARE		SOFTWARE	3.00		16	4,330.				4,330.	4,330.	0.	0.	4,330.
	* 990 PAGE 10 TOTAL - SOFTWARE						28,323.				28,323.	28,323.	0.	0.	28,323.
	* 990 PAGE 10 TOTAL - SOFTWARE						5,103.				5,103.	5,103.	0.	0.	5,103.
172	TOYOTA TRUCK	07/26/94	SL	5.00		16	15,629.				15,629.	15,629.	0.	0.	15,629.
173	1999 FORD F150	06/23/99	SL	5.00		16	2,591.				2,591.	2,591.	0.	0.	2,591.
174	TOYOTA PAINT JOB	02/21/02	SL	5.00		16	10,500.				10,500.	10,500.	0.	0.	10,500.
175	RV900W; UTILITY VEHICLE	08/02/07	SL	5.00		16									

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(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	* 990 PAGE 10 TOTAL - SOFTWARE						33,823.				33,823.	33,823.		0.	33,823.
	* 990 PAGE 10 TOTAL - SOFTWARE						3,245,695.				3,245,695.	984,022.		124,467.	1,108,489.
	* GRAND TOTAL 990 PAGE 10 DEPR														
	* GRAND TOTAL 990 PAGE 10 DEPR														
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						2,793,398.			0.	2,793,398.	984,022.			1,095,150.
	ACQUISITIONS						452,297.			0.	452,297.	0.			13,339.
	DISPOSITIONS/RETIRED						0.			0.	0.	0.			0.
	ENDING BALANCE						3,245,695.			0.	3,245,695.	984,022.			1,108,489.
	ENDING ACCUM DEPR														
	ENDING BOOK VALUE														

928111 04-01-19 (D) - Asset disposed * ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

Form **990-T**

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No. 1545-0047

2019

For calendar year 2019 or other tax year beginning _____, and ending _____

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Department of the Treasury
Internal Revenue Service

Open to Public Inspection for
501(c)(3) Organizations Only

A <input type="checkbox"/> Check box if address changed	Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.)	D Employer identification number (Employees' trust, see instructions.)
B Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)	Print or Type ADKINS ARBORETUM, LTD. Number, street, and room or suite no. If a P.O. box, see instructions. 12610 EVELAND ROAD City or town, state or province, country, and ZIP or foreign postal code RIDGELY, MD 21660	52-1163405 E Unrelated business activity code (See instructions.) 453220
C Book value of all assets at end of year 5,153,242.	F Group exemption number (See instructions.)	G Check organization type <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust

H Enter the number of the organization's unrelated trades or businesses. 1 Describe the only (or first) unrelated trade or business here **VARIOUS GIFT SHOP ITEMS**. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidary controlled group? Yes No
If "Yes," enter the name and identifying number of the parent corporation.

J The books are in care of **THE ORGANIZATION** Telephone number **410-634-2847**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales <u>31,008.</u>			
b	Less returns and allowances			
c	Balance	31,008.		
2	Cost of goods sold (Schedule A, line 7)	22,022.		
3	Gross profit. Subtract line 2 from line 1c	8,986.		8,986.
4a	Capital gain net income (attach Schedule D)			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			
c	Capital loss deduction for trusts			
5	Income (loss) from a partnership or an S corporation (attach statement)			
6	Rent income (Schedule C)			
7	Unrelated debt-financed income (Schedule E)			
8	Interest, annuities, royalties, and rents from a controlled organization (Schedule F)			
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)			
10	Exploited exempt activity income (Schedule I)			
11	Advertising income (Schedule J)			
12	Other income (See instructions; attach schedule)			
13	Total. Combine lines 3 through 12	8,986.		8,986.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)
(Deductions must be directly connected with the unrelated business income.)

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	19	
20	Depreciation (attach Form 4562)	20	
21	Less depreciation claimed on Schedule A and elsewhere on return	21a	
22	Depletion	22	
23	Contributions to deferred compensation plans	23	
24	Employee benefit programs	24	
25	Excess exempt expenses (Schedule I)	25	
26	Excess readership costs (Schedule J)	26	
27	Other deductions (attach schedule)	27	
28	Total deductions. Add lines 14 through 27	28	0.
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	8,986.
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) SEE STATEMENT 1	30	0.
31	Unrelated business taxable income. Subtract line 30 from line 29	31	8,986.

Part III Total Unrelated Business Taxable Income

Table with 2 columns: Description and Amount. Rows include: 32 Total of unrelated business taxable income... 8,986.; 33 Amounts paid for disallowed fringes; 34 Charitable contributions... 0.; 35 Total unrelated business taxable income before pre-2018 NOLs... 8,986.; 36 Deduction for net operating loss... STMT 2 8,986.; 37 Total of unrelated business taxable income before specific deduction... 37; 38 Specific deduction... 1,000.; 39 Unrelated business taxable income... 0.

