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

2009

Department of the Treasury
Internal Revenue Service

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

For calendar year 2009, or tax year beginning , and ending

6 Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return
☐ Amended return ☐ Address change ☐ Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions.	Name of foundation PIEDMONT NATURAL GAS FOUNDATION		A Employer identification number 56-6047886
	Number and street (or P.O. box number if mail is not delivered to street address)	Room/suite	B Telephone number 919-881-6497
	City or town, state, and ZIP code CHARLOTTE, NC 28288		C If exemption application is pending, check here <input type="checkbox"/>
	H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 7,018,239.		J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
			F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received	1,251,800.		N/A	
2	Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
3	Interest on savings and temporary cash investments	56,075.	56,075.		STATEMENT 1
4	Dividends and interest from securities	135,448.	135,448.		STATEMENT 2
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10	<1,333,766.>			
b	Gross sales price for all assets on line 6a				
7	Capital gain net income (from Part IV, line 2)		0.		
8	Net short-term capital gain				
9	Income modifications				
10a	Gross sales less returns and allowances				
b	Less Cost of goods sold				
c	Gross profit or (loss)				
11	Other income				
12	Total. Add lines 1 through 11	109,557.	191,523.		
13	Compensation of officers, directors, trustees, etc.	0.	0.		0.
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees				
b	Accounting fees				
c	Other professional fees STMT 3	84,457.	19,501.		64,956.
17	Interest				
18	Taxes STMT 4	1,720.	0.		0.
19	Depreciation and depletion				
20	Occupancy				
21	Travel, conferences, and meetings	141.	0.		141.
22	Printing and publications				
23	Other expenses STMT 5	492.	0.		492.
24	Total operating and administrative expenses Add lines 13 through 23	86,810.	19,501.		65,589.
25	Contributions, gifts, grants paid	1,385,347.			1,000,347.
26	Total expenses and disbursements. Add lines 24 and 25	1,472,157.	19,501.		1,065,936.
27	Subtract line 26 from line 12:				
a	Excess of revenue over expenses and disbursements	<1,362,600.>			
b	Net investment income (if negative, enter -0-)		172,022.		
c	Adjusted net income (if negative, enter -0-)			N/A	

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	756,573.	58,665.	58,665.
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges		1,536.	1,536.
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
Liabilities	11 Investments - land, buildings, and equipment: basis ▶ 6,958,038.			
	Less: accumulated depreciation ▶	6,480,651.	6,958,038.	6,958,038.
	12 Investments - mortgage loans			
	13 Investments - other			
	14 Land, buildings, and equipment: basis ▶			
	Less: accumulated depreciation ▶			
	15 Other assets (describe ▶)			
	16 Total assets (to be completed by all filers)	7,237,224.	7,018,239.	7,018,239.
	17 Accounts payable and accrued expenses			
	18 Grants payable		385,000.	
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
	23 Total liabilities (add lines 17 through 22)	0.	385,000.	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/>			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/>			
	27 Capital stock, trust principal, or current funds	7,227,484.	6,633,239.	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds	9,740.	0.	
	30 Total net assets or fund balances	7,237,224.	6,633,239.	
	31 Total liabilities and net assets/fund balances	7,237,224.	7,018,239.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	7,237,224.
2 Enter amount from Part I, line 27a	2	<1,362,600.>
3 Other increases not included in line 2 (itemize) ▶ UNREALIZED GAIN	3	758,615.
4 Add lines 1, 2, and 3	4	6,633,239.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	6,633,239.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a CAPITAL GAIN FROM INTEREST IN FOUNDATION FOR			
b THE CAROLINAS INVESTMENT POOL	P	VARIOUS	VARIOUS
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			<1,333,766.>
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			<1,333,766.>
c			
d			
e			

2 Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	2	<1,333,766.>
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8		3	N/A

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

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2008	777,339.	6,730,594.	.115493
2007	849,027.	7,732,517.	.109800
2006	972,507.	7,895,644.	.123170
2005	412,393.	7,313,893.	.056385
2004	0.	6,956,947.	.000000

2 Total of line 1, column (d)	2	.404848
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.080970
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	5,903,922.
5 Multiply line 4 by line 3	5	478,041.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	1,720.
7 Add lines 5 and 6	7	479,761.
8 Enter qualifying distributions from Part XII, line 4	8	1,065,936.

