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Form . 990-PF

Return of Private Foundation

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

2009

OMB No 1545-0052

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							
G Check all that apply: Initial return Initial return				former public charity Final return			
		Amended return	Address chang	je <u> </u>	Name change		
	the abel	· · · · · · · · · · · · · · · · · · ·			A Employer identification	number	
	erwi:		FOUNDATION		56-6047886		
	print			Room/suite	B Telephone number	· 	
	type		מעיז		919-881-64	97	
See	Spe	City or town, state, and ZIP code			C If exemption application is p		
Inst	ructio	CHARLOTTE, NC 28288			D 1. Foreign organizations		
H (heck	type of organization: X Section 501(c)(3) ex	emot private foundation		Foreign organizations me check here and attach co		
\Box	_		Other taxable private founda	tion			
l Fa		irket value of all assets at end of year J Accounting		X Accrual	E If private foundation staunder section 507(b)(1)		
		·	her (specify)		F If the foundation is in a		
	\$	7,018,239. (Part I, colu		pasis.)	under section 507(b)(1)		
	ırt l	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements	
_		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	expenses per books	income	income	for charitable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc., received	1,251,800.		N/A		
	2	Check 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					
		Net rental income or (loss)			,	,	
	۱ ـ	Net gain or (loss) from sale of assets not on line 10	<1,333,766.	>			
ğ	Ь	Gross sales price for all assets on line 6a					
Revenue	7	Capital gain net income (from Part IV, line 2)	· ,	0.	3 2 2	- "	
æ	8	Net short-term capital gain					
	9	Income modifications RECEIVED Gross sales less returns RECEIVED	•			,	
	10a	and allowances			7 1/2 / V	-01 4 V -341 -1	
	b	Less Cost of goods sold		// **	1, 1, 1, 1,		
	c	Gross profit of gss NOV 1 8 2010 10					
	11	Other income				:	
	12	Total. Add lines 1 through the NI LIT	109,557.	191,523		,	
	13	Compensation of officers, directors, trustees, etc	0.	0.	•	0.	
	14	Other employee salaries and wages				<u></u>	
/0	15	Pension plans, employee benefits					
enses	16a	Legal fees -					
per	b	Accounting fees					
ANIMED INUTE OF COLOR Operating and Administrative Expe	C	Other professional fees STMT 3	84,457.	19,501		64,956.	
5 <u>8</u>	17	Interest					
tra	18	Taxes STMT 4	1,720.	0	•	0.	
nis Sin	19	Depreciation and depletion					
ᇴ	20	Occupancy			ļ		
うる	21	Travel, conferences, and meetings	141.	0	·	141.	
a _	22	Printing and publications	400			400	
ii J	23	Other expenses STMT 5	492.	0	• <u> </u>	492.	
ra t	24	Total operating and administrative	06.010	40 504		65 500	
78		expenses Add lines 13 through 23	86,810.	19,501	·	65,589.	
ر م	20	Continuations, gints, grants paid	1,385,347.			1,000,347.	
n	26	Total expenses and disbursements.	1 450 155	10 501		1 005 030	
	-	Add lines 24 and 25	1,472,157.	19,501	•	1,065,936.	
	27		1 200 600		1 24	1.	
	l .	Excess of revenue over expenses and disbursements	<1,362,600.		27	3, 1	
	Į.	Net investment income (if negative, enter -0-)	· ·	172,022			
	C	Adjusted net income (if negative, enter -0-)	·	· ·	N/A	1 m	

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	End of year			
column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value			
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 ►			t entre tree of			
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						
g 8 Inventories for sale or use		4 506	4.526			
9 Prepaid expenses and deferred charges		1,536.	1,536.			
10a investments - 0.5. and state government obligations						
b Investments - corporate stock						
c Investments - corporate bonds		<u>.</u>				
11 Investments - land, buildings, and equipment basis 6,958,038.	6,480,651.	6 050 030	6,958,038.			
Less accumulated depreciation	0,480,651.	0,950,030.	0,950,050.			
12 Investments - mortgage loans						
13 Investments - other						
14 Land, buildings, and equipment: basis ► Less accumulated depreciation ►	a to appropriately between the control of the contr	A STATE OF THE STA				
15 Other assets (describe)						
To 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	7,237,2210	,,010,1550	7,020,2031			
18 Grants payable		385,000.				
lan Butturk in the						
Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable			,			
21 Mortgages and other notes payable						
22 Other liabilities (describe >			,			
			1			
23 Total liabilities (add lines 17 through 22)	0.	385,000.				
Foundations that follow SFAS 117, check here						
and complete lines 24 through 26 and lines 30 and 31.			1			
8 24 Unrestricted			-			
25 Temporarily restricted						
24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bidg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances			1			
Foundations that do not follow SFAS 117, check here			,			
and complete lines 27 through 31						
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.				
Retained earnings, accumulated income, endowment, or other funds	9,740.	0.				
30 Total net assets or fund balances	7,237,224.	6,633,239.	•			
	7 007 004	7 010 020				
31 Total liabilities and net assets/fund balances	7,237,224.	7,018,239.				
Part III Analysis of Changes in Net Assets or Fund E	Balances					
4. Total not accept or fund halocope at haganage of trees. Dort II. column (a) for	20					
1 Total net assets or fund balances at beginning of year - Part II, column (a), line	30		7 227 221			
(must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a		1 2	7,237,224. <1,362,600.>			
3 Other increases not included in line 2 (itemize) ► UNREALIZED	CATN	3	758,615.			
4 Add lines 1, 2, and 3	QÚTIN	4	6,633,239.			
5 Decreases not included in line 2 (itemize)		5	0,033,239.			
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	olumn (b), line 30	6	6,633,239.			
			Form 990-PF (2009)			