Part IV Tax Computation

Table with 2 columns: Description and Amount. Rows include: 40 Organizations Taxable as Corporations... 0.; 41 Trusts Taxable at Trust Rates... 41; 42 Proxy tax... 42; 43 Alternative minimum tax... 43; 44 Tax on Noncompliant Facility Income... 44; 45 Total... 0.

Part V Tax and Payments

Table with 2 columns: Description and Amount. Rows include: 46a Foreign tax credit... 46a; 46b Other credits... 46b; 46c General business credit... 46c; 46d Credit for prior year minimum tax... 46d; 46e Total credits... 46e; 47 Subtract line 46e from line 45... 0.; 48 Other taxes... 48; 49 Total tax... 0.; 50 2019 net 965 tax liability... 0.; 51a Payments... 51a; 51b 2019 estimated tax payments... 51b; 51c Tax deposited with Form 8868... 51c; 51d Foreign organizations... 51d; 51e Backup withholding... 51e; 51f Credit for small employer health insurance... 51f; 51g Other credits, adjustments, and payments... 51g; 52 Total payments... 52; 53 Estimated tax penalty... 53; 54 Tax due... 54; 55 Overpayment... 55; 56 Enter the amount of tax-exempt interest... 56

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

Table with 2 columns: Question and Yes/No. Rows include: 57 At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority over a financial account... X; 58 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?... X; 59 Enter the amount of tax-exempt interest received or accrued during the tax year \$

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

Sign Here: Signature of officer: EXECUTIVE DIRECTOR, Date, Title. May the IRS discuss this return with the preparer shown below (see instructions)? [X] Yes [] No

Paid Preparer Use Only: Print/Type preparer's name: LISA K. DURHAM, CPA; Preparer's signature: LISA K. DURHAM, CPA; Date: 09/18/20; Check self-employed: [] if PTIN: P00749970; Firm's name: ACCOUNTING STRATEGIES GROUP, LLC; Firm's EIN: 26-3654652; Firm's address: PO BOX 369, PRESTON, MD 21655; Phone no.: 410-673-1384

Schedule A - Cost of Goods Sold. Enter method of inventory valuation **N/A**

1	Inventory at beginning of year	1	0.	6	Inventory at end of year	6	0.				
2	Purchases	2	14,688.	7	Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	22,022.				
3	Cost of labor	3				<table border="1"> <tr> <td>Yes</td> <td>No</td> </tr> <tr> <td></td> <td>X</td> </tr> </table>		Yes	No		X
Yes	No										
	X										
4a	Additional section 263A costs (attach schedule)	4a									
b	Other costs (attach schedule) **	4b	7,334.								
5	Total. Add lines 1 through 4b	5	22,022.								

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property

(1)	
(2)	
(3)	
(4)	

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	0.	Total 0.

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)

(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) 0.

Schedule E - Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property		
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)	
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals			Enter here and on page 1, Part I, line 7, column (A) 0.	Enter here and on page 1, Part I, line 7, column (B) 0.
Total dividends-received deductions included in column 8			0.	0.

** SEE STATEMENT 3

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					
Nonexempt Controlled Organizations					
7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10	
(1)					
(2)					
(3)					
(4)					
			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).	
Totals			0.	0.	

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
		Enter here and on page 1, Part I, line 9, column (A).		Enter here and on page 1, Part I, line 9, column (B).
Totals		0.		0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
		Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).			Enter here and on page 1, Part II, line 25.
Totals		0.	0.			0.

Schedule J - Advertising Income (see instructions)

Part I - Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))		0.	0.			0.

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
Totals, Part II (lines 1-5)	0.	0.				0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			0.

COPY

FORM 990-T		NET OPERATING LOSS DEDUCTION		STATEMENT 1
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/18	8,239.	0.	8,239.	8,239.
NOL CARRYOVER AVAILABLE THIS YEAR			8,239.	8,239.

FORM 990-T		NET OPERATING LOSS DEDUCTION		STATEMENT 2
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/13	3,375.	710.	2,665.	2,665.
12/31/14	3,263.	0.	3,263.	3,263.
12/31/15	6,237.	0.	6,237.	6,237.
12/31/17	3,521.	0.	3,521.	3,521.
NOL CARRYOVER AVAILABLE THIS YEAR			15,686.	15,686.

FORM 990-T		COST OF GOODS SOLD - OTHER COSTS		STATEMENT 3
DESCRIPTION				AMOUNT
OVERHEAD ALLOCATION				7,334.
TOTAL TO FORM 990-T, SCHEDULE A, LINE 4B				7,334.

Depreciation and Amortization (Including Information on Listed Property) 990

2019

Attachment Sequence No. 179

Department of the Treasury Internal Revenue Service (990)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

Name(s) shown on return

Business or activity to which this form relates

Identifying number

ADKINS ARBORETUM, LTD.

FORM 990 PAGE 10

52-1163405

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

Table with 5 columns: Line number, Description, and Amount. Includes lines 1-13 for Section 179 election.