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	1,720.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0.
3 Add lines 1 and 2		3	1,720.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	1,720.
6 Credits/Payments:			
a 2009 estimated tax payments and 2008 overpayment credited to 2009	6a	3,256.	
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	3,256.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	1,536.	
11 Enter the amount of line 10 to be: Credited to 2010 estimated tax <input checked="" type="checkbox"/> 1,536. Refunded <input type="checkbox"/>	11	0.	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input checked="" type="checkbox"/> \$ 0. (2) On foundation managers. <input checked="" type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input checked="" type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input checked="" type="checkbox"/> NC		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	X	

N/A

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	13	X	
14	The books are in care of ► <u>THE FOUNDATION FOR THE CAROLINAS</u> Telephone no. ► <u>704-973-4517</u> Located at ► <u>217 S. TRYON STREET, CHARLOTTE, NC</u> ZIP+4 ► <u>28202</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year ► 15 <u>N/A</u>			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here ► <input type="checkbox"/>	1b	X
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? If "Yes," list the years ► _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)	N/A	2b
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► _____		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009.)	N/A	3b
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?		4b

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to:

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?

☐ Yes ☒ No

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

☐ Yes ☒ No

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

N/A

5b

Organizations relying on a current notice regarding disaster assistance check here

☒

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

N/A

☐ Yes ☐ No

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

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

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

6b

X

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

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

N/A

7b

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

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
MARGARET M. GRIFFITH	DIRECTOR			
	40.00	0.	0.	0.

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

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

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

0

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Part VIII**Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services

0

Part IX-A**Summary of Direct Charitable Activities**

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

	Expenses
1 N/A	
2	
3	
4	

Part IX-B**Summary of Program-Related Investments**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	

Total. Add lines 1 through 3

0.

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	5,956,400.
b	Average of monthly cash balances	1b	37,429.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	5,993,829.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	5,993,829.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	89,907.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5,903,922.
6	Minimum investment return. Enter 5% of line 5	6	295,196.

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

1	Minimum investment return from Part X, line 6	1	295,196.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	1,720.
b	Income tax for 2009. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	1,720.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	293,476.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	293,476.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	293,476.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	1,065,936.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,065,936.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	1,720.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,064,216.

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				293,476.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005	2,018.			
c From 2006	586,351.			
d From 2007	474,797.			
e From 2008	446,744.			
f Total of lines 3a through e	1,509,910.			
4 Qualifying distributions for 2009 from Part XII, line 4: ► \$ 1,065,936.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2009 distributable amount				293,476.
e Remaining amount distributed out of corpus	772,460.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,282,370.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	2,282,370.			
10 Analysis of line 9:				
a Excess from 2005	2,018.			
b Excess from 2006	586,351.			
c Excess from 2007	474,797.			
d Excess from 2008	446,744.			
e Excess from 2009	772,460.			

Part XV Supplementary Information (continued)**3** Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient		If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)					
a Paid during the year					
SEE STATEMENT 6					
Total				► 3a	1,000,347.
b Approved for future payment					
Total SEE STATEMENT 7				► 3b	385,000.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	56,075.	
4 Dividends and interest from securities			14	135,448.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	<1,333,766.>	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
12 Subtotal. Add columns (b), (d), and (e)		0.		<1,142,243.>	0.
13 Total. Add line 12, columns (b), (d), and (e)				<1,142,243.>	

(See worksheet in line 13 instructions to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Name of the organization

Employer identification number

PIEDMONT NATURAL GAS FOUNDATION

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Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)() (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 foundationCheck 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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II

Special Rules

- ☐ For a section 501(c)(3) organization 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), and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ _____

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

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions
for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization

Employer identification number

PIEDMONT NATURAL GAS FOUNDATION

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Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	PIEDMONT NATURAL GAS 4720 PIEDMONT DRIVE CHARLOTTE, NC 28210	\$ 1,251,800.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

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Part II Noncash Property (see instructions)

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

Name of organization

Employer identification number

PIEDMONT NATURAL GAS FOUNDATION**56-6047886**

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

(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
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	AMOUNT
BOND INTEREST	56,075.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	56,075.

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
DIVIDENDS	44,264.	0.	44,264.
FROM FFTC POOL	271.	0.	271.
INTEREST	90,913.	0.	90,913.
TOTAL TO FM 990-PF, PART I, LN 4	135,448.	0.	135,448.

FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEE	19,501.	19,501.		0.
ADMINISTRATIVE FEES	64,956.	0.		64,956.
TO FORM 990-PF, PG 1, LN 16C	84,457.	19,501.		64,956.

FORM 990-PF TAXES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL EXCISE TAX	1,720.	0.		0.
TO FORM 990-PF, PG 1, LN 18	1,720.	0.		0.