Page 3

(a) List and desc	ribe the kınd(es for Tax on In s) of property sold (e.g. common stock, 200 shs	., real estate,	· income	I. b	How acc	iase (c) Date a	cquired	(d) Date sold (mo., day, yr.)
				MTON FOR	-	- Donat	tion_	(1110., 0		(1110., uay, yr.)
1a CAPITAL GAIN F b THE CAROLINAS			FOUNDA	TION FOR	-		2 V	ARI	חוופ	VARIOUS
C CAROLINAS	THAFPT	MENT FOOD					- V	WYT	<u> </u>	VARIOUS
d										
е										
(e) Gross sales price		reciation allowed r allowable)		st or other basis expense of sale					in or (loss (f) minus	
<u>a</u> b										1,333,766.
C		-								•
d										
.e	L		<u></u>							
Complete only for assets shown									ol. (h) gain	
(i) F.M.V. as of 12/31/69		djusted basis of 12/31/69		cess of col. (i) col. (j), if any					ot less tha (from col. (
a								-		
<u>b</u>									<	:1,333,766.
C	<u> </u>									
_d										
<u>e </u>	l		L		$\overline{}$	- 1	·			
2 Capital gain net income or (net ca	apıtal loss)	$\begin{cases} \text{If gain, also enter} \\ \text{If (loss), enter -0-} \end{cases}$	in Part I, line - in Part I, line	7 7	}	2	_		<	1,333,766
3 Net short-term capital gain or (lo	,	in sections 1222(5) an	ıd (6):		٦					
If gain, also enter in Part I, line 8,									NT / N	
If (loss), enter -0- in Part I, line 8 Part V Qualification U		tion 4940(e) for	Reduced	Tay on Net	Inv	estm	ent Inco	me	N/A	
f section 4940(d)(2) applies, leave t Was the foundation liable for the sec f "Yes," the foundation does not qua Enter the appropriate amount in	tion 4942 tax lify under sec	on the distributable am tion 4940(e). Do not co	mplete this pa	ırt.						Yes X No
 	each column		uctions before	making any entire				1		(d)
(a) Base period years Calendar year (or tax year beginni	ing in)	(b) Adjusted qualifying dis		Net value of no		ritable-u		+	Distril (col. (b) div	bùtión ratio vided by col. (c))
2008			7,339.				0,594.			.115493
2007			9,027. 2,507.				2,517. 5,644.			.109800
2006 2005			$\frac{2,307.}{2,393.}$				3,893.			.056385
2004			<u>2,333.</u> 0.				5,0 <u>5</u> 5.			.000000
						<i>, , ,</i> , , ,	3,34,6	1		
2 Total of line 1, column (d)								2		.404848
Average distribution ratio for the the foundation has been in existe			on line 2 by 5,	or by the number	of ye	ars		3		.080970
4 Enter the net value of noncharitat		·	lina S					4		5,903,922
	vie-use asseis	ioi 2009 ii oiii Pait A, i	iiile 5							
6 Multiply line 4 by line 3								5		478,041
6 Enter 1% of net investment incon	ne (1% of Par	t I, line 27b)						6		1,720
7 Add lines 5 and 6								7		479,761
Enter qualifying distributions from	-		1h and	late that see	004	0/ tour=	ato.	8	 	1,065,936
If line 8 is equal to or greater than See the Part VI instructions.	i iiie 7, check	. the box in Part VI, line	io, and comp	mete mat part usin	y a 1'	/o LdX f2				