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.)

Table with 3 columns: Line number, Description, and Amount. Includes lines 14-16 for Special Depreciation Allowance.

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

Table with 2 columns: Line number, Description, and Amount. Includes lines 17-18 for MACRS deductions.

Section B - Assets Placed in Service During 2019 Tax Year Using the General Depreciation System

Table with 7 columns: (a) Classification of property, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Includes rows 19a-i.

Section C - Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System

Table with 6 columns: Line number, Description, (b) Month and year placed in service, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Includes rows 20a-d.

Part IV Summary (See instructions.)

Table with 3 columns: Line number, Description, and Amount. Includes lines 21-23 for summary.

Part V Listed Property (include automobiles, certain other vehicles, certain aircraft, 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 - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost
--	-------------------------------	---	----------------------------	--	------------------------	--------------------------	-------------------------------	---------------------------------

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 25

26 Property used more than 50% in a qualified business use:
: : %
: : %
: : %

27 Property used 50% or less in a qualified business use:
: : % S/L -
: : % S/L -
: : % S/L -

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28

29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
30 Total business/investment miles driven during the year (don't include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
-----------------------------	---------------------------------	---------------------------	---------------------	--	-----------------------------------

42 Amortization of costs that begins during your 2019 tax year:
: :
: :

43 Amortization of costs that began before your 2019 tax year 43

44 Total. Add amounts in column (f). See the instructions for where to report 44

Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

- ▶ File a separate application for each return.
- ▶ Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. ADKINS ARBORETUM, LTD.	Taxpayer identification number (TIN) 52-1163405
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 12610 EVELAND ROAD	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. RIDGELY, MD 21660	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

THE ORGANIZATION

- The books are in the care of ▶ **12610 EVELAND ROAD - RIDGELY, MD 21660**
Telephone No. ▶ **410-634-2847** Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 16, 2020**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year **2019** or
 ▶ tax year beginning _____, and ending _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. ADKINS ARBORETUM, LTD.	Taxpayer identification number (TIN) 52-1163405
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 12610 EVELAND ROAD	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. RIDGELY, MD 21660	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 7

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

THE ORGANIZATION

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Telephone No. ▶ **410-634-2847** Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

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▶ calendar year **2019** or
▶ tax year beginning _____ , and ending _____ .

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

2020 DEPRECIATION AND AMORTIZATION REPORT

-- NEXT YEAR FEDERAL -- ADKINS ARBORETUM, LTD.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
	ART								
2	WETLANDS WATERCOLOR ART	103003L			400.		400.		0.
	* 990 PAGE 10 TOTAL - ART				400.		400.	0.	0.
	BLUE HERON SCULPTURE								
4	BLUE HERON SCULPTURE	123103L			8,677.		8,677.		0.
	* 990 PAGE 10 TOTAL - BLUE HERON SCULPTURE				8,677.		8,677.	0.	0.
	BONSAI								
	CIP								
	BLDG IMP - VISITORS CENTER -								
8	PLANNING	123104L			6,575.		6,575.		0.
9	LND IMP - LANDSCAPING DESIGN	123104L			29,849.		29,849.		0.
10	LND IMP - LANDSCAPE DESIGN - NEW	123105L			20,253.		20,253.		0.
11	LND IMP - SIGNAGE	093005L			13,135.		13,135.		0.
12	LND IMP - MICHAEL VAN V - LANDSCAPE DESIGN	123106L			75,936.		75,936.		0.
	LND IMP - ANDREWS, MILLER - SITE								
13	SURVEY	123106L			74,005.		74,005.		0.
	BLDG IMP - INTRO SPEC - CIVIL ENG								
16	DOCS	123106L			1,050.		1,050.		0.
	BLDG IMP - JOHN HYNES - STRUCTURAL								
17	TEST BORING	123106L			11,895.		11,895.		0.
	BLDG IMP - CAROLINE COUNTY - SOIL								
19	SITE TEST	013006L			270.		270.		0.
	BLD IMP - CONSULTING LAKE FLATO								
22	ARCHITECTS	121307L			38,132.		38,132.		0.
187	LND IMP - ANDREWS, MILLER & RW BROWN	091709L			9,028.		9,028.		0.
194	ARCHITECTS AND DESIGN	092010L			64,388.		64,388.		0.
204	ARCHITECTS AND DESIGN	123111L			63,340.		63,340.		0.
210	ARCHITECTS - NEW VISITORS CENTER	123112L			73,927.		73,927.		0.
220	EDIS VALUE ENGINEERING STUDY	030613L			37,404.		37,404.		0.
221	DAVIS BOWEN REENGINEERING	122613L			42,287.		42,287.		0.
222	LAKE/FLATO ARCHITECTURAL SERVICES VC	081213L			61,504.		61,504.		0.
229	LAKE/FLATO ARCHITECTURAL SERVICES VC	091814L			28,780.		28,780.		0.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2020 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL -

ADKINS ARBORETUM, LTD.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
	DAVIS BOWEN FRIEDEL VALUE								
230	ENGINEERING REVISIONS	080114L			12,658.		12,658.		0.
231	DAVIS BOWEN FRIEDEL SOUTH ENTRANCE	123014L			2,073.		2,073.		0.
	* 990 PAGE 10 TOTAL - CIP EQUIPMENT				666,489.		666,489.	0.	0.
24	TRACTOR	080991SL	SL	20.00	15,538.		15,538.	15,538.	0.
25	GREENHOUSE EQUIPMENT	063092SL	SL	20.00	2,187.		2,187.	2,187.	0.
26	C-250 CUTTER	063093SL	SL	20.00	358.		358.	358.	0.
27	BOOKS - 1993	063093SL	SL	20.00	1,086.		1,086.	1,086.	0.
29	KUBOTA TRACTOR	031094SL	SL	20.00	4,300.		4,300.	4,300.	0.
30	BOOKS	063094SL	SL	20.00	1,135.		1,135.	1,135.	0.
31	MOWER DECK BEFCO	100694SL	SL	20.00	1,450.		1,450.	1,450.	0.
32	WOODEN STORAGE SHELVES	033094SL	SL	20.00	910.		910.	910.	0.
33	ROTARY MOWER	121495SL	SL	20.00	2,449.		2,449.	2,449.	0.
34	STORAGE SHED	060195SL	SL	20.00	1,500.		1,500.	1,500.	0.
35	BACK PAK BLOWER	120996SL	SL	20.00	450.		450.	450.	0.
36	AIR COMPRESSOR	080997SL	SL	20.00	210.		210.	210.	0.
40	MISCELLANEOUS EQUIPMENT	073098SL	SL	20.00	440.		440.	440.	0.
41	GROUNDS EQUIPMENT	063098SL	SL	20.00	4,415.		4,415.	4,415.	0.
42	MISCELLANEOUS EQUIPMENT	063087SL	SL	7.00	21,494.		21,494.	21,494.	0.
43	FURNITURE - AUDITORIUM	020700SL	SL	7.00	5,940.		5,940.	5,940.	0.
44	FURNITURE - AUDITORIUM	031300SL	SL	7.00	2,568.		2,568.	2,568.	0.
45	FURNITURE - AUDITORIUM	040400SL	SL	7.00	2,824.		2,824.	2,824.	0.
46	STACKING CHAIR DOLLY	050500SL	SL	7.00	241.		241.	241.	0.
47	1997 CLUB CAR	062700SL	SL	5.00	3,259.		3,259.	3,259.	0.
48	TABLE FOR GREENHOUSE	030800SL	SL	15.00	226.		226.	226.	0.
49	PROJECTOR	122801SL	SL	7.00	4,934.		4,934.	4,934.	0.
50	BRACKET W/ ARM	022101SL	SL	7.00	90.		90.	90.	0.
51	GOLF CART	052002SL	SL	7.00	2,500.		2,500.	2,500.	0.
52	NURSERY/GROUND	112702SL	SL	7.00	425.		425.	425.	0.
53	DISPLAY CASES	060303SL	SL	7.00	778.		778.	778.	0.
54	PUMP - NURSERY	021904SL	SL	5.00	1,819.		1,819.	1,819.	0.
176	SKID SPRAYER	073108SL	SL	7.00	5,017.		5,017.	5,017.	0.
177	GENERATOR	082108SL	SL	7.00	2,093.		2,093.	2,093.	0.