FORM 990-PF OTHER EXPENSES STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OFFICE EXPENSE	485.	0.		485.
POSTAGE	7.	0.		7.
TO FORM 990-PF, PG 1, LN 23	492.	0.		492.

FORM 990-PF GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR STATEMENT 6

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
ALBEMARLE AREA UNITED WAY P.O. BOX 293 ELIZABETH CITY, NC 27907-0293	NONE CIVIC	501(C)(3) / 509(A)(1)	800.
ANSON UNITED WAY P.O. BOX 179 WADESBORO, NC 28170	NONE CIVIC	501(C)(3) / 509(A)(1)	350.
ARTS & SCIENCE COUNCIL 227 W. TRADE STREET, SUITE #250 CHARLOTTE, NC 28202	NONE CIVIC	501(C)(3) / 509(A)(1)	20,000.
BURKE COUNTY UNITED WAY 301 EAST MEETING STREET MORGANTON, NC 28655	NONE CIVIC	501(C)(3) / 509(A)(1)	900.
CAPE FEAR AREA UNITED WAY 5919 OLEANDER DRIVE, SUITE #115 WILMINGTON, NC 28401	NONE CIVIC	501(C)(3) / 509(A)(1)	3,400.
CAROLINA RAPTOR CENTER, INC. P.O. BOX 16443 CHARLOTTE, NC 28297	NONE EDUCATION	501(C)(3) / 509(A)(1)	5,000.

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CHILDREN'S MUSEUM OF THE UPSTATE 300 COLLEGE STREET GREENVILLE, SC 29601	NONE EDUCATION	501(C)(3) / 509(A)(1)	10,000.
LENIOR COUNTY UNITED WAY VERNON PARK MALL, SUITE #804-A KINSTON, NC 28504-3378	NONE CIVIC	501(C)(3) / 509(A)(1)	1,750.
MID-CUMBERLAND COMMUNITY ACTION AGENCY P.O. BOX 310 LEBANON, TN 37088-0310	NONE CIVIC	501(C)(3) / 509(A)(1)	2,500.
SPARTANBURG COMMUNITY COLLEGE P.O. BOX 4386 SPARTANBURG, SC 29305	NONE EDUCATION	501(C)(3) / 509(A)(1)	25,000.
UNITED WAY OF ALAMANCE COUNTY P O BOX 1268 BURLINGTON, NC 27216-1268	NONE CIVIC	501(C)(3) / 509(A)(1)	7,500.
UNITED WAY OF BLADEN COUNTY P.O. BOX 2636 ELIZABETHTOWN, NC 28337-2636	NONE CIVIC	501(C)(3) / 509(A)(1)	150.
UNITED WAY OF CATAWBA COUNTY, INC. P O BOX 2425 HICKORY, NC 28603	NONE CIVIC	501(C)(3) / 509(A)(1)	4,700.
UNITED WAY OF CENTRAL CAROLINAS, INC. 301 S. BREVARD STREET CHARLOTTE, NC 28202	NONE CIVIC	501(C)(3) / 509(A)(1)	93,000.
UNITED WAY OF COASTAL CAROLINA, INC. P.O. BOX 1385 NEW BERN, NC 28563	NONE CIVIC	501(C)(3) / 509(A)(1)	1,300.
UNITED WAY OF CUMBERLAND COUNTY 222 MAIDEN LANE FAYETTEVILLE, NC 28301	NONE CIVIC	501(C)(3) / 509(A)(1)	9,250.