a Exempt programing foundations described in section 4940(p)(2), check inter ≥ 1 and enter 1W/n on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) b Domestic foundations but meet lise section 4940(p) requirements in Part V, check here ≥ 1 1 1,720. of Part I, line 27b of Part I, line 27b of Part I, line 27b Add lines 1 and enter 1% of lines 27b. Exempl Drosing organizations enter 4% of Part I, line 12, cot. (b) 2 Tax under section 511 (domestic section 4947(p)1) trusts and taxable foundations only. Others enter -0-1 3 1,720. 3 1,720. 3 1,720. 3 1,720. 3 1,720. 4 0,00 and the section 4947(p)(1) trusts and taxable foundations only. Others enter -0-1 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-1 5 Lax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-1 6 Creatist-Powersts. 2 2009 estimated tax payments and 2008 overpayment credited to 2009 8 Exempt brough organizations - bax withheld at source 1 Exempt programizations - bax withheld at source 1 Exempt from any potential or seatment of the file (form 888) 5 Enter any peasity for underpayment of estimated tax. Check here 1 form 2220 is attached 7 Tax dar. (If the lite of a more than the foll of lines 5 and 8 since it has her 7, where amount overall 9 Tax dar. (If the lite 7 is more than the foll of lines 5 and 8 since it has her 7, where amount overall 10 Overpayment. If lite 7 is more than the foll of lines 5 and 8 since it has her 7, where amount overall 10 Overpayment. If lite 7 is more than the foll of lines 5 and 8 since it has her 7, where amount overall 11 Enter the amount of line 10 to be Credited to 2010 estimated tax. 12 Darry Bett Association for the follower of the follower of the activities. 13 Darry Bett Association lite 4 files of the follower of the activities. 14 Darry Bett Association for the follower of the activities. 15 Darry Bett Association here of the follower of the follower of the fo		990-PF (2009) PIEDMONT NATURAL GAS FOUNDATION 56-604' Rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see			Page 4	
Dates of ruling or determination letter: Catach copy of letter if necessary-see instructions) 1 1,720. Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► X and enter 1% All other domestic foundations enter 2% of the 27b. Exempt foreign organizations enter 4% of Part I, line 12, oo. (b) 2 Tax under section 511 (domestic section 4947(e)(1) trusts and taxable foundations only. Others enter -0-) 3 1,720. 3 Additions 1 and 2 3 1,720. 4 Sobtiet A (none) tax (domestic section 4947(e)(1) trusts and taxable foundations only. Others enter -0-) 5 1,720. 5 Tax based on investment income. Subtract hine 4 from Iris 3.1 it zer or 4 iss, enter -0- 5 1,720. 5 Caddit-Perpinets: a 2009 estimated tax payments and 2008 overpayment credited to 2009 6 Ecent foreign organizations - tax withheld at source 6 6 6 7 7 7 7 7 7 7		 	IIISU U	ictio	115)	
b Domestic Gundations that meat the section 4940(e) requirements in Part V, check here ► ▼ and enter 1% of Part I, lime 127b. c All other domestic foundations enter 2% of the 27b, Exempt through organizations enter 4% of Part I, lime 12, col. (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 1,720. 4 0,0. 5 Tax based on investment income. Subtract line 4 from lime 3.1 tizero or itss, enter -0- 5 Cerclot/Payments: 2 2009 estimated tax payments and 2008 overpayment credited to 2009 6 2 8 3,256. 6 Exempt foreign organizations - tax withheld at Source 6 1 Tax based and payments. Add lines 5 afth osigh 60 6 Exister any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 Tax dee. If the total of lines 5 aft osigh 160 8 Exister any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax dee. If the total of lines 5 and 6 is more than hire 7, enter amount of well 10 Deepayment. Ill line 7 is more than the folls of lines 5 and 6, where the amount overpaid 11 Enter the amount of line 10 to be Credited to 2010 estimated tax. 12 During the tax year, did the foundation attempt to influence any national, state, or local elepsistion or did it participate or information or any political campmagn? b I of it spend more than 5100 during the year (either directly) for political purposes (see instructions for delinition)? 1 The answers x Yeas* to 1 aor 1b, affacch a destaked description of the activities. 1 Or the foundation his Form 1129-POL for this year? 1 The answers x Yeas* to 1 aor 1b, affacch a destaked description of the activities. 1 Whish the foundation his Form 1129-POL for this year? 1 Whish the foundation in the Form 1129-POL for this year? 1 Whish the foundation in the Form 1129-POL for this year? 1 Whish the foundation his Form 1129-POL for this year? 1 Whish the foundation his Form 1129-POL for this year? 1 Whish the foundation his verification or substantial contracti	ıa	I I I			4	
of Part I, line 27b. c All Other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, cot. (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 4 O. 3 5 Abbate 8 (nomes) bax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment iscome. Subtract line 4 from line 3.1 (zero or less, enter -0-) 5 Tax based on investment iscome. Subtract line 4 from line 3.1 (zero or less, enter -0-) 5 Tax based on investment iscome. Subtract line 4 from line 3.1 (zero or less, enter -0-) 5 Tax des develop organizations - Lax withheld at source 6 Tax des develop organizations - Lax withheld at source 6 Tax des develop organizations - Lax withheld at source 6 Tax des develop organizations - Lax withheld at source 7 Tax des develop organizations - Lax withheld at source 8 Tax des de life total of lines 5 and 98 is more than line 7, enter amount owed 9 Tax des de life total of lines 5 and 98 is more than line 7, enter amount owed 9 Tax des development. Il line 7 is more than the total of lines 5 and 98 is more than line 7, enter amount owed 9 Tax des development. Il line 7 is more than the total of lines 5 and 98 is nere than line 7, enter amount overpaid 1 Center the amount of line 10 to 6 centilated to 20 settinated tax but a line of the settinated by the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1 Did of spend more than \$100 during the year (either derectly or indexectly) for political purposes (see instructions for definition)? 1 If the answer is 1'ves' to 1 or 19, attach a declarated description of the activities. 1 Did the foundation life Form 112-PDL for this year? 1 If the sea description of the activities of the life of the l					200	
c All other domestic foundations enter 2% of time 27b. Exempt freego organizations enter 4% of Part I, line 12, cot. (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 1,720. 4 Subtible A (monne) bix (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from the 3.1 it zero riess, enter -0- 5 Tax based on investment income. Subtract line 4 from the 3.1 it zero riess, enter -0- 6 Credisch-Payments: a 2009 estimated tax payments and 2008 overpayment credited to 2009 b Exempl foreign organizations - Eax withheld at source c Tax paid with application for extension of time to file (Form 8868) 6 Election of the second properties of the second o	D			<u> </u>	<u> </u>	
2 I au under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 3 Subilità A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment faceme. Subtract line 4 from line 3.1 Jear or less, enter -0- 5 Tax based on investment faceme. Subtract line 4 from line 3.1 Jear or less, enter -0- 5 Tax paid with application for extension of time to file (Form 8868) 6 Deathy withholding erroneously withheld at source c Tax paid with application for extension of time to file (Form 8868) 6 Deathy withholding erroneously withheld 7 Total credits and payments. Add lines is a through 6d 8 Enter any peasity for underpayment of estimated tax. Check here I of form 220 a stached 9 Tax due. If the total of lines 5 and 8 is more than hime 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than hime 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than hime 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overgraid 11 Enter the amount of line 10 to be: Credited to 2010 estimated tax ► 1, 53.6. Refunded ■ 11 0 Ly Safeti Part VII-A Statements Regarding Activities 1a Dung the tax year, dut the foundation alteringt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? b Did is spend more than \$100 duning the year (either directly or indirectly) for political spendation or did it participate or intervene in any political expenditures (section 4955) imposed during the year. (1) On the foundation line form 1120-POL for this year? If the answer is "Vest" to 1 aor 1b, attach a detailed descorption of the activities. 1 is a file foundation in connection with the activities. 1 is a file foundation in connection of the year? If "Yes," attach a detailed descorption of the activities and copies of the changes of the changes, not previously prepared to the IR					1	
3 d 1,720. 4 Subbite A (mocno) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 1ax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credist/Payments. 5 1ax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credist/Payments. 6 Credist/Payments. 6 Credist/Payments. 6 Credist/Payments. 6 Credist/Payments. 6 Credist/Payments. 6 Creatist/Payments. 6 Credist/Payments. 6 Credist/Payments. 6 Credist/Payments. 6 Credist/Payments. 6 Credist/Payments. 6 Creatist/Payments. 7 Creatist/Payments. 8 Creatist/Payments. 9 Creatist/Payments. 1 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any policical campain? 1 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 on connection with the activities. 1 During the tax year, did the foundation in the activities. 2 Creatistic Creatisti					;	
4 Subtle A (income) tax (domestic section 4947(a)(1) inusts and taxable foundations only, Others enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits-Payments: a 2009 estimated tax payments and 2008 overpayment credited to 2009 b Exempt Income) or payments and 2008 overpayment credited to 2009 b Exempt Income) or payments and 2008 overpayment credited to 2009 b Exempt Income) or payments and 2008 overpayment credited to 2009 b Exempt Income) or payments and 2008 overpayment or destinated tax. Check here	2	(, , , , , , , , , , , , , , , , , , ,			0.	
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Credits/Paymants: a 2009 estimated tax payments and 2008 overpayment credited to 2009 b Exempt foreign organizations - fax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld g Total credits and payments. Add films 6a through 6d 6 Enter any penalty for underpayment of estimated tax. Check here ☐ If Form 2220 is attached 9 Tax die. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax die. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax die. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax die. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Enter the amount of line 5 and 8 is more than line 7, enter amount owed 11 Enter the amount of line 5 and 8 is more than line 5, and the amount owerpaid 12 Enter the amount of line 5 and 8 is more than 1801 obsection 45 and 18 is the first amount owerpaid 13 Enter the amount of line 5 and 5 is the first amount owerpaid 14 Enter the amount of line 5 and 5 is the first amount owerpaid 15 Enter the amount of line 5 and 5 is the first amount owerpaid 16 Enter the amount of line 5 and 5 is the first amount owerpaid 17 Enter the amount of line 5 is the first amount owerpaid 18 Enter the annount of line 5 is the first amount owerpaid 19 Did in spendition life form 1129-01, for this year? 20 Enter the arount of (any) of tax on political expenditures (section 4955) imposed during the year: 21 On the foundation life form 1129-01, for this year? 22 Is the site foundation site form 1129-01, for this year? 33 Enter the area of the site of the first of the activities. 34 Enter the area of the first of the first of the activities. 35 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ 0 . (2) Infoundation have a unable of the first of the c	3			1,/		
S Credits/Psyments: a 2009 estimated tax payments and 2008 overpayment credited to 2009 b Exempt to require organizations - Lax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any peelally for underspayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owerpaid 11 Enter the amount of line 10 to be Credited to 2018 estimated tax. 1, 536 Leathended 11 1 0. Part VII-A Statements Regarding Activities 1a During the tax year, did the boundation attempt to influence any national, state, or local legislation or did it participate or inference in any political campaign? 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. 1b Ut the condition the Form 112-PoPL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation № \$ 0. (2) On foundation managers. ▶ \$ 0. enter the remiburisement (if any) paid by the foundation during the year for political expenditures that have not previously been reported to the IRS? If "Yes, attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in disgonalization and provides	4					
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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 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? b if "Yes," has it filed a tax return on Form 990-T for this year? N/A Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: 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? 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 8a Enter the states to which the foundation reports or with which it is registered (see instructions) NC b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 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 9 X 10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses				,	\ · ·	
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10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	3					
	10			v	┝┸	
	10				/2009)	