(D) - Asset disposed

* IRC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2020 DEPRECIATION AND AMORTIZATION REPORT

-- NEXT YEAR FEDERAL --

ADKINS ARBORETUM, LTD.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
185	CRATE & BARREL OUTDOOR FURNITURE	061109SL	SL	7.00	1,061.		1,061.	1,061.	0.
	KUBOTA 26 HP 60" PRO COMMERCIAL TRACTOR	012909SL	SL	20.00	11,758.		11,758.	6,419.	588.
211	SKID LOADER	020812SL	SL	7.00	24,995.		24,995.	24,995.	0.
212	AT3 18.5 HP LAWN MOWER	031612SL	SL	7.00	3,934.		3,934.	3,934.	0.
213	(5) 6' CAST BENCHES	101712SL	SL	7.00	6,983.		6,983.	6,983.	0.
214	(10) BIKE RACKS	101712SL	SL	7.00	3,340.		3,340.	3,340.	0.
225	2009 EZ-GO TXT ELECTRIC SN 2663824	080713SL	SL	7.00	3,000.		3,000.	2,753.	247.
226	(6) PICNIC TABLES	060313SL	SL	7.00	18,763.		18,763.	17,644.	1,119.
227	(1) BENCH	081313SL	SL	7.00	2,518.		2,518.	2,310.	208.
232	6' CAST BENCH (MARGON GLOVER)	100814SL	SL	7.00	1,610.		1,610.	1,208.	230.
233	72" GRAPPLE BUCKET	032814SL	SL	7.00	2,765.		2,765.	2,271.	395.
242	PICNIC TABLES	072718SL	SL	7.00	1,245.		1,245.	252.	178.
	* 990 PAGE 10 TOTAL - EQUIPMENT				172,608.		172,608.	163,806.	2,965.
	L/H BUILDING IMPROVEMENTS								
56	MAIN BUILDING IMPROVEMENTS	040699SL	SL	15.00	45,680.		45,680.	45,680.	0.
57	LUMBER FOR SHELVING	021700SL	SL	15.00	67.		67.	63.	0.
58	DEPOSIT ON 28X44 BUILDING	030200SL	SL	15.00	2,500.		2,500.	2,500.	0.
59	BALANCE IN FULL	030200SL	SL	15.00	10,275.		10,275.	10,275.	0.
60	WINDOWS FOR SHED	031300SL	SL	15.00	15.		15.	15.	0.
61	ELECTRIC FOR GREENHOUSE	032100SL	SL	15.00	900.		900.	900.	0.
62	PART & LABOR - PROPANE GREENHOUSE	042100SL	SL	15.00	299.		299.	299.	0.
63	ELECTRIC TO GREENHOUSE	050200SL	SL	15.00	900.		900.	900.	0.
64	ELECTRIC TO GREENHOUSE	060100SL	SL	15.00	1,500.		1,500.	1,500.	0.
65	GREENHOUSE - TRANS FROM CIP	060100SL	SL	15.00	16,261.		16,261.	16,261.	0.
67	BUILT IN FURNITURE	042501SL	SL	15.00	1,371.		1,371.	1,367.	0.
68	ELLIE'S BOOKSHELVES	041702SL	SL	15.00	704.		704.	704.	0.
69	IMPROVEMENTS	052802SL	SL	15.00	1,840.		1,840.	1,840.	0.
71	A/C REPAIRS - AUDITORIUM	042502SL	SL	7.00	6,548.		6,548.	6,548.	0.
72	HEAT PUMP	071103SL	SL	7.00	5,275.		5,275.	5,275.	0.
	NURSERY								
73	ADDITION/OFFICE/BATHROOM/WORKSTATION	123104SL	SL	20.00	67,297.		67,297.	50,475.	3,365.
74	CONSTRUCTION WORK ON NURSERY BLDG	010105SL	SL	20.00	6,000.		6,000.	4,500.	300.