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UNITED WAY OF FORYSTH COUNTY 301 N. MAIN STREET, SUITE #1700 WINSTON-SALEM, NC 27101	NONE CIVIC	501(C)(3) / 509(A)(1)	10,500.
UNITED WAY OF GREENVILLE COUNTY 301 UNIVERSITY RIDGE, SUITE #5300 GREENVILLE, SC 29601-4702	NONE CIVIC	501(C)(3) / 509(A)(1)	16,800.
UNITED WAY OF MIDDLE TENNESSEE, INC. P.O. BOX 280420 NASHVILLE, TN 37228-0420	NONE CIVIC	501(C)(3) / 509(A)(1)	30,000.
UNITED WAY OF MOORE COUNTY 375-D SOUTHEAST BROAD STREET SOUTHERN PINES, NC 28387	NONE CIVIC	501(C)(3) / 509(A)(1)	850.
UNITED WAY OF ONSLOW COUNTY, INC 8 RUTH STREET JACKSONVILLE, NC 28540-4828	NONE CIVIC	501(C)(3) / 509(A)(1)	150.
UNITED WAY OF RICHMOND COUNTY P.O. BOX 153 ROCKINGHAM, NC 28380	NONE CIVIC	501(C)(3) / 509(A)(1)	1,350.
UNITED WAY OF ROBESON COUNTY P.O. BOX 2652 LUMBERTON, NC 28359	NONE CIVIC	501(C)(3) / 509(A)(1)	2,250.
UNITED WAY OF ROCKINGHAM COUNTY, INC. P.O. BOX 317 WENTWORTH, NC 27375-0317	NONE CIVIC	501(C)(3) / 509(A)(1)	3,500.
UNITED WAY OF ROWAN COUNTY 1930 WEST JAKE ALEXANDER BLVD. SALISBURY, NC 28147	NONE CIVIC	501(C)(3) / 509(A)(1)	4,900.
UNITED WAY OF SCOTLAND COUNTY P.O. BOX 742 LAURINBURG, NC 28353	NONE CIVIC	501(C)(3) / 509(A)(1)	800.

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UNITED WAY OF THE PIEDMONT P.O. BOX 5624 SPARTANBURG, SC 29304	NONE CIVIC	501(C)(3) / 509(A)(1)	8,100.
UNITED WAY OF WAYNE COUNTY, INC. P.O. BOX 73 GOLDSBORO, NC 27533-0073	NONE CIVIC	501(C)(3) / 509(A)(1)	1,400.
NORTH CAROLINA DEPARTMENT OF HEALTH & HUMAN SERVICES 325 NORTH SALISBURY STREET RALEIGH, NC 27699	NONE CHARITABLE	501(C)(3) / 509(A)(1)	40,500.
ROANOKE VALLEY UNITED WAY (NC) P.O. BOX 760 ROANOKE RAPIDS, NC 27870-0760	NONE CIVIC	501(C)(3) / 509(A)(1)	1,500.
URBAN LAND INSTITUTE OF SOUTH CAROLINA 212 1/2 KING STREET, SUITE #305 CHARLESTON, SC 29401	NONE CHARITABLE	501(C)(3) / 509(A)(1)	1,800.
UNITED WAY OF HARNETT COUNTY P.O. BOX 1322 DUNN, NC 28335-1322	NONE CIVIC	501(C)(3) / 509(A)(1)	1,500.
UNITED WAY OF JOHNSTON COUNTY P.O. BOX 501 SMITHFIELD, NC 27577-0501	NONE CIVIC	501(C)(3) / 509(A)(1)	1,400.
UNITED WAY OF SAMPSON COUNTY, INC. P.O. BOX 1677 CLINTON, NC 28329	NONE CIVIC	501(C)(3) / 509(A)(1)	550.
CENTRAL PIEDMONT COMMUNITY COLLEGE FOUNDATION P.O. BOX 35009 CHARLOTTE, NC 28235-5009	NONE EDUCATION	501(C)(3) / 509(A)(1)	120,000.
GREENVILLE TECH FOUNDATION P.O. BOX 5616 GREENVILLE, SC 29606-5616	NONE EDUCATION	501(C)(3) / 509(A)(1)	5,000.

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CRISIS ASSISTANCE MINISTRY 500-A SPRATT STREET CHARLOTTE, NC 28206-2913	NONE CHARITABLE	501(C)(3) / 509(A)(1)	22,500.
CAROLINA CANINES FOR SERVICE, INC. P.O. BOX 12643 WILMINGTON, NC 28405	NONE CHARITABLE	501(C)(3) / 509(A)(1)	1,500.
FOUNDATION FOR THE CAROLINAS 217 SOUTH TRYON STREET CHARLOTTE, NC 28202	NONE CHARITABLE	501(C)(3) / 509(A)(1)	75,000.
UNITED WAY OF ANDERSON COUNTY P.O. BOX 2067 ANDERSON, SC 29622-2067	NONE CIVIC	501(C)(3) / 509(A)(1)	5,100.
BEAUFORT COUNTY UNITED WAY P.O. BOX 1963 WASHINGTON, NC 27889-1963	NONE CIVIC	501(C)(3) / 509(A)(1)	1,000.
DAVIE COUNTY UNITED WAY, INC. P.O. BOX 744 MOCKSVILLE, NC 27028-0744	NONE CIVIC	501(C)(3) / 509(A)(1)	1,000.
UNITED WAY - TAR RIVER REGION 230 SUNSET AVENUE, 1ST FLOOR ROCKY MOUNT, NC 27804-5734	NONE CIVIC	501(C)(3) / 509(A)(1)	1,250.
UNITED WAY OF ALEXANDER COUNTY P.O. BOX 232 TAYLORSVILLE, NC 28681-0232	NONE CIVIC	501(C)(3) / 509(A)(1)	400.
UNITED WAY OF LINCOLN COUNTY P.O. BOX 234 LINCOLNTON, NC 28093	NONE CIVIC	501(C)(3) / 509(A)(1)	800.
UNITED WAY OF MITCHELL COUNTY, INC. P.O. BOX 367 SPRUCE PINE, NC 28777-0367	NONE CIVIC	501(C)(3) / 509(A)(1)	400.