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

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Form 990-PF (2009) PIEDMONT NATURAL GAS FOU			<u>56-60478</u>	886	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4/20 May Be F	Required (contin	ued)		т——
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No		
(2) Influence the outcome of any specific public election (see section 4955); or	r to carry on, directly or indire				
any voter registration drive?			s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	?	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or			
the prevention of cruelty to children or animals?	,		s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ler the excentions described i				1
section 53.4945 or in a current notice regarding disaster assistance (see instru		go.aoo	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check hi	•				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ined			4
		. —	es 🔲 No		
expenditure responsibility for the grant?		/A 16	s L NO		
If "Yes," attach the statement required by Regulations section 53.4945			1	1	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	oay premiums on		[1]	,	
a personal benefit contract?		Ye	es X No	<u></u>	-
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal 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 s	helter transaction?	Ye	es 🗓 No		\vdash
b If yes, did the foundation receive any proceeds or have any net income attributa			<u> </u>	7b	<u> </u>
Part VIII Information About Officers, Directors, Trusto	ees, Foundation Ma	nagers, Highly	y		
1 List all officers, directors, trustees, foundation managers and their	`	1	1 (d) 0	1	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Exp	ense Lother
(a) Name and address	to position	(If not paid, enter -0-)	compensation	allowa	inces
MARGARET M. GRIFFITH	DIRECTOR				
	40.00	0.	0.	,	0.
		-		 	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."	<u> </u>		
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Exp	pense
(a) Name and address of each employee paid more than \$50,000	` hours per week	(c) Compensation	and deterred	account allowa	t, other
MONE	devoted to position		compensation	allowa	lices
NONE					
			}		
			-		
	:- <u>-</u>				<u></u>
Total number of other employees paid over \$50,000			<u> </u>		0

rorm 990-Pr (2009) PIEDMONT NATURAL GAS FOUNDATION	56-	6047886 Page /
Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, ent		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	\neg	
Total number of others receiving over \$50,000 for professional services		<u>▶</u> 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant state	istical information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers pr	oddced, etc.	·
1 <u>N/A</u>		
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 of	in lines 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		

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Total. Add lines 1 through 3

Page 8

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 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 <u>5,956,4</u>00. 1b 37,429. b Average of monthly cash balances c Fair market value of all other assets 1c 5,993,829. 1đ d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 2 993,829. 3 3 Subtract line 2 from line 1d 89,907. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 5,903,922. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 295,196. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain Part XI foreign organizations check here
and do not complete this part.) 295,196. Minimum investment return from Part X, line 6 1,720. 2a Tax on investment income for 2009 from Part VI, line 5 b Income tax for 2009. (This does not include the tax from Part VI.) 2b Add lines 2a and 2b 2c Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 476. 5 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 U 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 293 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 1,065,936. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 1b 2 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 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 1,065,936. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 1,720. income. Enter 1% of Part I, line 27b Adjusted qualifying distributions. Subtract line 5 from line 4 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

Form 990-PF (2009)

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
Distributable amount for 2009 from Part XI, line 7				293,476.
2 Undistributed income, if any, as of the end of 2009				23372700
a Enter amount for 2008 only			0.	
b Total for prior years:			<u> </u>	
g rotal 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	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	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.				,
7 2.000 Hall 2000	<u> </u>		<u> </u>	Form 990-PF (2009)

1 a If the foundation has reserved a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling is offered to the ruling of the ruling is effective for 2009, enter the date of the ruling is offered to the ruling of the ruling is effective for 2009, enter the date of the ruling is consistent of the ruling is effective for 2009, enter the date of the ruling is consistent return from Part X for each year fixed in a part of the minimum investment return from Part X for each year fixed in the ruling is effective for Part XII, line 4 for each year sized directly for active conduct of exempt activates. 3 85% of line 2a (a 2009) (b) 2008 (c) 2007 (d) 2006 (e) Total incide for each year sized directly for active conduct of exempt activates. 3 but and directly for active conduct of exempt activates. 3 but and the ruling is exempt activates. 3 but and the ruling is exempt activates. 3 but and the ruling is exempt activates. 3 but and is exempt activates. 4 complete 8a, for or line 2a from line 2b and 1 assets (1) and line 2b and 2b	Part XIV Private Operating Fo		GAS FOUNDAT: nstructions and Part V		N/A	4/886 Page 1	
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(0)(3) or 4942(0)(5) = 2 a letter the lessor the adjusted and the section 4942(0)(3) or 4942(0)(5) = 4 a letter the reserved for the adjusted and the section 4942(0)(3) or 4942(0)(5) = 4 a letter the private of the adjusted private of the section 4942(0)(3) or 4942(0)(5) = 4 a letter than 7944 for a letter of the minimum investment return from Part XI for each year listed 40. 2 Outsiliving distributions from Part XII, line 4 for each year listed 40. 3 Complete 59, for or the conduct of except activities. 3 Complete 59, for or the conduct of except activities. 3 Complete 59, for or the conduct of except activities. 3 Complete 59, for or the conduct of except activities. 3 Complete 59, for or the conduct of except activities. 4 Subtract like 25 form image 25. 4 Complete 59, for or the conduct of except activities. 5 Complete 59, for or the conduct of except activities. 5 Complete 59, for or the conduct of except activities. 5 Complete 59, for or the conduct of except activities. 5 Complete 59, for or the conduct of except activities. 5 Complete 59, for or the conduct of except activities. 6 Complete 59, for or the conduct of except activities. 6 Complete 59, for or the conduct of except activities. 6 Complete 59, for or the conduct of except activities. 7 Support form general public and 50 more exempt activities. 8 Support from general public and 50 more exempt or exempt	1 a If the foundation has received a ruling or	determination letter that	at it is a private operating				
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(0)(3) or 4942(0)(5) = 2 a letter the lessor the adjusted and the section 4942(0)(3) or 4942(0)(5) = 4 a letter the reserved for the adjusted and the section 4942(0)(3) or 4942(0)(5) = 4 a letter the private of the adjusted private of the section 4942(0)(3) or 4942(0)(5) = 4 a letter than 7944 for a letter of the minimum investment return from Part XI for each year listed 40. 2 Outsiliving distributions from Part XII, line 4 for each year listed 40. 3 Complete 59, for or the conduct of except activities. 3 Complete 59, for or the conduct of except activities. 3 Complete 59, for or the conduct of except activities. 3 Complete 59, for or the conduct of except activities. 3 Complete 59, for or the conduct of except activities. 4 Subtract like 25 form image 25. 4 Complete 59, for or the conduct of except activities. 5 Complete 59, for or the conduct of except activities. 5 Complete 59, for or the conduct of except activities. 5 Complete 59, for or the conduct of except activities. 5 Complete 59, for or the conduct of except activities. 5 Complete 59, for or the conduct of except activities. 6 Complete 59, for or the conduct of except activities. 6 Complete 59, for or the conduct of except activities. 6 Complete 59, for or the conduct of except activities. 7 Support form general public and 50 more exempt activities. 8 Support from general public and 50 more exempt or exempt	foundation, and the ruling is effective for	2009, enter the date of	the ruling	▶			
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c Any submission deadlines:							
c Any submission deadlines:							
<u> </u>	b The form in which applications should be	submitted and inform	ation and materials they s	should include:			
<u> </u>						<u> </u>	
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:	c Any submission deadlines:		-			· · · 	
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:							
	d Any restrictions or limitations on awards,	such as by geographic	cai areas, charitable fields	s, kinds of institutions, or (otner factors:		

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	Purpose of grant or contribution	Amount				
Name and address (home or business)	or substantial contributor	recipient						
Name and address (home or business) a Paid during the year	or substantial contributor	status of recipient						
SEE STATEMENT 6								
Total b Approved for future payment	-	· ·	> 3a	1,000,347.				
Total SEE STATEMENT 7		L	<u>▶</u> 3b	385,000.				

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income		ded by section 512, 513, or 514	(e)	
	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income	
1 Program service revenue:	code		code			
a						
b			<u> </u>			
c			<u> </u>			
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	56,075. 135,448.		
5 Net rental income or (loss) from real estate:		· · · · · · · · · · · · · · · · · · ·	+	133,440.		
	-		+-		<u> </u>	
a Debt-financed property			 	<u> </u>		
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						
			†	-		
· · · · · · · · · · · · · · · · · · ·			1		·	
d			1			
12 Subtotal. Add columns (b), (d), and (e)		0.	+	<1,142,243.		
	L	<u> </u>	•	13_		
13 Total. Add line 12, columns (b), (d), and (e)				13	<u> </u>	
(See worksheet in line 13 instructions to verify calculations.)		<u> </u>			· · · · · · · · · · · · · · · · · · ·	
Part XVI-B Relationship of Activities t	o the Acc	omplishment of E	xemp	t Purposes		
Line No Explain below how each activity for which inco	ma ic raportad	in column (a) of Part VII-	A contri	huted importantly to the accor	mnlichment of	
the foundation's exempt purposes (other than			- Contan	buted importantly to the accor	npasiment of	
and realisation a exempt purposes (other than	by providing it					
		•				
		_ -	_			
				· · · · · ·		
					 	
I						
223821					5 000 DE (0000)	

Form 990-PF (2009) PIEDMONT NATURAL GAS FOUNDATION 56-6047886 Page 13
Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

1		-	rectly engage in any of the following	• •	• • •		1 62	INO
	the Co	ode (other than section 501(c))(3) organizations) or in section 52	27, relating to political organ	nizations?			'
а	Trans	fers from the reporting founda	ation to a noncharitable exempt or	ganization of:				
	(1) C	ash .		·		1a(1)		X
	(2) 0	ther assets			_	1a(2)		X
b	Other	transactions:						
	(1) S	ales of assets to a noncharitat	ble exempt organization			1b(1)		X
			ncharitable exempt organization		• -	1b(2)		X
		ental of facilities, equipment, o	· -			1b(3)		X X X X
		eimbursement arrangements			-	1b(4)		Ÿ
		-						V
		oans or loan guarantees				1b(5)		-
			mbership or fundraising solicitation			1b(6)		X
C			iling lists, other assets, or paid em	· ·				_ X_
d					ways show the fair market value of the go		ets,	
					ie in any transaction or sharing arrangem	ent, show in		
_	colum		other assets, or services received.					
a)	Line no.	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of transfers, transactions	, and sharing ar	angeme	nts
			N/A					
-								
						•		
-					_			
					<u> </u>			
_								
					-			
						•		
22	le the	foundation directly or indirect	tly affiliated with, or related to, one	or more tay-evennt organi	zatione described			
		•	r than section 501(c)(3)) or in sect	· · ·	zations described	□ vaa	V	No
				11011 327 ?		Yes	Δ	П ИО
	11 165	s," complete the following sche (a) Name of org		(b) Type of organization	(c) Description of rela	tionchin		
_			anzation	(b) Type of Organization	(c) Description of rela	понзин		
		N/A						
	_			ļ				
				ļ <u> </u>				
					nents, and to the best of my knowledge and belie	f, it is true, corre	ct,	
	and com	iplete Declaration of preparer (other	er than axpayer or fiduciary) is based on	all information of which preparer	has any knowledge			
		Mysoa	- tederico	11/15/10	18			
ופ	Sic	nature of office or trustee		Date	Title			
	Ť		1/1/			reparer's identify	ing nun	nber
틹	ج ئ	Preparer's	un a (Kutt		colf-	,		-
ō	Paid Preparer's Use Only	CATED:			1/11/10 employed ▶ □			
	Paid spare se On	Firm's name (or yours / HER.		OLLAND, L.L.				
	žž	d self-employed), 1111	METROPOLITAN A					_
		address, and ZIP code CHAR	LOTTE, NC 28204	:	Phone no. 70	<u>4-377-</u>		
						Form 990	-PF (2009)

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

PI	EDMONT NATURAL GAS FOUNDATION	56-6047886			
Organization type (check o					
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	on			
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a S	pecial Rule See instructions			
General Rule					
X For an organization contributor. Comp	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or meter Parts I and II	ore (in money or property) from any one			
Special Rules					
509(a)(1) and 170(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of 5)(1)(A)(vi), and received from any one contributor, during the year, a contributor) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II	•			
aggregate contribu	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any cutions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific truelty 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 lf 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					
out it must answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file S Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, o ng requirements of Schedule B (Form 990, 990-EZ, or 990-PF).				
LHA For Privacy Act and	Paperwork Reduction Act Notice, see the Instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (2009)			

for Form 990, 990-EZ, or 990-PF.

Schedule B (F	orm 990, 990-EZ, or 990-PF) (2009)		Page 1 of 1 of Part I
Name of or	ganization	Emplo	yer identification number
PIEDM	ONT NATURAL GAS FOUNDATION	5	5-6047886
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	PIEDMONT NATURAL GAS		Person X Payroll
	4720 PIEDMONT DRIVE	\$ <u>1,251,800</u> .	Noncash (Complete Part II if there
	CHARLOTTE, NC 28210		is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
······································		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroli

Noncash

(Complete Part II if there is a noncash contribution.)

Schedule B (F	orm 990, 990-EZ, or 990-PF) (2009) Qanization		Page of of Part II Employer identification number
	ONT NATURAL GAS FOUNDATION	56-6047886	
Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions	
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions	l llate received

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

(d)

Date received

(c)

FMV (or estimate)

(see instructions)

(a)

No.

from

Part I

(b)

Description of noncash property given

Schedule B (For Name of org	rm 990, 990-EZ, or 990-PF) (2009) anization		Page of of Part III Employer identification number			
DIEDMO	ONT NATURAL GAS FOUNDAT	TON	56-6047886			
Part III	Exclusively religious, charitable, etc., in	dividual contributions to section columns (a) through (e) and the f us, chantable, etc., contributions	n 501(c)(7), (8), or (10) organizations aggregating following line entry. For organizations completing of			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
<u> </u>		(e) Transfer of gift				
-	Transferee's name, address, ar	nd 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, ar	nd 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, ar	nd 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, ar	nd ZIP + 4	Relationship of transferor to transferee			
			· ·			

FORM 990-PF INTEREST ON SAVI	NGS AND TEN	IPORARY C	ASH II	NVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
BOND INTEREST				•	56,0	75.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	OLUMN A			56,0	75.
FORM 990-PF DIVIDEND	S AND INTER	REST FROM	SECUI	RITIES	STATEMENT	2
SOURCE	GROSS	S AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT)
DIVIDENDS FROM FFTC POOL INTEREST		44,264. 271. 90,913.		0. 0. 0.	44,2 2 90,9	71.
TOTAL TO FM 990-PF, PART I, I	N 4	135,448.		0.	135,4	48.
FORM 990-PF C	THER PROFES	SSIONAL F	EES		STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		
INVESTMENT FEE ADMINISTRATIVE FEES	19,501 64,956		,501.		64,9	0. 56.
TO FORM 990-PF, PG 1, LN 16C =	84,457	19	,501.		64,9	56.
FORM 990-PF	TAX	KES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		
FEDERAL EXCISE TAX	1,720	•	0.			0.
TO FORM 990-PF, PG 1, LN 18	1,720	•	0.			0.
=		=				

FORM 990-PF	OTHER E	XPENSES	 STA	ATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) DJUSTED I INCOME	(D) CHARITA PURPOS	
OFFICE EXPENSE POSTAGE	485. 7.			4	85. 7.
TO FORM 990-PF, PG 1, LN 23	492.	0.	 	4	92.
	NTS AND CON AID DURING		STA	ATEMENT	6
RECIPIENT NAME AND ADDRESS		IENT RELATIONS PURPOSE OF GR	RECIPIEN' STATUS	r AMOU	NT
ALBEMARLE AREA UNITED WAY P.O. BOX 293 ELIZABETH CITY, 27907-0293	NONE NC CIVIC		501(C)(3) / 509(A)(1)	8	00.
ANSON UNITED WAY P.O. BOX 179 WADESBORO, NC 28170	NONE CIVIC		501(C)(3) / 509(A)(1)	3	50.
ARTS & SCIENCE COUNCIL 227 W. TRADE STREET, SUITE #2 CHARLOTTE, NC 28202	NONE 50 CIVIC		501(C)(3) / 509(A)(1)	20,0	00.
BURKE COUNTY UNITED WAY 301 EAST MEETING STREET MORGANTON, NC 28655	NONE CIVIC		501(C)(3) / 509(A)(1)	9	00.
CAPE FEAR AREA UNITED WAY 5919 OLEANDER DRIVE, SUITE #1 WILMINGTON, NC 28401	NONE 15 CIVIC		501(C)(3) / 509(A)(1)	3,4	00.
CAROLINA RAPTOR CENTER, INC. P.O. BOX 16443 CHARLOTTE, NC 28297		ION	501(C)(3) / 509(A)(1)	5,0	00.

PIEDMONT NATURAL GAS FOUNDATION			56-6047886
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	501(C)(3) / 509(A)(1)	150.
UNITED WAY OF CATAWBA COUNTY, INC. P O BOX 2425 HICKORY, NC 28603	NONE	501(C)(3) / 509(A)(1)	4,700.
UNITED WAY OF CENTRAL CAROLINAS, INC. 301 S. BREVARD STREET CHARLOTTE, NC 28202	NONE	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.

PIEDMONT NATURAL GAS FOUNDATION			56-6047886
UNITED WAY OF FORYSTH COUNTY 301 N. MAIN STREET, SUITE #1700	NONE	501(C)(3)	10,500.
WINSTON-SALEM, NC 27101	CIVIC	509(A)(1)	
UNITED WAY OF GREENVILLE COUNTY	NONE	501(C)(3)	16,800.
301 UNIVERSITY RIDGE, SUITE #5300 GREENVILLE, SC 29601-4702	CIVIC	509(A)(1)	
UNITED WAY OF MIDDLE TENNESSEE,	NONE	501(C)(3)	30,000.
INC. P.O. BOX 280420 NASHVILLE, TN 37228-0420	CIVIC	509(A)(1)	
UNITED WAY OF MOORE COUNTY 375-D SOUTHEAST BROAD STREET	NONE CIVIC	501(C)(3)	850.
SOUTHERN PINES, NC 28387	CIVIC	/ 509(A)(1)	
UNITED WAY OF ONSLOW COUNTY, INC		501(C)(3)	150.
8 RUTH STREET JACKSONVILLE, No. 28540-4828		/ 509(A)(1)	
UNITED WAY OF RICHMOND COUNTY	NONE	501(C)(3)	1,350.
P.O. BOX 153 ROCKINGHAM, NC 28380	CIVIC	/ 509(A)(1)	
UNITED WAY OF ROBESON COUNTY	NONE	501(C)(3)	2,250.
P.O. BOX 2652 LUMBERTON, NC 28359	CIVIC	509(A)(1)	
UNITED WAY OF ROCKINGHAM COUNTY,	NONE	501(C)(3)	3,500.
INC. P.O. BOX 317 WENTWORTH, NC 27375-0317	CIVIC	509(A)(1)	
UNITED WAY OF ROWAN COUNTY 1930 WEST JAKE ALEXANDER BLVD.	NONE CIVIC	501(C)(3)	4,900.
SALISBURY, NC 28147	CIVIC	, 509(A)(1)	
UNITED WAY OF SCOTLAND COUNTY	NONE	501(C)(3)	800.
P.O. BOX 742 LAURINBURG, NC 28353	CIVIC	7 509(A)(1)	

PIEDMONT NATURAL GAS FOUNDATION			56-6047886
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		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		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	501(C)(3) / 509(A)(1)	1,500.
	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.

PIEDMONT NATURAL GAS FOUNDATION			56-6047886
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	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.

PIEDMONT NATURAL GAS FOUNDATION			56-6047886
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		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.

PIEDMONT NATURAL GAS FOUNDATION			56-6047886
UNITED WAY OF ALEXANDER COUNTY P.O. BOX 232 TAYLORSVILLE, NC 28681-0232	NONE	501(C)(3) / 509(A)(1)	500.
UNITED WAY OF CATAWBA COUNTY, INC. P O BOX 2425 HICKORY, NC 28603	NONE	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	110112	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		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.

PIEDMONT NATURAL GAS FOUNDATION			56-6047886
CHEROKEE COUNTY MEALS ON WHEELS P.O.BOX 1886 GAFFNEY, SC 29342		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 NASHVLILE, TN 37216-2522	NONE EDUCATION	501(C)(3) / 509(A)(1)	2,000.
FANNIE BATTLE DAY HOME FOR CHILDREN, INC. 911 SHELBY AVENUE NASHVLILE, 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		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	501(C)(3) / 509(A)(1)	1,000.
JUNIOR ACHIEVEMENT OF CENTRAL NC, INC. 3220 NORTHLINE AVE. GREENSBORO, NC 27408	NONE	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.

PIEDMONT NATURAL GAS FOUNDATION			56-6047886
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	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.

PIEDMONT NATURAL GAS FOUNDATION			56-6047886
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		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	Ī	!	56-6047886
SOUTH CAROLINA GOVERNOR'S OFFICE		501(C)(3)	12,000.
1205 PENDLETON STREET COLUMBIA, SC 29209	CIVIC	/ 509(A)(1)	
TENNESSEE PERFORMING ARTS CENTER		501(C)(3)	5,000.
505 DEADERICK STREET NASHVILLE, TN 37243-1402	EDUCATION	, 509(A)(1)	
UNC CHARLOTTE FOUNDATION		501(C)(3)	2,500.
9201 UNIVERSITY CITY BOULEVARD CHARLOTTE, NC 28223	EDUCATION	/ 509(A)(1)	
W.S.O., INC.	NONE	501(C)(3)	2,000.
4608 CEDAR AVENUE, SUITE #105 WILMINGTON, NC 28403	CHARITABLE	/ 509(A)(1)	
WINSTON-SALEM FOUNDATION	NONE	501(C)(3)	2,000.
860 WEST 5TH STREET WINSTON-SALEM, NC 27101-2506	EDUCATION	/ 509(A)(1)	
YOUNG WOMEN'S CHRISTIAN	NONE	501(C)(3)	2,500.
ASSOCIATION 112 GATEWOOD AVENUE HIGH POINT, NC 27262-4945	CIVIC	/ 509(A)(1)	
CHURCH WORLD SERVICE, INC. "CWS CROP WALK"	NONE CHARITABLE	501(C)(3)	2,000.
CROF WALK 300 HAWTHORNE LANE CHARLOTTE, NC 28204	CHARTTABLE	, 509(A)(1)	
DEVELOPMENT FOUNDATION OF THE NC	NONE CHARITABLE	501(C)(3)	10,000.
276 NCCAT DRIVE CULLOWHEE, NC 27823-9062	CHARTTABLE	/ 509(A)(1)	
CAROLINAS HEALTHCARE FOUNDATION P.O. BOX 32861 CHARLOTTE, NC	NONE	501(C)(3)	25,000.
28232	CHARITABLE	/ 509(A)(1)	
FOUNDATION FOR THE CAROLINAS	NONE	501(C)(3)	110,000.
217 SOUTH TRYON STREET CHARLOTTE, NC 28202	CHARITABLE	/ 509(A)(1)	

PIEDMONT NATURAL GAS FOUNDATION

56-6047886

GOVENOR'S BOOKS FROM BIRTH FOUNDATION

NONE CHARITABLE 501(C)(3) 85,000.

509(A)(1)

710 JAMES ROBERTSON PKWY

NASHVILLE, TN 37243

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

1,000,347.

STATEMENT

FORM 990-PF

	FOR FUTURE PAYMENT		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
ARTS & SCIENCE COUNCIL 227 W. TRADE STREET, SUITE #250 CHARLOTTE, NC 28202	NONE	501(C)(3) / 509(A)(1)	80,000.
CHILDREN'S MUSEUM OF THE UPSTATE 300 COLLEGE ST GREENVILLE, SC 29601		501(C)(3) / 509(A)(1)	20,000.
FOUNDATION FOR THE CAROLINAS 217 S. TRYON STREET CHARLOTTE, NC 28202		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		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, LI	INE 3B		385,000.

GRANTS AND CONTRIBUTIONS

Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

-	re filing for an Automatic 3-Month Extension, complete only Part I and check this box	▶ X		
	tre filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this			
	omplete Part II unless you have already been granted an automatic 3-month extension on a previously f	mied Form 6066.		
Pärt I	Automatic 3-Month Extension of Time. Only submit original (no copies needed)			
A corpora	tion required to file Form 990-T and requesting an automatic 6-month extension - check this box and cor	mplete		
Part I only		▶ 🗀		
	corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request a Tome tax returns	n extension of time		
noted bel (not autor you must	c Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronication (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consult the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic from the file for Chanties & Nonprofits	nically if (1) you want the additional onsolidated Form 990-T Instead,		
Type or	Name of Exempt Organization	Employer identification number		
print				
File by the	PIEDMONT NATURAL GAS FOUNDATION	56-6047886		
due date for filing your return See	Number, street, and room or suite no. If a P.O. box, see instructions. 1525 WEST WT HARRIS BLVD			
nstructions	City, town or post office, state, and ZIP code For a foreign address, see instructions. CHARLOTTE, NC 28288			
Check ty	pe of return to be filed (file a separate application for each return):			
For	m 990 Form 990-T (corporation) Form 4	720		
	m 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5			
===	m 990·EZ Form 990·T (trust other than above) Form 6			
	m 990-PF	870		
Teleph If the co	WACHOVIA BANK, NA 1525 WEST W.T. HARRIS BLVD CHARLOTTE one No. ► 919-881-6497 FAX No ► organization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the	▶ ☐		
>>> L	If it is for part of the 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.		
us fo	quest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitary and the organization of the organization named and the organization of the organization of the organization named and the organization of the organization of the organization of time unitary and the organization of the organization of time unitary and the organization of the			
₽ [X calendar year 2009 or and ending and ending			
	tax year beginning , and ending	 •		
2 If th	is tax year is for less than 12 months, check reason: Initial return Final return	Change in accounting period		
	is application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
	refundable credits. See instructions.	3a \$ 0.		
b If th	is application is for Form 990-PF or 990-T, enter any refundable credits and estimated	3b \$ 3,256		
tax	payments made. Include any prior year overpayment allowed as a credit.	7.5		
c Bala	ance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	55 J		
c Bala dep				

Form 886	8 (Řev. 4-2009)			Page 2
• If you	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this			▶ X
	nly complete Part II if you have already been granted an automatic 3-month extension on a previously file	a Form	8868	
	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)			
Part I		т —		
Type or	Name of Exempt Organization	Emp	oloyer identif	ication number
print				886
File by the extended due date for	Number, street, and room or suite no. If a P.O. box, see instructions.	For I	RS use only	
filing the	1323 WEST WI MARKIS BEVD			
return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions CHARLOTTE, NC 28288			<u> </u>
☐ Fo	rm 990 Form 990-PF Form 990-T (trust other than above) Form 4720	\equiv	orm 5227 orm 6069	Form 8870
STOP! D	o not complete Part II if you were not already granted an automatic 3-month extension on a previo	usly file	ed Form 886	 8.
	WACHOVIA BANK, NA books are in the care of ► 1525 WEST W.T. HARRIS BLVD CHARLOTT chone No ► 919-881-6497 FAX No ►	E, N	IC 2828	8
-	organization does not have an office or place of business in the United States, check this box			
		his is fo	r the whole a	roup, check this
box 🕨	If it is for part of the group, check this box \(\bigsim \) and attach a list with the names and ElNs of a		_	
	quest an additional 3-month extension of time until NOVEMBER 15, 2010		oro the oxter	10.011.0
	calendar year 2009, or other tax year beginning and ending			
	his tax year is for less than 12 months, check reason Initial return Final return	$\neg \neg$	Change in ac	counting period
	tte in detail why you need the extension		Orialigo in ac	.coa.m.ig pomoe
	DDITIONAL TIME IS REQUIRED IN ORDER TO GATHER THE IN	FORM	ATION I	NECESSARY
TC	FILE A COMPLETE AND ACCURATE RETURN.			
8a If ti	nis application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
nor	nrefundable credits. See instructions	8a	\$	0.
b If the	nis application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated			-
tax	tax payments made Include any prior year overpayment allowed as a credit and any amount paid]	
pre	previously with Form 8868		\$	3,256.
c Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit				
wit	h FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$	0.
	Signature and Verification			
Under pen	alties of perjuy), declare that I have examined this form, including accompanying schedules and statements, and to t orrect, and complete, and that I am authorized to prepare this form	ne best c	of my knowledg	e and belief,
Cianatura	(A) (Longon Ma)	Data	. R	14/10

Form 8868 (Rev. 4-2009)