75	ELECTRICAL WORK ON NURSERY BLDG	010105SL	SL	20.00	2,718.		2,718.	2,040.	136.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

- NEXT YEAR FEDERAL - ADKINS ARBORETUM, LTD.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
76	PLUMBING FOR NURSERY BATHROOM	010105SL	SL	20.00	1,657.		1,657.	1,245.	83.
77	WINDOW & THRESHHOLD FOR NURSERY	031405SL	SL	15.00	1,000.		1,000.	993.	7.
78	ELECTRIC WORK FOR NURSERY OFFICE	031405SL	SL	15.00	7,460.		7,460.	7,373.	87.
79	SIGNS AT EXISTING VISITORS CENTER	090105SL	SL	5.00	21,050.		21,050.	21,050.	0.
80	DOORS FOR EXISTING VISITORS CENTER	012805SL	SL	15.00	1,890.		1,890.	1,880.	10.
81	DOORS FOR EXISTING VISITORS CENTER	013105SL	SL	15.00	2,907.		2,907.	2,893.	14.
	BLINDS FOR WINDOWS IN EXISTING								
82	VISITORS CTR	033105SL	SL	15.00	2,009.		2,009.	1,976.	33.
83	HVAC FOR NURSERY	022805SL	SL	7.00	6,855.		6,855.	6,855.	0.
84	BUILT-IN TELEVISION CABINET	040805SL	SL	15.00	1,500.		1,500.	1,475.	25.
85	PHONE LINES IN NURSERY	041805SL	SL	15.00	5,569.		5,569.	5,442.	127.
86	NEW ROOF ON EXISTING VISITORS CENTER	111505SL	SL	15.00	51,928.		51,928.	49,045.	2,883.
87	BOOKSHELVES	011507SL	SL	7.00	2,514.		2,514.	2,514.	0.
186	VISITOR CENTER BANNERS	092509SL	SL	7.00	1,671.		1,671.	1,671.	0.
196	GOAT BARN	120111SL	SL	20.00	4,646.		4,646.	1,875.	232.
197	GOAT ENCLOSURE FENCING	121711SL	SL	20.00	5,134.		5,134.	2,056.	257.
198	GUTTERS FOR RAIN BARRELS AT NURSERY	062911SL	SL	15.00	3,565.		3,565.	2,023.	238.
	BRIDGE RESTORATION EAST WETLANDS								
205	BRIDGE	082812SL	SL	15.00	12,135.		12,135.	5,933.	809.
206	NEW VISITORS CENTER BRIDGE	021413SL	SL	15.00	42,750.		42,750.	19,713.	2,850.
218	ENTRANCE BRIDGE RAILINGS	021413SL	SL	15.00	61,900.		61,900.	28,545.	4,127.
219	ENTRANCE BRIDGE HANDRAIL	021413SL	SL	15.00	9,450.		9,450.	4,358.	630.
228	CAPITALIZED INTEREST	123113SL	SL	20.00	12,305.		12,305.	1,845.	615.
234	CAPITALIZED INTEREST	123114SL	SL	20.00	5,899.		5,899.	885.	295.
235	ARBOR	033116SL	SL	15.00	36,672.		36,672.	9,169.	2,445.
236	PAVILION	101116SL	SL	20.00	132,949.		132,949.	21,603.	6,647.
237	GNOME HOUSE	120816SL	SL	7.00	1,250.		1,250.	537.	179.
239	FRONT ENTRANCE GATES	122716SL	SL	15.00	5,504.		5,504.	1,101.	367.
240	BRIDGE REPAIR (WEEMS)	083118SL	SL	15.00	13,042.		13,042.	1,159.	869.
247	KITCHEN	093019SL	SL	15.00	49,930.		49,930.	832.	3,329.
	* 990 PAGE 10 TOTAL - L/H BUILDING								
	IMPROVEMENTS				675,291.		675,291.	357,188.	30,959.
	LAND IMPROVEMENTS								