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ARTS & SCIENCE COUNCIL 227 W. TRADE STREET, SUITE #250 CHARLOTTE, NC 28202	NONE CIVIC	501(C)(3) / 509(A)(1)	70,000.
CALDWELL COUNTY UNITED FUND P.O. BOX 1316 LENOIR, NC 28645-1316	NONE CIVIC	501(C)(3) / 509(A)(1)	800.
HIGHLAND RIM ECONOMIC CORPORATION P.O. BOX 208 ERIN, TN 37061	NONE CIVIC	501(C)(3) / 509(A)(1)	500.
AMERICAN CANCER SOCIETY - SOUTHEAST DIVISION - TRIAD ADMIN RESOURCE CENTER 4-A OAK BRANCH DRIVE GREENSBORO, NC 27407	NONE CHARITABLE	501(C)(3) / 509(A)(1)	1,500.
CATAWBA COUNTY CHAMPIONS OF EDUCATION FOUNDATION, INC. P.O. BOX 1828 HICKORY, NC 28603-1828	NONE EDUCATION	501(C)(3) / 509(A)(1)	2,500.
HOSPITALITY HOUSE OF CHARLOTTE P.O. BOX 36894 CHARLOTTE, NC 28236-6891	NONE CHARITABLE	501(C)(3) / 509(A)(1)	12,500.
PENCIL FOUNDATION 421 GREAT CIRCLE ROAD, #100 NASHVILLE, TN 37228-1407	NONE CHARITABLE	501(C)(3) / 509(A)(1)	1,000.
SCIWORKS 400 W. HANES MILL ROAD WINSTON-SALEM, NC 27105-9667	NONE EDUCATION	501(C)(3) / 509(A)(1)	2,500.
SMART START OF FORSYTH COUNTY 7820 N. POINT BOULEVARD #200 WINSTON-SALEM, NC 27106-3299	NONE EDUCATION	501(C)(3) / 509(A)(1)	1,500.
TEACH FOR AMERICA - CHARLOTTE 5855 EXECUTIVE CENTER DR. #107 CHARLOTTE, NC 28212	NONE EDUCATION	501(C)(3) / 509(A)(1)	10,000.

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UNITED WAY OF ALEXANDER COUNTY P.O. BOX 232 TAYLORSVILLE, NC 28681-0232	NONE CIVIC	501(C)(3) / 509(A)(1)	500.
UNITED WAY OF CATAWBA COUNTY, INC. P O BOX 2425 HICKORY, NC 28603	NONE CIVIC	501(C)(3) / 509(A)(1)	1,500.
UNITED WAY OF CATAWBA COUNTY, INC. P.O. BOX 2425 HICKORY, NC 28603	NONE CIVIC	501(C)(3) / 509(A)(1)	250.
23RD PSALM MINISTRY, INC. 517 BOB WHITE COURT NASHVILLE, TN 37218-1606	NONE CHARITABLE	501(C)(3) / 509(A)(1)	500.
ALAMANCE COUNTY ARTS COUNCIL, INC 213 SOUTH MAIN STREET GRAHAM, NC 27253	NONE CIVIC	501(C)(3) / 509(A)(1)	1,000.
ALLIANCE FOR QUALITY EDUCATION 225 S. PLEASANTBURG DRIVE #B1 GREENVILLE, SC 29607	NONE EDUCATION	501(C)(3) / 509(A)(1)	1,000.
ANDERSON COUNTY ARTS COUNCIL 405 NORTH MAIN STREET ANDERSON, SC 29621-5614	NONE CIVIC	501(C)(3) / 509(A)(1)	1,000.
ANDERSON FREE CLINIC 414 N. FANT STREET ANDERSON, SC 29621	NONE CHARITABLE	501(C)(3) / 509(A)(1)	1,000.
ANDERSON'S EMERGENCY KITCHEN, INC. P.O. BOX 515 ANDERSON, SC 29622-0515	NONE CHARITABLE	501(C)(3) / 509(A)(1)	1,000.
CHARIS HEALTH CENTER 9695 LEBANON ROAD, SUITE #320 MOUNT JULIET, TN 37122-5540	NONE CHARITABLE	501(C)(3) / 509(A)(1)	1,000.

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CHEROKEE COUNTY MEALS ON WHEELS P.O.BOX 1886 GAFFNEY, SC 29342	NONE CHARITABLE	501(C)(3) / 509(A)(1)	500.
COMMUNITIES IN SCHOOLS OF GREATER GREENSBORO 122 NORTH ELM STREET, SUITE #301 GREENSBORO, NC 27401-2818	NONE EDUCATION	501(C)(3) / 509(A)(1)	2,000.
DAN MILLS ELEMENTARY 4106 KENNEDY AVENUE NASHVILE, TN 37216-2522	NONE EDUCATION	501(C)(3) / 509(A)(1)	2,000.
FANNIE BATTLE DAY HOME FOR CHILDREN, INC. 911 SHELBY AVENUE NASHVILE, TN 37206-3735	NONE CHARITABLE	501(C)(3) / 509(A)(1)	1,500.
GOFO HEALTH AND EDUCATION, INC. 15 CLARET DRIVE GREENVILLE, SC 29609-5475	NONE EDUCATION	501(C)(3) / 509(A)(1)	1,000.
GREENVILLE FORWARD 14 MANLY STREET GREENVILLE, SC 29601	NONE CHARITABLE	501(C)(3) / 509(A)(1)	1,000.
GREENVILLE FREE MEDICAL CLINIC 600 ARLINGTON AVENUE GREENVILLE, SC 29601	NONE CHARITABLE	501(C)(3) / 509(A)(1)	1,000.
HIGH POINT AREA ARTS COUNCIL INC P.O. BOX 5526 HIGH POINT, NC 27262	NONE CIVIC	501(C)(3) / 509(A)(1)	1,000.
JUNIOR ACHIEVEMENT OF CENTRAL NC, INC. 3220 NORTHLINE AVE. GREENSBORO, NC 27408	NONE CIVIC	501(C)(3) / 509(A)(1)	2,000.
JUNIOR LEAGUE OF HIGH POINT 1103 NORTH MAIN STREET HIGH POINT, NC 27262-3115	NONE CIVIC	501(C)(3) / 509(A)(1)	2,500.

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LINCOLN COUNTY SCHOOLS 353 NORTH GENERALS BOULEVARD LINCOLNTON, NC 28092	NONE EDUCATION	501(C)(3) / 509(A)(1)	3,000.
METROPOLITAN ARTS COUNCIL 16 AUGUSTA STREET GREENVILLE, SC 29601	NONE EDUCATION	501(C)(3) / 509(A)(1)	2,500.
NASHVILLE CHILDREN'S THEATRE 25 MIDDLETON STREET NASHVILLE, TN 37210-2040	NONE EDUCATION	501(C)(3) / 509(A)(1)	1,500.
PEACE CENTER FOUNDATION 101 WEST BROAD STREET GREENVILLE, SC 29601-2611	NONE CHARITABLE	501(C)(3) / 509(A)(1)	1,000.
UNITED ARTS COUNCIL OF GREENSBORO P.O. BOX 877 GREENSBORO, NC 27402	NONE CIVIC	501(C)(3) / 509(A)(1)	3,500.
YMCA - HARRIS BRANCH 5900 QUAIL HOLLOW ROAD CHARLOTTE, NC 28210	NONE CIVIC	501(C)(3) / 509(A)(1)	25,000.
YMCA OF CHEROKEE COUNTY 102 QUARRY DRIVE GAFFNEY, SC 29340	NONE CIVIC	501(C)(3) / 509(A)(1)	2,500.
YMCA OF GREATER GREENVILLE 601 E. MCBEE AVENUE, #212 GREENVILLE, SC 29601	NONE CIVIC	501(C)(3) / 509(A)(1)	1,500.
ARTS COUNCIL OF FAYETTEVILLE-CUMBERLAND COUNTY, INC. - 301 HAY STREET FAYETTEVILLE, NC 28301-5535	NONE CIVIC	501(C)(3) / 509(A)(1)	1,000.
BOG BROTHERS BIG SISTERS OF MIDDLE TENNESSEE 1704 CHARLOTTE AVENUE #130 NASHVILLE, TN 37203	NONE CHARITABLE	501(C)(3) / 509(A)(1)	1,000.

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BOYS & GIRLS CLUBS OF THE UPSTATE P O BOX 2794 SPARTANBURG, SC 29304	NONE CHARITABLE	501(C)(3) / 509(A)(1)	900.
BOYS & GIRLS CLUBS OF THE UPSTATE PO BOX 1401 GAFFNEY, SC 29341	NONE CHARITABLE	501(C)(3) / 509(A)(1)	500.
COMMUNITY BUILDING INITIATIVE 217 S. TRYON STREET, SUITE #307 CHARLOTTE, NC 28202	NONE CHARITABLE	501(C)(3) / 509(A)(1)	5,000.
COMMUNITY OUTREACH MAKING PARTNERSHIP 695 E. MAIN STREET GALLATIN, TN 37066-2472	NONE CHARITABLE	501(C)(3) / 509(A)(1)	5,000.
ENVIRONMENTAL EDUCATORS OF NORTH CAROLINA 8437 CHARLIE STOVALL ROAD OXFORD, NC 27565	NONE EDUCATION	501(C)(3) / 509(A)(1)	1,000.
JUNIOR ACHIEVEMENT OF EASTERN NORTH CAROLINA 4900 WATERS EDGE DRIVE #175 RALEIGH<, NC 27606	NONE CIVIC	501(C)(3) / 509(A)(1)	4,000.
JUVENILE DIABETES RESEARCH FOUNDATION INTERNATIONAL 37 VILLA ROAD (B-111), SUITE #109 GREENVILLE, SC 29615	NONE CHARITABLE	501(C)(3) / 509(A)(1)	497.
METRO ACTION COMMISSION 1624 FIFTH AVENUE NORTH NASHVILLE, TN 37208	NONE CHARITABLE	501(C)(3) / 509(A)(1)	7,000.
NASHVILLE SYMPHONY ONE SYMPHONY PLACE NASHVILLE, TN 37201-2031	NONE EDUCATION	501(C)(3) / 509(A)(1)	1,500.
SILOAM FAMILY HEALTH CENTER 820 GATE LANE NASHVILLE, TN 37204	NONE CHARITABLE	501(C)(3) / 509(A)(1)	1,000.

PIEDMONT NATURAL GAS FOUNDATION

56-6047886

SOUTH CAROLINA GOVERNOR'S OFFICE 1205 PENDLETON STREET COLUMBIA, SC 29209	NONE CIVIC	501(C)(3) / 509(A)(1)	12,000.
TENNESSEE PERFORMING ARTS CENTER 505 DEADERICK STREET NASHVILLE, TN 37243-1402	NONE EDUCATION	501(C)(3) / 509(A)(1)	5,000.
UNC CHARLOTTE FOUNDATION 9201 UNIVERSITY CITY BOULEVARD CHARLOTTE, NC 28223	NONE EDUCATION	501(C)(3) / 509(A)(1)	2,500.
W.S.O., INC. 4608 CEDAR AVENUE, SUITE #105 WILMINGTON, NC 28403	NONE CHARITABLE	501(C)(3) / 509(A)(1)	2,000.
WINSTON-SALEM FOUNDATION 860 WEST 5TH STREET WINSTON-SALEM, NC 27101-2506	NONE EDUCATION	501(C)(3) / 509(A)(1)	2,000.
YOUNG WOMEN'S CHRISTIAN ASSOCIATION 112 GATEWOOD AVENUE HIGH POINT, NC 27262-4945	NONE CIVIC	501(C)(3) / 509(A)(1)	2,500.
CHURCH WORLD SERVICE, INC. "CWS CROP WALK" 300 HAWTHORNE LANE CHARLOTTE, NC 28204	NONE CHARITABLE	501(C)(3) / 509(A)(1)	2,000.
DEVELOPMENT FOUNDATION OF THE NC CENTER FOR THE ADV. OF TEAC 276 NCCAT DRIVE CULLOWHEE, NC 27823-9062	NONE CHARITABLE	501(C)(3) / 509(A)(1)	10,000.
CAROLINAS HEALTHCARE FOUNDATION P.O. BOX 32861 CHARLOTTE, NC 28232	NONE CHARITABLE	501(C)(3) / 509(A)(1)	25,000.
FOUNDATION FOR THE CAROLINAS 217 SOUTH TRYON STREET CHARLOTTE, NC 28202	NONE CHARITABLE	501(C)(3) / 509(A)(1)	110,000.

PIEDMONT NATURAL GAS FOUNDATION

56-6047886

GOVENOR'S BOOKS FROM BIRTH NONE
FOUNDATION CHARITABLE
710 JAMES ROBERTSON PKWY
NASHVILLE, TN 37243

501(C)(3) 85,000.
/
509(A)(1)

TOTAL TO FORM 990-PF, PART XV, LINE 3A

1,000,347.

FORM 990-PF

GRANTS AND CONTRIBUTIONS
APPROVED FOR FUTURE PAYMENT

STATEMENT 7

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
ARTS & SCIENCE COUNCIL 227 W. TRADE STREET, SUITE #250 CHARLOTTE, NC 28202	NONE CIVIC	501(C)(3) / 509(A)(1)	80,000.
CHILDREN'S MUSEUM OF THE UPSTATE 300 COLLEGE ST GREENVILLE, SC 29601	NONE EDUCATION	501(C)(3) / 509(A)(1)	20,000.
FOUNDATION FOR THE CAROLINAS 217 S. TRYON STREET CHARLOTTE, NC 28202	NONE CHARITABLE	501(C)(3) / 509(A)(1)	90,000.
GOVERNOR'S BOOKS FROM BIRTH FOUNDATION 710 JAMES ROBERTSON PARKWAY 11TH FLOOR NASHVILLE, TN 37243	NONE EDUCATION	501(C)(3) / 509(A)(1)	65,000.
GREENVILLE TECH FOUNDATION, INC. MS 6002 PO BOX 5616 GREENVILLE, SC 29606-5616	NONE EDUCATION	501(C)(3) / 509(A)(1)	5,000.
YMCA OF GREATER CHARLOTTE - HARRIS BRANCH 500 EAST MOREHEAD STREET, SUITE 300 CHARLOTTE, NC 28202	NONE CHARITABLE	501(C)(3) / 509(A)(1)	125,000.
TOTAL TO FORM 990-PF, PART XV, LINE 3B			385,000.

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ☐

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

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on **e-file for Charities & Nonprofits**

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization PIEDMONT NATURAL GAS FOUNDATION	Employer identification number 56-6047886
	Number, street, and room or suite no. If a P.O. box, see instructions. 1525 WEST WT HARRIS BLVD	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. CHARLOTTE, NC 28288	

Check type of return to be filed (file a separate application for each return):

- | | | |
|---|---|------------------------------------|
| <input type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input checked="" type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

WACHOVIA BANK, NA

- The books are in the care of ► **1525 WEST W.T. HARRIS BLVD. - CHARLOTTE, NC 28288**
Telephone No. ► **919-881-6497** 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 EINs of all members the extension will cover.

- 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2010**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
► ☒ calendar year **2009** or
► ☐ tax year beginning _____, and ending _____.

- 2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 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 Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	3,256.
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev. 4-2009)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1)

Part II	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)	
Type or print File by the extended due date for filing the return. See instructions	Name of Exempt Organization	Employer identification number
	PIEDMONT NATURAL GAS FOUNDATION	56-6047886
	Number, street, and room or suite no. If a P.O. box, see instructions.	For IRS use only
	1525 WEST WT HARRIS BLVD	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	CHARLOTTE, NC 28288	

Check type of return to be filed (File a separate application for each return)

- ☐ Form 990 ☐ Form 990-EZ ☐ Form 990-T (sec 401(a) or 408(a) trust) ☐ Form 1041-A ☐ Form 5227 ☐ Form 8870
☐ Form 990-BL ☒ Form 990-PF ☐ Form 990-T (trust other than above) ☐ Form 4720 ☐ Form 6069

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

WACHOVIA BANK, NA

- The books are in the care of ☒ 1525 WEST W.T. HARRIS BLVD. - CHARLOTTE, NC 28288

Telephone No ☒ 919-881-6497

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 EINs of all members the extension is for

- 4 I request an additional 3-month extension of time until NOVEMBER 15, 2010
- 5 For calendar year 2009, or other tax year beginning _____, and ending _____
- 6 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period
- 7 State in detail why you need the extension
ADDITIONAL TIME IS REQUIRED IN ORDER TO GATHER THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a	\$	0.
b	If this application is for Form 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 and any amount paid previously with Form 8868	8b	\$	3,256.
c	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$	0.

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ☒

Title ☒

CPA

Date ☒

8/4/10

Form 8868 (Rev. 4-2009)