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2020 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL -

ADKINS ARBORETUM, LTD.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
14	LND IMP - MCMULLIAN - WOOD BRIDGES	123106SL		15.00	7,837.		7,837.	1,566.	522.
15	ENG DESIGN	123106SL		15.00	36,603.		36,603.	7,320.	2,440.
18	LND IMP - CLOUD GESHAN - SIGNAGE								
20	BLDG IMP - LAKE/FLATO -								
21	ARCHITECTURAL DESIGNS	123106SL		15.00	418,610.		418,610.	83,721.	27,907.
89	LND IMP - SIGNAGE	092807SL		15.00	64,989.		64,989.	12,999.	4,333.
93	LND IMP - ARRAY SYSTEM	031607SL		15.00	2,520.		2,520.	504.	168.
94	GREENHOUSE	110193SL		20.00	2,895.		2,895.	2,895.	0.
95	NEW IRRIGATION LINES	032300SL		15.00	3,128.		3,128.	3,128.	0.
96	IRRIGATION MATERIAL	042400SL		15.00	1,269.		1,269.	1,269.	0.
97	LUMBER FOR AA SHOP	062300SL		15.00	472.		472.	468.	0.
98	INV 12038	122900SL		15.00	700.		700.	700.	0.
99	GREENHOUSE CONTENTS	021500SL		15.00	1,356.		1,356.	1,353.	0.
100	GREENHOUSE CONTENTS	021800SL		15.00	319.		319.	319.	0.
101	GREENHOUSE CONTENTS	022300SL		15.00	847.		847.	843.	0.
102	GREENHOUSE CONTENTS	030900SL		15.00	2,108.		2,108.	2,108.	0.
103	MATERIAL FOR PERGOLA	033100SL		15.00	834.		834.	834.	0.
104	ACCOUNT #467862	051500SL		15.00	299.		299.	299.	0.
105	IRRIGATION SYSTEM	092601SL		15.00	2,422.		2,422.	2,418.	0.
106	LANDSCAPING MAIN BUILDING	091201SL		15.00	10,754.		10,754.	10,754.	0.
107	GARDEN SIGNS	091201SL		15.00	1,813.		1,813.	1,778.	0.
108	DESIGN SURVEY	091902SL		15.00	689.		689.	689.	0.
109	WEED CONTROL	110102SL		15.00	136.		136.	136.	0.
110	NURSERY	111102SL		15.00	400.		400.	400.	0.
111	RANGINE CORP.	121502SL		15.00	289.		289.	289.	0.
112	BOARDWALK	100702SL		15.00	4,500.		4,500.	4,500.	0.
113	GRASS PLANTING	072902SL		15.00	200.		200.	197.	0.
114	LND IMP - BOARDWALK	010106SL		15.00	8,759.		8,759.	8,176.	583.
115	LAND IMPROVEMENTS	030403SL		15.00	2,970.		2,970.	2,970.	0.
116	SIGNS	102303SL		15.00	3,938.		3,938.	3,938.	0.
117	BENCH	040804SL		7.00	1,143.		1,143.	1,143.	0.
118	BOARDWALK	093004SL		15.00	81,258.		81,258.	81,258.	0.
119	LND IMP - LANG MEMORIAL BENCH	032106SL		7.00	2,150.		2,150.	2,150.	0.
120	100 AMP ELECTRICAL BENCH	031405SL		15.00	2,095.		2,095.	2,076.	19.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
119	ELECTRICAL SUPPLY LINES	010405SL	SL	15.00	10,729.		10,729.	10,726.	3.
120	MEMORIAL BENCHES	071805SL	SL	7.00	4,550.		4,550.	4,550.	0.
178	BENCH	100908SL	SL	7.00	2,150.		2,150.	2,150.	0.
179	LND IMP - SITE DEVELOPMENT/SIGNAGE	121508SL	SL	15.00	34,723.		34,723.	6,945.	2,315.
183	COMPOST BIN INSTALLATION	081909SL	SL	15.00	6,440.		6,440.	4,433.	429.
184	GREENHOUSE IRRIGATION/INJECTION								
184	FEEDER	100709SL	SL	15.00	11,282.		11,282.	7,708.	752.
	LND IMP - M. VAN WALKEN BIKE PATH								
188	REDESIGN	051409SL	SL	15.00	7,323.		7,323.	1,464.	488.
190	WALKING PATH SIGNAGE DESIGN	123109SL	SL	15.00	11,750.		11,750.	2,349.	783.
193	MAP MOUNT	031710SL	SL	7.00	450.		450.	16.	0.
195	WALKING PATH SIGNAGE DESIGN	123110SL	SL	15.00	94,671.		94,671.	18,933.	6,311.
199	RAIN GARDEN INTERPRETIVE SIGN	112211SL	SL	15.00	9,940.		9,940.	5,359.	663.
200	ENTRANCE SIGNAGE	071311SL	SL	15.00	1,159.		1,159.	616.	77.
201	TRAIL SIGNAGE	042811SL	SL	15.00	4,849.		4,849.	2,800.	323.
	LANDSCAPING - FRONT ENTRANCE,								
207	VISTORS AND SOUTH PARKING AREAS	120112SL	SL	15.00	71,148.		71,148.	33,596.	4,743.
	NEW IRRIGATION WELL, PUMPS AND LINES								
208	ENTRANCE AND SOUTH PARKING AREA	102112SL	SL	15.00	25,705.		25,705.	12,284.	1,714.
	CONSTRUCTION/EXCAVATION - VISITORS								
209	AND SOUTH PARKING AREAS	110112SL	SL	15.00	124,130.		124,130.	59,304.	8,275.
215	ENTRANCE SIGNAGE	052913SL	SL	15.00	6,000.		6,000.	2,633.	400.
216	ENTRANCE AND SOUTH ENTRANCE SIGNS	052913SL	SL	15.00	63,191.		63,191.	27,735.	4,213.
217	JGRR SIGNAGE	051513SL	SL	15.00	1,366.		1,366.	607.	91.
238	TRAIL CONSTRUCTION	092816SL	SL	15.00	41,390.		41,390.	8,967.	2,759.
	PARKING LOT ALIVE LANDSCAPE								
241	ARCHITECT	062519SL	SL	15.00	14,742.		14,742.	491.	983.
243	PARKING LOT ALIVE	062519SL	SL	15.00	292,789.		292,789.	9,760.	19,519.
244	SHA TRAIL BRIDGES	031519SL	SL	15.00	24,876.		24,876.	1,382.	1,658.
245	LOW FENCE	060719SL	SL	15.00	3,460.		3,460.	135.	231.
246	MEADOW PLATFORM	101619SL	SL	15.00	66,500.		66,500.	739.	4,433.
	* 990 PAGE 10 TOTAL - LAND								
	IMPROVEMENTS								
	OFFICE EQUIPMENT								
					1603615.		1603615.	468,880.	97,135.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

- NEXT YEAR FEDERAL - ADKINS ARBORETUM, LTD.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
123	PHONE UPGRADE	100297SL		7.00	1,931.		1,931.	1,931.	0.
124	FIREPROOF FILING CABINET	062397SL		7.00	886.		886.	886.	0.
126	BOOKCASES	031897SL		7.00	520.		520.	520.	0.
127	BOOKCASE, ETC	052797SL		7.00	260.		260.	260.	0.
128	COMPUTER HARDWARE	122997SL		5.00	797.		797.	797.	0.
129	FIRE KING FILE CABINET	041699SL		7.00	1,390.		1,390.	1,390.	0.
130	50% OF PHONE SYSTEM INSTALLATION	073100SL		5.00	1,434.		1,434.	1,434.	0.
131	50% OF PHONE SYSTEM INSTALLATION	090100SL		5.00	1,434.		1,434.	1,434.	0.
132	DIGITAL CAMERA	123101SL		7.00	2,009.		2,009.	2,009.	0.
134	BOOKSHELVES	031601SL		7.00	48.		48.	48.	0.
135	FURNITURE	041301SL		7.00	1,034.		1,034.	1,034.	0.
136	FURNITURE	050801SL		7.00	575.		575.	575.	0.
137	FURNITURE	030101SL		7.00	75.		75.	75.	0.
138	COMPUTERS	081502SL		5.00	2,432.		2,432.	2,432.	0.
140	FILE CABINETS	022702SL		7.00	670.		670.	670.	0.
141	SHELVES	031302SL		7.00	400.		400.	400.	0.
145	EPSON PRINTER	021503SL		5.00	394.		394.	394.	0.
146	HERBARIUM CASES	011503SL		7.00	200.		200.	200.	0.
148	DELL COMPUTER	102204SL		5.00	898.		898.	898.	0.
149	COMPUTER - DELL	121504SL		5.00	974.		974.	974.	0.
150	TELEPHONE SYSTEM	021404SL		5.00	4,215.		4,215.	4,215.	0.
151	SLIDE PROJECTOR	040204SL		5.00	1,875.		1,875.	1,875.	0.
152	NURSERY PHONE SYSTEM	053105SL		5.00	5,249.		5,249.	5,249.	0.
153	DELL NOTEBOOK COMPUTER	031506SL		5.00	2,782.		2,782.	2,782.	0.
154	DELL COMPUTER & PRINTER	092106SL		5.00	3,981.		3,981.	3,981.	0.
155	SPECIALTY TAG THERMAL PRINTER	020106SL		5.00	3,083.		3,083.	3,083.	0.
180	FILE CABINETS (3)	102109SL		7.00	1,314.		1,314.	1,314.	0.
181	DELL LATITUDE E6500 LAPTOP - ELLIE	051509SL		5.00	4,006.		4,006.	4,006.	0.
182	DELL LATITUDE E6500 LAPTOP - KATE	100809SL		5.00	1,548.		1,548.	1,548.	0.
191	COMPUTER SERVER - JOANNE AND GINNA	022010SL		5.00	1,966.		1,966.	1,966.	0.
192	LAPTOP - L TISON	061510SL		5.00	3,449.		3,449.	3,449.	0.
203	DELL PE T610 SERVER	030311SL		5.00	2,136.		2,136.	2,136.	0.
223	DELL LATITUDE E6530 LAPTOP	080713SL		5.00	1,869.		1,869.	1,869.	0.
224	DELL LATITUDE 3540BTX LAPTOP	122313SL		5.00	635.		635.	635.	0.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone

2020 DEPRECIATION AND AMORTIZATION REPORT

- NEXT YEAR FEDERAL - ADKINS ARBORETUM, LTD.

Asset No.	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
	* 990 PAGE 10 TOTAL - OFFICE EQUIPMENT SOFTWARE				56,469.		56,469.	56,469.	0.
158	ED. SOFTWARE	112697SL	SL	3.00	658.		658.	658.	0.
159	ED. SOFTWARE	121097SL	SL	3.00	133.		133.	133.	0.
160	COMPUTER SOFTWARE	012397SL	SL	3.00	100.		100.	100.	0.
161	ED. SOFTWARE	111897SL	SL	3.00	416.		416.	416.	0.
163	SOFTWARE	041502SL	SL	3.00	2,030.		2,030.	2,030.	0.
164	MISC SOFTWARE	063003SL	SL	3.00	2,755.		2,755.	2,755.	0.
166	INVASIVE PLANT CONTROL CUSTOMIZED SOFTWARE	061406SL	SL	3.00	6,492.		6,492.	6,492.	0.
167	EDWARD SARGENT PUBLIC ACCESS SOFTWARE	080306SL	SL	3.00	3,424.		3,424.	3,424.	0.
168	EDWARD SARGENT PUBLIC ACCESS INTERNET SOFTWARE	092106SL	SL	3.00	2,975.		2,975.	2,975.	0.
169	RAISERS EDGE SOFTWARE	010907SL	SL	3.00	2,910.		2,910.	2,910.	0.
170	GREEN VENUES SOFTWARE	060307SL	SL	3.00	2,100.		2,100.	2,100.	0.
202	QUICKBOOKS POS SOFTWARE AND HARDWARE	012711SL	SL	3.00	4,330.		4,330.	4,330.	0.
	* 990 PAGE 10 TOTAL - SOFTWARE				28,323.		28,323.	28,323.	0.
172	TOYOTA TRUCK	072694SL	SL	5.00	5,103.		5,103.	5,103.	0.
173	1999 FORD F150	062399SL	SL	5.00	15,629.		15,629.	15,629.	0.
174	TOYOTA PAINT JOB	022102SL	SL	5.00	2,591.		2,591.	2,591.	0.
175	RTV900W: UTILITY VEHICLE	080207SL	SL	5.00	10,500.		10,500.	10,500.	0.
	* 990 PAGE 10 TOTAL - SOFTWARE				33,823.		33,823.	33,823.	0.
	* GRAND TOTAL 990 PAGE 10 DEPR				3245695.		3245695.	1108489.	131,059.

(D) - Asset disposed

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone