EXTENDED TO NOVEMBER 15, 2023

Return of Organization Exempt From Income Tax

Form **990**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

and ending

OMB No. 1545-0047 Open to Public

Department of the Treasury

A For the 2022 calendar year, or tax year beginning

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

Check if applicable: C Name of organization D Employer identification number THE PIEDMONT ENVIRONMENTAL COUNCIL **-***5569 Name change Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final 540-347-2334 45 HORNER STREET 7,544,745. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended WARRENTON, VA 20186 H(a) Is this a group return F Name and address of principal officer: CHRISTOPHER G. MILLER for subordinates? Yes X No pendina 45 HORNER STREET, WARRENTON, VA 20186 H(b) Are all subordinates included? Yes I Tax-exempt status: ■ 501(c)(3) ■ 501(c) ((insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions J Website: WWW.PECVA.ORG H(c) Group exemption number K Form of organization: X Corporation Trust Association Year of formation: 1972 M State of legal domicile: VA Part I Summary 1 Briefly describe the organization's mission or most significant activities: PROMOTING AND PROTECTING THE Activities & Governance NATURAL RESOURCES, RURAL ECONOMY, HISTORY AND BEAUTY OF THE VIRGINIA if the organization discontinued its operations or disposed of more than 25% of its net assets. 34 Number of voting members of the governing body (Part VI, line 1a) 34 Number of independent voting members of the governing body (Part VI, line 1b) 4 70 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 6 Total number of volunteers (estimate if necessary) 1268 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 Prior Year **Current Year** 6,063,415. 6,746,307. Contributions and grants (Part VIII, line 1h) 0. 0. Program service revenue (Part VIII, line 2g) 65,469. -4,537. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) -153,540. -799. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 6,128,085. 6,588,230. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 136,240. 38,224. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 4,043,662. 4,886,680. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. **b** Total fundraising expenses (Part IX, column (D), line 25) 1,702,828. 1,847,477. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 6,870,397. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 5,784,714. 343,371. -282,167. 19 Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year **End of Year** 11,176,423. 11,007,293. 20 Total assets (Part X, line 16) 409,148. 522,185. 21 Total liabilities (Part X, line 26) 10,767,275. 485,108. Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign CHRISTOPHER G. MILLER, PRESIDENT Here Type or print name and title Date PTIN Preparer's signature Print/Type preparer's name JENNIFER R. FILES, C 05/10/23 self-employed JENNIFER R. FILES, CPA ₱01275752 Paid Firm's EIN **-***9263 YOUNT, HYDE & BARBOUR, P.C. Preparer Firm's name Firm's address P.O. BOX 2560 Use Only Phone no. 540 - 662 - 3417WINCHESTER, VA 22604-1760 X Yes May the IRS discuss this return with the preparer shown above? See instructions

Pai	t III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	PEC SAFEGUARDS THE LANDSCAPES, COMMUNITIES AND HERITAGE OF VIRGINIA'S	
	PIEDMONT BY INVOLVING CITIZENS IN RELATED PUBLIC POLICY AND LAND	
	CONSERVATION.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	<u>X</u> No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	<u>X</u> No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a	(Code:)(Expenses \$1,684,206. including grants of \$67,935.) (Revenue \$ CONSERVATION, STEWARDSHIP AND HABITAT-RESEARCH THE ECONOMICS OF RURAL)
	LAND PRESERVATION, PROVIDE PUBLIC EDUCATION ON LAND CONSERVATION	
	OPTIONS AND ACQUIRE AND PRESERVE VITAL PROPERTY; PROVIDE TECHNICAL	
	ASSISTANCE TO LANDOWNERS ON NATIVE HABITAT LAND MANAGEMENT PRACTICES.	
	PEC HAS HELPED LANDOWNERS PERMANENTLY PROTECT MORE THAN 439,000 ACRES	
	OF RURAL OR NATURAL LAND. CONSERVATION EASEMENTS HELP ENSURE THAT THE	
	VIRGINIA PIEDMONT IS ALWAYS CHARACTERIZED BY ITS OPEN SPACES, HEALTHY	
	ENVIRONMENT AND CULTURAL RESOURCES.	
	ENTERIOR TO SOLITION TO SOLITI	
4b	(Code:) (Expenses \$912,032. including grants of \$6,000.) (Revenue \$	
	COUNTY ISSUES - ANALYZE COUNTY PLANNING PROPOSALS FOR ENVIRONMENTAL	
	IMPACT AND DEVELOP SOUND CONSERVATION ALTERNATIVES.	
4c	(Code:) (Expenses \$ 749,581. including grants of \$ 25,900.) (Revenue \$	
	LAND USE AND POLICY - ANALYZE LOCAL, REGIONAL, STATE AND FEDERAL	
	POLICIES THAT AFFECT VIRGINIA'S NORTHERN PIEDMONT AND PROVIDE PUBLIC	
	EDUCATION.	
4d	Other program services (Describe on Schedule O.)	
·u	(Expenses \$ 1, 263, 354 • including grants of \$ 36, 405 •) (Revenue \$	
4e	Total program service expenses 4,609,173.	
	Form 99 0	(2022)

Form 990 (2022) THE PIEDMONT ENVIRONMENTAL COUNCIL Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	X	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	_		37
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			77
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X,			
_	as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 107 If "Yes," complete Schedule D,			
а		11a	х	
b	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	1 Ia	- 21	
Б	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		_X_
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	ا ا		v
45	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		X
15		4.5		Х
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
.,	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	- <i>'</i> '		
	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
		_	aan	(0000)

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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		_
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	0.5		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	OEL		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b		
26	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L. Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	_20		
_,	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		_X_
29	Did the organization receive more than \$25,000 in non cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		_X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	<u> </u>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>X</u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			₩.
	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	07		х
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par		30	21	
	Check if Schedule O contains a response or note to any line in this Part V			
	2.125.1. 25.134did & Containe a recipence of note to any line in allo I are v		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 76		.03	1,10
h	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
,	(gambling) winnings to prize winners?	1c	Х	
232004	12-13-22			(2022)

Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 70			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Didd. 000	3a		Х
	KINA HIL HELL FOR CONTAINING	3b		
	It "Yes," has it filed a Form 990-1 for this year? If "No" to line 3b, provide an explanation on Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	30		
40	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
	If "Yes," enter the name of the foreign country	48		
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
E.		E.		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
ьа	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	0-		x
	any contributions that were not tax deductible as charitable contributions?	6a		
р	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	01		
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	_	v	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		\ _V
	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	_		37
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		_
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	_		
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		-
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	4.		v
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			\ v
	excess parachute payment(s) during the year?	15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			77
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes." complete Form 6069.			

232005 12-13-22

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 34			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 34			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Х	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		7,7	
	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
40-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
ıba	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16-		Х
L-	taxable entity during the year?	16a		Λ
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Sec	exempt status with respect to such arrangements?	100		
<u> 17</u>	List the states with which a copy of this Form 990 is required to be filed VA, DC, MD			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only)	availah	nle
10	for public inspection. Indicate how you made these available. Check all that apply.	Or iiy)	availal	
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	ial	
	statements available to the public during the tax year.	man		
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
0	DIRECTOR OF FINANCE - 540-347-2334			
	45 HORNER STREET, WARRENTON, VA 20186			

Form **990** (2022)

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average		not c		more	than o		Reportable	Reportable	Estimated
	hours per		box, unless person is bofficer and a director/to					compensation	compensation	amount of
	week (list any	-					,	from the	from related organizations	other compensation
	hours for	director				p		organization	(W-2/1099-MISC/	from the
	related	Ιb	ıstee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	l trusi	nal tru		oyee	ompe		1099-NEC)	·	and related
	below	ndividual trustee	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	5		organizations
	line)	틸	Inst	0#ij	Ke	eg Eig	For	7		
(1) KATHERINE L IMHOFF	40.00	-				7.		265 227	0.	20 000
SR. CONSERVATION FELLOW (2) CHRISTOPHER MILLER	40.00	├			_	X		265,327.	0.	29,998.
	40.00	-		X				224 267	0.	21 216
PRESIDENT	40.00	\vdash	\vdash	<u>^</u>	6			224,367.	0.	31,316.
(3) NORA SEILHEIMER	40.00	1				V		121 100	0.	15 565
ADVANCEMENT DIRECTOR (4) JAMES S. SCHWARTZ	40.00	K				X		131,188.	0.	15,565.
EXECUTIVE DIRECTOR	40.00	┦ "				X		125,085.	0.	21,559.
(5) DAVID FREDENBURGH	40.00					^		123,003.	0.	21,339.
DIRECTOR OF FINANCE	40.00	1		Х				112,947.	0.	15,236.
(6) JOHN W. MCCARTHY III	40.00								•	
SENIOR POLICY ADVISOR		1				x		106,114.	0.	20,369.
(7) MIKE KANE	40.00									
DIRECTOR OF CONSERVATION						Х		100,119.	0.	19,123.
(8) JEAN PERIN	3.00									
CO-CHAIR		X		Х				0.	0.	0.
(9) JOHN BIRDSALL III	3.00								_	_
DIRECTOR		X						0.	0.	0.
(10) HAMILTON MOSES III	3.00							_		
DIRECTOR		Х						0.	0.	0.
(11) LAURIE VOLK	3.00									
DIRECTOR	2 22	X						0.	0.	0.
(12) LESLIE COCKBURN	3.00									•
DIRECTOR	2 00	X			_			0.	0.	0.
(13) LINDA "BOO" INGRAM	3.00	ļ.,							_	•
DIRECTOR	2 00	X						0.	0.	0.
(14) LYNN WILEY DIRECTOR	3.00	X						0.	ا ہ ا	^
(15) DAVID ALDRICH	3.00	<u> </u> ^						0.	0.	0.
TREASURER	3.00	X		х				0.	0.	0.
(16) JOHN GRANO	3.00	├^		^				0.	0.	0.
DIRECTOR	3.00	x						0.	0.	0.
(17) NATALIE PIEN	3.00	 ^	\vdash	\vdash	\vdash			•		J •
DIRECTOR	7.00	x						0.	0.	0.
222007 12 12 22	1				_	_				Form 990 (2022)

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Form **990** (2022)

Form 990 (2022) THE PIED	MONT ENV	/IR	ON	ΜE	NT	AL	C	OUNCIL	**-***5	569 Page 8	
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(A)	(B)			(0	C)			(D)	(E)	(F)	
Name and title	Average	Position (do not check more than one						Reportable	Reportable	Estimated	
	hours per	box	, unles	ss per	rson is	s both	n an	compensation	compensation	amount of	
	week	\vdash	Lei aii	uau	recto	i/iius	lee)	from	from related	other	
	(list any hours for	lirecto						the organization	organizations (W-2/1099-MISC/	compensation from the	
	related	9 Or 0	stee			ısatec		(W-2/1099-MISC/	1099-NEC)	organization	
	organizations	Individual trustee or director	nstitutional trustee		yee	Highest compensated employee		1099-NEC)	, , , , , , , , , , , , , , , , , , , ,	and related	
	below	vidual	tution	Je.	Key employee	lest co	ner			organizations	
	line)	lndj	Insti	Officer	Key 6	High	Former				
(18) ROBERT "BOB" BERNARD	3.00								_		
DIRECTOR		X						0.	0.	0.	
(19) ROY DYE	3.00								_		
DIRECTOR		X					_	0.	0.	0.	
(20) SETH HEALD	3.00										
DIRECTOR		Х					_	0.	0.	0.	
(21) STEVE DAHLLOF	3.00									_	
DIRECTOR		Х					_	0,	0.	0.	
(22) SUSAN GALLAGHER	3.00							.6		_	
DIRECTOR		X					_	0.	0.	0.	
(23) GEORGE OHRSTROM II	3.00										
CO-CHAIR		X		Х			_	0.	0.	0.	
(24) JIM HURLEY	3.00									•	
DIRECTOR		X						0.	0.	0.	
(25) VIRGINIA WILSON	3.00	١								•	
DIRECTOR	1 2 00	X						0.	0.	0.	
(26) BONNIE MATTINGLY	3.00	. ,							_	0	
DIRECTOR		X	Щ,	.				0. 1,065,147.	0.	0. 153,166.	
1b Subtotal								1,065,147.	0.		
c Total from continuation sheets to Part V									0.	0.	
d Total (add lines 1b and 1c)				<u>.</u>				1,065,147.		153,166.	
2 Total number of individuals (including but	not limited to th	ose	liste	d ab	ove) wh	o re	ceived more than \$100,	000 of reportable	7	
compensation from the organization	- • C	-								Yes No	
O Did the consciention list and for Many							le tori	h t t !		res No	
3 Did the organization list any former officer	, airector, trust	ee, k	ey e	empi	oye	e, or	nıg	nest compensated emp	loyee on		

3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Х	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			
	rendered to the organization? If "Yes " complete Schedule I for such person	5		Х

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(B) Description of services	(C) Compensation
NT RENTALS	145,120.
.1	Description of services

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2022)

Form 990 THE PIED	MOM FIN	<u> </u>	COL	1111	T/ T	ΑП		OONCIL	**-**	5565
Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, ar	nd H	ligh	est (Compensated Employe	ees (continued)	
(A)	(B)			(((D)	(E)	(F)
Name and title	Average			Pos				Reportable	Reportable	Estimated
	hours	(c		all t			ly)	compensation	compensation	amount of
	per	Ė					<u> </u>	from	from related	other
	week	١.				yee		the	organizations	compensation
	(list any	recto				empl		organization	(W-2/1099-MISC)	from the
	hours for	or di	99			sated		(W-2/1099-MISC)		organization
	related organizations	ustee	trust		ee	ubeus				and related organizations
	below	lual tr	tional		nploy	st con	L			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) BRAD BONDI	3.00	┢	-		_	_	_			
DIRECTOR	3,00	x						0.	0.	0
(28) CHLOE SQUIRES	3.00									
DIRECTOR		x						0.	0.	0
(29) CHRIS MCLEAN	3.00									
DIRECTOR		x						0.	0.	0
(30) TANIA CUBITT	3.00	T -								
DIRECTOR		x						0.	0.	0
(31) ELEANOR MORISON	3.00									
DIRECTOR		x						0.	0.	0
(32) GEORGE GRAYSON	3.00									
DIRECTOR		x						0.	0.	0
(33) MARIE RIDDER	3.00									
DIRECTOR		X						0.	0.	0
(34) GEORGE OVERSTREET	3.00						1			
DIRECTOR		Х						0.	0.	0
(35) JAMES KLEEBLATT	3.00									
DIRECTOR		Х						0.	0.	0
(36) EUGENE GULLAND	3.00				1					
DIRECTOR		X			Ů			0.	0.	0
(37) ALTON KEEL	3.00									
SECRETARY		X		X				0.	0.	0
(38) JIM COLLINS	3.00									
DIRECTOR		Х						0.	0.	0
(39) HELEN DUBOIS	3.00]								
DIRECTOR		X						0.	0.	0
(40) MARK J. OHRSTROM	3.00									_
VICE CHAIR	·	X		Х				0.	0.	0
(41) MIMI ABEL SMITH	3.00	ļ								_
DIRECTOR		X						0.	0.	0
*		-								
		_								
		-								
	1	_	_							
		-								
		-								
		1								
	+	\vdash								
		1								
	1									

Part VIII	Statement of Revenue

		Check if Schedule O contains a response or	note to any lin	e in this Part VIII			
				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
					Tariotion revenue	business revenue	sections 512 - 514
ts ts	1	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues					
Å,		Fundraising events1c	668,954.				
ii ii		Related organizations 1d	1,755,428.				
inil		Government grants (contributions)	113,097.				
r i		All other contributions, gifts, grants, and					
ğ		similar amounts not included above 1f	4,208,828.				
ag de		Noncash contributions included in lines 1a-1f 1g \$	589,389.				
<u>8</u>		Total. Add lines 1a-1f		6,746,307.			
		<u> </u>	Business Code				
8	2	·					
Program Service Revenue							
S c		:			\sim		
ĕã		J					
5		•			-1		
۱ ۵		All other program service revenue					
\dashv		Total. Add lines 2a-2f					
	3	Investment income (including dividends, interest,					
	_	other similar amounts)					
	4	Income from investment of tax-exempt bond prod					
	5	Royalties(i) Real					
	_		(ii) Personal				
		a Gross rents 6a	*				
		Less: rental expenses 6b					
		Rental income or (loss) 6c					
		Net rental income or (loss)	(ii) Other				
	7		(II) Other				
		·					
a l		Less: cost or other basis and sales expenses 7b 473,548.					
) ž							
Other Revenue		Gain or (loss) 7c 4,537. Net gain or (loss)		-4,537.			-4,537.
<u>بر</u> ا		Gross income from fundraising events (not		4,557.			4,557.
₹	0	including \$ 668,954. of					
١		contributions reported on line 1c). See					
		Part IV, line 188a	197,700.				
		Less: direct expenses 8b	482,967.				
		Net income or (loss) from fundraising events	, -	-285,267.			-285,267.
		Gross income from gaming activities. See		, .			, .
		Part IV, line 19 9a					
		Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
		Gross sales of inventory, less returns					
		and allowances 10a					
		Less: cost of goods sold 10b					
		Net income or (loss) from sales of inventory					
		` ′	Business Code				
Si (11	OTHER REVENUE	900099	131,727.			131,727.
Miscellaneous Revenue)					
ĕ ĕ		;					
₽Ĭŝ		All other revenue					
		Total. Add lines 11a-11d		131,727.			
	12	Total revenue. See instructions		6,588,230.	0.	0.	-158,077.
22200	10.	0.00					Form 990 (2022)

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	990 (2022) THE PIEDMON TIX Statement of Functional Expens	es ENVIRONMENT	TAL COUNCIL		^^5569 Page 10
Secti	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All othe	er organizations must cor	mplete column (A).	
	Check if Schedule O contains a respo	nse or note to any line in	this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	123,161.	123,161.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	13,079.			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	383,866.	111,377.	236,228.	36,261.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	3,123,250.	2,151,079.	608,867.	363,304.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	139,910.	97,538.	26,016.	16 356
9	Other employee benefits	953,086.	619,639	225,887.	16,356. 107,560.
10	Payroll taxes	286,568.	186,522.	67,277.	32,769.
11	Fees for services (nonemployees):	200,300.	100,522	07,2776	32,703.
	Management		()		
	Legal	96,143.	7,283.	88,860.	
	Accounting	49,865.		49,865.	
	Lobbying	68,306	68,006.	300.	
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)	541,255.	454,648.	79,332.	7,275.
12	Advertising and promotion	16,403.	2,456.	13,317.	630.
13	Office expenses	218,954.	156,561.	28,420.	33,973.
14	Information technology	97,571.	70,487.	15,891.	11,193.
15	Royalties	155 600	100 010	10.001	
16	Occupancy	157,629.	129,312.	19,081.	9,236.
17	Travel	66,710.	55,747.	3,154.	7,809.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	110,034.	45,952.	26,115.	37,967.
20	Interest	1,486.		1,486.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	175,585.	114,109.	41,426.	20,050.
23	Insurance	60,859.	40,947.	13,418.	6,494.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	OTHER EXPENSES	162,178.	142,140.	10,855.	9,183.
b	DUES AND SUBSCRIPTIONS	24,499.	19,130.	4,859.	510.
С					
d					
	All other expenses	6 970 207	1 600 172	1 560 654	700 570
25	Total functional expenses. Add lines 1 through 24e	6,870,397.	4,609,173.	1,560,654.	700,570.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

Pai	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			911,513.	1	687,622.
	2					2	
	3	Pledges and grants receivable, net			428,153.	3	377,869.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or	former	officer, director,			
		trustee, key employee, creator or founder, subst	antial c	ontributor, or 35%			
		controlled entity or family member of any of thes	e perso	ons		5	
	6	Loans and other receivables from other disqualif	ied per	sons (as defined			
		under section 4958(f)(1)), and persons described				6	
ts	7	Notes and loans receivable, net			92,866.	7	151,933.
Assets	8	Inventories for sale or use				8	
Ā	9	Prepaid expenses and deferred charges			76,021.	9	113,935.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D Less: accumulated depreciation	10a	4,146,772.	0. 550		0.655.064
	b	Less: accumulated depreciation	10b	1,490,811.	2,773,604.	10c	2,655,961.
	11	Investments - publicly traded securities			- 1	11	
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets			004 266	14	7 010 072
	15	Other assets. See Part IV, line 11			6,894,266.	15	7,019,973.
	16	Total assets. Add lines 1 through 15 (must equa			11,176,423.	16	11,007,293.
	17	Accounts payable and accrued expenses			409,140.	17	396,334.
	18	Grants payable				18	
	19	Deferred revenue		*.C)		19	
	20	Tax-exempt bond liabilities		of Cohodula D		20	
	21 22	Escrow or custodial account liability. Complete F Loans and other payables to any current or form				21	
Liabilities	22	trustee, key employee, creator or founder, subst					
piit		controlled entity or family member of any of these	_			22	
Lia	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, par					
	20	parties, and other liabilities not included on lines					
			,		0.	25	125,851.
	26	Total liabilities. Add lines 17 through 25			409,148.	26	522,185.
		Organizations that follow FASB ASC 958, che	ck her	e X	•		·
es		and complete lines 27, 28, 32, and 33.					
anc	27				6,786,425.	27	6,697,315.
Bal	28	Net assets with donor restrictions			3,980,850.	28	3,787,793.
P		Organizations that do not follow FASB ASC 9					
Ŀ		and complete lines 29 through 33.					
s or	29	Capital stock or trust principal, or current funds				29	
set	30	Paid-in or capital surplus, or land, building, or eq				30	
As	31	Retained earnings, endowment, accumulated inc				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			10,767,275.	32	10,485,108.
	33	Total liabilities and net assets/fund balances			11,176,423.	33	11,007,293.
				<u> </u>	<u> </u>		Form 990 (2022)

Pa	rt XI Reconciliation of Net Assets					,
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,5	88	, 23	<u> 30.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,8			
3	Revenue less expenses. Subtract line 2 from line 1	3		82	<u>,1</u>	67.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	10,7	67	<u>, 2'</u>	75 <u>.</u>
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	10,4	85	<u>,1(</u>	<u> </u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII				$\overline{}$	X
				١,	'es	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis				,,	
b	Were the organization's financial statements audited by an independent accountant?		2	b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				.,	
	review, or compilation of its financial statements and selection of an independent accountant?		2	:c	<u> </u>	
_	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					Х
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3	a	\dashv	
D	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits and all and a undergo the required audit or audits and a undergo audits.			.		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			b	<u>an</u> /	2022)
			FO	rm ə	90 (2022)
	X .					

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number **-***5569 THE PIEDMONT ENVIRONMENTAL COUNCIL Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I. Type III. Type III. functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	5939412.	8201909.	5698458.	6063415.	6746307.	32649501.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	5939412.	8201909.	5698458.	6063415.	6746307.	32649501.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						2863450.
6	Public support. Subtract line 5 from line 4.						29786051.
	ction B. Total Support	T		\rightarrow		T	Т
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4	5939412.	8201909.	5698458.	6063415.	6746307.	32649501.
8	Gross income from interest,						
	dividends, payments received on		+ (
	securities loans, rents, royalties,	60 076	15 650		•		02 425
	and income from similar sources	62,276.	15,650.	5,500.	9.	0.	83,435.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital	. 5 - 700	FF 100	167 004	112 140	1 2 1 7 2 7	470 540
	assets (Explain in Part VI.)	5,408.	55,182.	16/,084.	113,142.	131,/2/.	472,543. 33205479.
	Total support. Add lines 7 through 10		`				332054/9.
	Gross receipts from related activities,		,			12	
13	First 5 years. If the Form 990 is for the						
500	organization, check this box and stop ction C. Computation of Publi		centage				
	Public support percentage for 2022 (I			aluman (f)		14	89.70 %
						15	89.70 % 89.98 %
	Public support percentage from 2021 33 1/3% support test - 2022. If the o						
108		-					
h	stop here. The organization qualifies 33 1/3% support test - 2021. If the o						
,	and stop here. The organization qual						
170	10% -facts-and-circumstances test						
178	and if the organization meets the fact						
	meets the facts-and-circumstances te						
h	10% -facts-and-circumstances test	•				7a and line 15 is	
,	more, and if the organization meets the	_					1070 01
	organization meets the facts-and-circu				•		
18	Private foundation. If the organization						;
	iodinacioni ii iio organizatio	s.cc. oncon u		, ,	,		(Form 990) 2022

Schedule A (Form 990) 2022 THE PIEDMONT ENVIRONMENTAL COULT Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

	quality under the tests listed b	elow, please comp	nete Part II.)					
Sec	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e	2022	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")							
•								
2	Gross receipts from admissions, merchandise sold or services per-							
	formed, or facilities furnished in							
	any activity that is related to the							
	organization's tax-exempt purpose							
3	Gross receipts from activities that							
	are not an unrelated trade or bus-							
	iness under section 513							
4	Tax revenues levied for the organ-							
7	ization's benefit and either paid to							
	·							
	or expended on its behalf					4		
5	The value of services or facilities							
	furnished by a governmental unit to				1			
	the organization without charge							
6	Total. Add lines 1 through 5							
	Amounts included on lines 1, 2, and							
,,	3 received from disqualified persons							
	· · ·							
Ľ	Amounts included on lines 2 and 3 received from other than disqualified persons that				/			
	exceed the greater of \$5,000 or 1% of the							
	amount on line 13 for the year							
c	Add lines 7a and 7b							
	Public support. (Subtract line 7c from line 6.)							
	ction B. Total Support							
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	10	2022	(f) Total
		(a) 2010	(0) 2013	(0) 2020	(u) 2021		1 2022	(i) Total
	Amounts from line 6							
IU	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources							
k	Unrelated business taxable income							
	(less section 511 taxes) from businesses							
	acquired after June 30, 1975							
	Add lines 10a and 10b							
11	Net income from unrelated business							
••	activities not included on line 10b.							
	whether or not the business is							
	regularly carried on							
12	Other income. Do not include gain							
	or loss from the sale of capital assets (Explain in Part VI.)							
13	Total support. (Add lines 9, 10c, 11, and 12.)							
		o organization's fi	rot socond third	fourth or fifth toy	voor on a coation 50	01/0//2	\ organizatio	20
14	First 5 years. If the Form 990 is for the	ie organization s iir	rst, second, triird,	iourtri, or illtri tax	year as a section of	UT(C)(3)) organizatio	ori,
<u> </u>	check this box and stop here	- C D						
Sec	ction C. Computation of Publi	c Support Per	centage					
15	Public support percentage for 2022 (I	ine 8, column (f), d	ivided by line 13, o	column (f))		15		%
16	Public support percentage from 2021	Schedule A, Part	III, line 15			16		%
Se	ction D. Computation of Inves	stment Income	Percentage					
17	Investment income percentage for 20	022 (line 10c. colur	nn (f), divided by li	ne 13. column (f))		17		%
	Investment income percentage from					18		%
				on line 14, and line			and live - d=	
198	33 1/3% support tests - 2022. If the						, and line 17	is not
	more than 33 1/3%, check this box as	nd stop here. The	organization quali	fies as a publicly s	supported organizat	tion		
k	33 1/3% support tests - 2021. If the	organization did n	ot check a box on	line 14 or line 19a	a, and line 16 is mo	re than	33 1/3%, aı	nd
	line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	nization qualifies a	as a publicly suppo	rted or	ganization	
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check th	nis box and see inst	truction	าร	
	23 12 00 22		,					(Form 990) 2022

Schedule A (Form 990) 2022

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

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

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	dule A (Form 990) 2022 THE PIEDMONT ENVIRONMENTAL COUNCIL **-**	<u>*556</u>	9 Pa	age 5
Pai	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a	_		
•	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
' a	The organization satisfied the Activities Test. Complete line 2 below.	•		
b	The organization satisfied the Activities rest. <i>Complete line 2 below.</i> The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
			,	
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction	I	NIa
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			

of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard.* 232025 12-09-22

3b | Schedule A (Form 990) 2022

3a

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.**

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting			**-***5569 Page 6
				: Don't VII) Con instructions
1	Check here if the organization satisfied the Integral Part Test as a qualifying to		·	in Part VI). See instructions.
Sect	All other Type III non-functionally integrated supporting organizations must coion A - Adjusted Net Income	ompiet	(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):		4/1	
a	Average monthly value of securities	1a	.10	
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d (
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
_2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
_5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		

Schedule A (Form 990) 2022

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

instructions).

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· u	t v Type in Non Tunetionally integrated coo	(u)(o) oupporting orga	inzations (continu	iea)	
Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.	ovide details in Fair Fig.		6	
 -	Total annual distributions. Add lines 1 through 6.			7	
	Distributions to attentive supported organizations to which the	ne organization is responsive			
Ü	(provide details in Part VI). See instructions.	ic organization is responsive		8	
9	Distributable amount for 2022 from Section C, line 6			9	
 10	Line 8 amount divided by line 9 amount			10	
10	Line o amount divided by line 9 amount	/i)	/::\	10	/:::\
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	าร	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-		4/1		
	able cause required - explain in Part VI). See instructions.		10		
3	Excess distributions carryover, if any, to 2022				
	From 2017				
	From 2018				
	From 2019				
	From 2020				
	From 2021				
	Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount	1.60			
	Carryover from 2017 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
	Distributions for 2022 from Section D,				
4					
	line 7: \$				
	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2018				
b	Excess from 2019				
С	Excess from 2020				
d	Excess from 2021				

Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME: MISCELLANEOUS INCOME 2018 AMOUNT: \$ 5,408. 55,182. 2019 AMOUNT: \$ 2020 AMOUNT: \$ 167,084. 2021 AMOUNT: \$ 113,142. 2022 AMOUNT: \$ 131,727.

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

 Section 501(c)(4), (5), or (6) organizations: Complete Part III. **Employer identification number** Name of organization **-***5569 THE PIEDMONT ENVIRONMENTAL COUNCIL Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political campaign activity expenditures 3 Volunteer hours for political campaign activities Complete if the organization is exempt under section 501(c)(3) Part I-B 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No 4a Was a correction made? Yes No b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b

4 Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC), If additional space is needed, provide information in Part IV. (d) Amount paid from (a) Name (b) Address (c) EIN (e) Amount of political filing organization's contributions received and promptly and directly funds. If none, enter -0-. delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990) 2022

LHA

232041 11-08-22

Lobbying Expenditures During 4-Year Averaging Period									
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2 020	(c) 2021	(d) 2022	(e) Total				
2a Lobbying nontaxable amount	343,410.	332,706.	354,669.	380,459.	1,411,244.				
b Lobbying ceiling amount (150% of line 2a, column(e))	70,				2,116,866.				
c Total lobbying expenditures	160,669.	271,969.	244,649.	265,062.	942,349.				
d Grassroots nontaxable amount	85,853.	83,177.	88,667.	95,115.	352,812.				
e Grassroots ceiling amount (150% of line 2d, column (e))					529,218.				
f Grassroots lobbying expenditures	3,591.	38,953.	47,406.	92,252.	182,202.				

Schedule C (Form 990) 2022

Schedule C (Form 990) 2022 THE PIEDMONT ENVIRONMENTAL COUNCIL **-***55

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

Eor e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	(b))
	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?				
b	3 /				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
į	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5) or sec	tion	
ı uı	501(c)(6).	00 1(0)(0	,, 01 300	7.1.011	
	55 ((5)(6))			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
	t III-B Complete if the organization is exempt under section 501(c)(4), section			tion	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	"No" OR (b) Part I	II-A, line	3, is
	answered "Yes."				
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	cal			
	expenses for which the section 527(f) tax was paid).				
а			2a		
b	Carryover from last year		2b		
С			. 2c		
3	A				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
	expenditures next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions		5		
Par	t IV Supplemental Information				
Prov	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-A	A, lines 1 a	nd 2 (See	
instr	uctions); and Part II-B, line 1. Also, complete this part for any additional information.				

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Da	THE PLEDMONT ENVIRO			0
Pa			or Accounts.	Complete if the
	organization answered "Yes" on Form 990, Part IV, line		/L\ F:la :	ad other case::::-
	•	(a) Donor advised funds	(b) Funds a	nd other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in v	_		
	are the organization's property, subject to the organization's			L Yes No
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that grant funds can be	e used only	
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose	conferring	
-				Yes No
Pai	Tt II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization			
	X Preservation of land for public use (for example, recreat	tion or education) X Preservation of	of a historically impo	ortant land area
	Yerotection of natural habitat	Preservation of	of a certified historic	structure
	X Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form	of a conservation e	easement on the last
	day of the tax year.		Held	at the End of the Tax Year
а	Total number of conservation easements		2a	76
b	Total acreage restricted by conservation easements			11,156.00
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c	
d	Number of conservation easements included in (c) acquired a	fter July 25,2006, and not on a		
	historic structure listed in the National Register		2d	
3	Number of conservation easements modified, transferred, rele			g the tax
	year1_			
4	Number of states where property subject to conservation eas	ement is located1	_	
5	Does the organization have a written policy regarding the peri	iodic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements it	holds?		X Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, I	handling of violations, and enforcing con	servation easemen	ts during the year
	1298			
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conserva	ation easements du	ring the year
	86,507.			
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170)(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	e statement and	
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's financial statem	nents that describes	the
	organization's accounting for conservation easements.			
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or O	ther Similar As	sets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958	8, not to report in its revenue statement	and balance sheet	works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or research in f	urtherance of public	
	service, provide in Part XIII the text of the footnote to its finan	cial statements that describes these iter	ns.	
b	If the organization elected, as permitted under FASB ASC 958	8, to report in its revenue statement and	balance sheet work	rs of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furt	herance of public s	ervice,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1		\$	
2	If the organization received or held works of art, historical trea			
	the following amounts required to be reported under FASB AS			
а	Revenue included on Form 990, Part VIII, line 1	<u> </u>	\$	
	Assets included in Form 990. Part X		\$	

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

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022

179,965.

2,655,961.

e Other

d Equipment

364,310.

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

184,345.

Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" o		-	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	on Form 990. Part IV. line	e 11c. See Form 990. Part X. line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of-vear market value
(1)	(2) 2 2 3 1 1 3 1 3 1	(),	
(1) (2)		10	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.)	
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15.	
(a) [Description		(b) Book value
(1) RP LLC PROPERTY			2,100,000.
(2) OVOKA FARM			224,113.
(3) BERGER PROPERTY			30,000.
(4) GILBERT'S CORNER			4,400,000.
(5) GORDONSVILLE - ALLEN ST	*		85,095.
(6) GORDONSVILLE - MARKET ST			55,058.
(7) RIGHT-OF-USE ASSETS			125,707.
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		7,019,973.
Part X Other Liabilities.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			105 051
(2) LEASE LIABILITIES			125,851.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			125.851.
Total (Column (b) must equal Form 000 Part V and (P) line	OF \		ולא מין.

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

Schedule D (Form 990) 2022

3

4c

Sche	dule D (Form 990) 2022 THE PIEDMONT ENVIRONMEN	TAL COUNCIL	**-***55	59 Page
Par	t XI Reconciliation of Revenue per Audited Financial Sta	tements With Revenue	per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, lir	ne 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities			
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
5)	5	
Pai	t XII Reconciliation of Expenses per Audited Financial Sta	atements With Expense	es per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, lir			
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	

Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.) Part XIII Supplemental Information.

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b

Subtract line 2e from line 1

b Other (Describe in Part XIII.) c Add lines 4a and 4b

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

PART II, LINE 5 - MONITORING AND ENFORCEMENT POLICY

PEC HAS WRITTEN LAND CONSERVATION POLICIES WHICH HAVE BEEN FORMALLY APPROVED AND ARE PERIODICALLY REVIEWED AND AMENDED AS NECESSARY BY THE PEC BOARD OF DIRECTORS. THESE POLICIES CLEARLY STATE THAT PEC WILL UNDERTAKE ANNUAL MONITORING OF ALL CONSERVATION EASEMENTS. IN 2022, PEC VISITED ALL 76 PROPERTIES FOR WHICH IT HOLDS AN EASEMENT. PEC'S POLICIES ON STEWARDSHIP REQUIRE THAT PEC EVALUATE AND ADDRESS THE STEWARDSHIP OBLIGATIONS OF EACH CONSERVATION EASEMENT IT ACCEPTS. PEC UNDERTAKES MONITORING OF ALL EASEMENTS IT HOLDS OR CO-HOLDS, AND WILL ENFORCE THE TERMS OF ITS CONSERVATION EASEMENTS, TAKING NECESSARY STEPS TO SEE THAT VIOLATIONS ARE REMEDIED. ALL EASEMENTS HELD BY PEC HAVE PROVISIONS WHICH ALLOW PEC TO MONITOR THE EASEMENTS AND ENFORCE THE RESTRICTIONS IN THE

Part XIII Supplemental Information (continued)
EASEMENT DOCUMENTS. PEC HAS, AS A RESULT OF FINDING EASEMENT VIOLATIONS
DURING AN INSPECTION, COMMUNICATED WITH THE EASEMENT HOLDER AND AFTER
FAILING TO ACHIEVE AN APPROPRIATE SOLUTION, RESORTED TO LEGAL ACTION TO
ENFORCE THE TERMS OF THE EASEMENT.
PART II, LINE 9 - ACCOUNTING FOR CONSERVATION EASEMENTS
CONSERVATION EASEMENTS ARE INTANGIBLE ASSETS REPRESENTING RESTRICTIONS ON
THE DEVELOPMENT OF REAL PROPERTY, CONVEYED BY A PROPERTY OWNER TO PEC. PEC
OCCASIONALLY ACCEPTS AND HOLDS OR CO-HOLDS THESE EASEMENTS IN ORDER TO
PROTECT THE OWNED PROPERTY IN PERPETUITY. CONSERVATION EASEMENTS, BY THEIR
NATURE, HAVE NO MARKET VALUE, AS THEY CANNOT BE SOLD OR EXCHANGED FOR
REMUNERATION. THUS, WHEN PEC ACCEPTS AN EASEMENT, EITHER AS A SOLE HOLDER
OR AS A CO-HOLDER, NO REVENUE OR EXPENSE IS RECORDED. PEC HOLDS OR
CO-HOLDS 76 CONSERVATION EASEMENTS TOTALING 11,156 ACRES AS OF DECEMBER
31, 2022.
(10
.0

SCHEDULE G (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990 or Form 990-EZ.

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

Employer identification number **-**5569

THE PIE	DMONT ENVIRONMENTA	L COUNCIL	**-***5569				
Part I Fundraising Activities. required to complete this part		red "Yes" on Form 990, Part IV, line 1	7. Form 990-EZ filers are not				
 1 Indicate whether the organization rais a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, Pab If "Yes," list the 10 highest paid individuals 	b						
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundraiser have custody or control of from activity	Amount paid pr retained by fundraiser sted in col. (i) (vi) Amount paid to (or retained by) organization				
		Yes No					
		100					
	+, (
	10/10						
Total 2 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.							

232081 10-27-22

Schedule G (Form 990) 2022

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

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

		of fundraising event contributions and gro	oss income on Form 990	-EZ, lines 1 and 6b. List e	events with gross receipt	s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			PIEDMONT	CSG 25TH		(add col. (a) through
			BALL	ANNIVERSARY	1	col. (c))
			(event type)	(event type)	(total number)	Coi. (C))
Revenue						
eve	1	Gross receipts	715,272.	110,811.	40,571.	866,654.
ď						
	2	Less: Contributions	539,822.	95,882.	33,250.	668,954.
	3	Gross income (line 1 minus line 2)	175,450.	14,929.	7,321.	197,700.
	4	Cash prizes				
	5	Noncash prizes				
ses		D . / / . ///	206 204	0 522	-16 240	221 005
ber	6	Rent/facility costs	206,204.	8,533.	16,348.	231,085.
Direct Expenses	_	Food and houseness	82,317.	16,051.	10	98,368.
irec	7	Food and beverages	02,317.	10,031.		30,300.
Ω	8	Entertainment	10,369.	1,133.		11,502.
	9	Other direct expenses	133,407.		8,605.	142,012.
	10	Direct expense summary. Add lines 4 through			0,000	482,967.
		Net income summary. Subtract line 10 from li				-285,267.
Pa	rt I			n 990, Part IV, line 19, or	reported more than	•
		\$15,000 on Form 990-EZ, line 6a.				
			(a) Bingo ◆	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(a) Birigo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
eve.						
	1	Gross revenue				
es	2	Cash prizes				
Direct Expenses						
Σp	3	Noncash prizes				
ect F		Rent/facility costs				
Dire	4	nerit/facility costs				
	5	Other direct expenses				
	Ť	Curior direct experiesc	Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
9		ter the state(s) in which the organization condu	_			
		the organization licensed to conduct gaming ac		states?		Yes No
b	IT "	No," explain:				
	_					
10:	We	ere any of the organization's gaming licenses re	evoked suspended orte	erminated during the tax v	/ear?	Yes No
		Yes," explain:				
~	_					

232082 10-27-22 Schedule G (Form 990) 2022

Schedule G (Form 990) 2022 THE PIEDMONT	ENVIRONMENTAL	COUNCIL	**-***5569 Page 3
11 Does the organization conduct gaming activities with nonme	embers?		Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust			
to administer charitable gaming?	·	· ·	Yes No
13 Indicate the percentage of gaming activity conducted in:			
a The organization's facility			13a %
b An outside facility			
14 Enter the name and address of the person who prepares the			
14 Enter the hame and address of the person who prepares the	organization's gaming/spe	ciai events books and recor	us.
Name			
Name			
Address			
Address			
15a Does the organization have a contract with a third party from	n whom the organization red	ceives gaming revenue?	Yes No
b If "Yes," enter the amount of gaming revenue received by th	e organization \$	and the an	nount
		and the an	lount
of gaming revenue retained by the third party \$			
c If "Yes," enter name and address of the third party:			
Maria			
Name		- 10	
• • •			
Address			
16 Gaming manager information:		5	
Name			
Gaming manager compensation \$	_() ·		
	+ 60		
Description of services provided			
Director/officer Employee	Independent contra	actor	
17 Mandatory distributions:			
a Is the organization required under state law to make charital	ole distributions from the ga	ming proceeds to	
			Yes No
b Enter the amount of distributions required under state law to			
organization's own exempt activities during the tax year	\$		
Part IV Supplemental Information. Provide the exp		line 2b. columns (iii) and (v	and Part III. lines 9. 9b. 10b.
15b, 15c, 16, and 17b, as applicable. Also provide a			,,,,,,,
,,,,	,		



40

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047 2022

Department of the Treasury Internal Revenue Service			Go to www.irs.	Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.	990. the latest informa	tion.		Open to Public Inspection
Name of the organization	_	ONT ENVIRO	THE PIEDMONT ENVIRONMENTAL COUNCIL	JNCIL				Employer identification number
Part I General II	General Information on Grants and Assistance	d Assistance						
1 Does the organic	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the criteria used to award the grants or assistance?	substantiate the ance?	amount of the grants	or assistance, the g	rantees' eligibility		grants or assistance, and the selection	on XYes No
2 Describe in Part	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	cedures for monitor	oring the use of grant f	unds in the United	States.			
art II	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	omestic Organiz	ations and Domestic	Governments. Co	omplete if the orga	nization answered "Y	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and ac	1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of convergence (fragment) (fragment) (a) Convergence (d) Amount of converg	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of valuation (book,	(g) Description of	(h) Purpose of grant
(^	(assistance	other)		
TOWN OF GORDONSVILLE	LLE			,				
112 SOUTH MAIN STREET	REET			<u>}</u>				
GORDONSVILLE , VA	VA 22942	**_***1317		25,000.	0.			PARK DESIGN
RAPPAHANNOCK CENTER FOR EDUCATION	ER FOR EDUCATION			5				
12018 LEE HIGHWAY								BEEF CUTTER TRAINING
SPERRYVILLE, VA 22740	2740	**_***0354	501C3	19,000.	0.			COURSE
ELDON FARMS					, \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
PO BOX 261 SPERRYVILLE, VA 2	22740	**_**1646		8,540.	0			PGBI INCENTIVE
SPERRYVILLE COMMU	COMMUNITY ALLIANCE				Ċ			
4V	22740	** - * * * * * * * * * * * * * * * * *	л 0103	10 500	5	S		SPERRYVILLE TRAIL MASTER
- 1	7.40	- 1	00+00					E PUTANTING
						Q		
	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	d government org	anizations listed in the	line 1 table				ا
Septent total number	Enter total number of other organizations listed in the line 1 table	listed in the line 1	table					

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

Schedule I (Form 990) 2022

-*5569

Page 2

Schedule I (Form 990) 2022 THE PIEDMONT ENVIRONMENTAL COUNCIL

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed

Fart III can be duplicated if additional space is needed.					
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
CONSERVATION EASEMENT	1	13,079.	0.		
0					
	S				
		U ₀			
		· C			
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other addition	ired in Part I, line	2; Part III, column	(b); and any other ad	ditional information.	
PART I, LINE 2:					
GRANT REQUESTS ARE REVIEWED ON A CA	CASE-BY-CASE	BASIS	TO ENSURE T	THE GRANT	
OBJECTIVES ARE CONSISTENT WITH PEC'S	S MISSION	AND THE	GRANT WILL	BE EXPENDED	
IN A MANNER THAT WILL COMPLEMENT PE	PEC'S GOALS.	S. ANY MAJOR	OR GRANT AWAI	WARDS	
REQUIRE REPORTS TO PEC ON HOW THE F	FUNDS WERE	E EXPENDED	AND WHAT WAS	WAS	
ACCOMPLISHED. SPECIFIC PEC STAFF (W	(WITH EXPE	EXPERTISE IN T	THE AREA OF	THE GRANT	
OBJECTIVES) ARE RESPONSIBLE FOR MON	MONITORING :	MAJOR GRANTS.	PEC'S	BOARD OF	
DIRECTORS OR THE EXECUTIVE COMMITTEE	E APPROVE	E ANY MAJOR GRANTS		AND THE	

232102 10-31-22

PRESIDENT MAY APPROVE MINOR GRANTS.

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Part I

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Questions Regarding Compensation**

THE PIEDMONT ENVIRONMENTAL COUNCIL

Employer identification number **-***5569

			Yes	No_
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors.			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
		_		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
	/ pprovided at some organizations			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		х
	Participate in or receive payment from an equity-based compensation arrangement?	4c		х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		_X_
b	Any related organization?	6b		_X_
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2022

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(i)	(ii)	(i)	(ii)	(i)	(ii)		(ii)	(1)	(i)		(1)	(0)	(ii)	(ii)			(ii)		(i)	0. 0. 0.	(i) 224,367. 0. 0. 11,872. 19,44	0. 0. 0. 0.	(1) KATHERINE L IMHOFF (i) 265,327. 0. 0. 13,559. 16,43	(A) Name and Title (i) Base (ii) Bonus & (iii) Other compensation compensation compensation compensation	
								X		5										- 1	,872. 19,44	0.	,559.	risation	benefits
																				- 1	255,683.	0.	295,325.		(B)(i)-(D)
																				0.	0.	0.	0.	on prior Form 990	in column (B)

Schedule J (Form 990) 2022

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

THE PIEDMONT ENVIRONMENTAL COUNCIL

Employer identification number **- *** 5 5 6 9

Pai	t I Types of Property				•			
		(a) Check if applicable	(b) Number of contributions or	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu			s
4	Art - Works of art		items contributed	Tomin 990, Part VIII, line 1g				
1 2	A							
3								
4	Art - Fractional interests Books and publications							
5	Clothing and household goods							
6 7	Cars and other vehicles							
	Boats and planes Intellectual property							
8		Х	19	469 011	FAIR MARKET	77 A T	मार	
9	Securities - Publicly traded		17	405,011	HIR MARKET	VAL	1011	
10	Securities - Closely held stock Securities - Partnership, LLC, or							
11								
12								
13	Securities - Miscellaneous Qualified conservation contribution -							
13	LP-1-21			()				
14	Qualified conservation contribution - Other			10				
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other		1,6					
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy		_					
22	Historical artifacts	*.)					
23	Scientific specimens	111-						
24	Archeological artifacts							
25	Other (AUCTION ITEMS	Х	1	118,180.	FAIR MARKET	VAI	LUE	
26	Other (OFFICE EXPENSES)	Х	1		FAIR MARKET			
27	Other (CONFERENCES AND	Х	1		FAIR MARKET			
28	Other (
29	Number of Forms 8283 received by the organization	zation during	the tax year for co	ontributions				
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement 29				
							Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least 3 years from the date of	the initial co	ntribution, and whi	ich isn't required to be used t	for			
	exempt purposes for the entire holding period'	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	policy that re	quires the review	of any nonstandard contribut	ions?	31	X	
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell noncash				
	contributions?					32a	Х	
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) foi	a type of property	for which column (a) is chec	cked,			
	describe in Part II.							

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

Schedule M (Form 990) 2022

Schedule M (Form 990) 2022

232142 09-09-22

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

THE PIEDMONT ENVIRONMENTAL COUNCIL

Employer identification number **-**5569

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PIEDMONT.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
FARMS AND FOOD - EDUCATE CONSUMERS AND INSTITUTIONS ABOUT LOCAL FOOD
AND FARMS, AND CONNECT THEM WITH FRESH, HEALTHY LOCAL FOOD SOURCES
THROUGH THE "BUY FRESH BUY LOCAL" PROGRAM. PEC ALSO SUPPORTS EXPANDED
OPPORTUNITIES FOR FARMERS THROUGH WORKSHOPS THAT CONNECT PIEDMONT
LANDOWNERS AND FARMERS SEEKING FARMLAND TO LEASE OR PURCHASE,
PARTICIPATION IN AND PROMOTION OF STATE AND NATIONAL NEW AND BEGINNING
FARMER INITIATIVES, THE DEVELOPMENT OF A FARMER-CHEF EXPRESS ONLINE
SERVICE TO CONNECT LOCAL FARMERS TO RETAILERS, THE MANAGEMENT OF
DEMONSTRATION PROJECTS FOR INNOVATIVE PASTURE MANAGEMENT PRACTICES, AND
LEASING PEC OWNED LAND TO LOCAL FARMERS FOR AGRICULTURAL USES.
TRANSPORTATION AND GROWTH MANAGEMENT - PROMOTE ORDERLY ECONOMIC
PROGRESS SENSITIVE TO CONSERVING RESOURCES; ANALYZE THE IMPACT OF
PLANNED ROADWAYS IN ORDER TO PROMOTE ALTERNATIVES THAT MINIMIZE DAMAGE
TO THE VIRGINIA PIEDMONT.
OUTREACH AND EDUCATION - MANAGE THE PEC SUMMER FELLOWSHIP PROGRAM;
EDUCATE LOCAL CITIZENS ON MISSION RELATED ISSUES THROUGH PRINT AND
ONLINE MEDIA; ORGANIZE EVENTS ON LOCAL INFRASTRUCTURE AND GROWTH
MANAGEMENT ISSUES, LOCAL FARMS AND FOOD, NATIVE HABITAT AND CULTURAL
HISTORY OF PIEDMONT COMMUNITIES.
EXPENSES \$ 1,263,354. INCLUDING GRANTS OF \$ 36,405. REVENUE \$ 0.

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

Schedule O (Form 990) 2022

Schedule O (Form 990) 2022 Page 2

Name of the organization
THE PIEDMONT ENVIRONMENTAL COUNCIL

FORM 990, PART VI, SECTION A, LINE 2:

RELATED PARTY INFORMATION AMONG OFFICERS

MARK OHRSTROM
GEORGE OHRSTROM II

VICE CHAIR
CO-CHAIR

FORM 990, PART VI, SECTION A, LINE 4:

BROTHERS

THE PEC BYLAWS WERE AMENDED DURING 2022. PEC IS NAMED AS THE SOLE MEMBER OF THE FOUNDATION. FURTHERMORE, THERE IS A TWO YEAR TERM LIMIT OF SERVICE TO THOSE DIRECTORS NOT SERVING ON THE EXECUTIVE COMMITTEE AS OF DECEMBER 31, 2022. LASTLY, THE REVISED BYLAWS ALLOW UP TO THREE (3) NON-PEC DIRECTORS TO SERVE ON THE FINANCE COMMITTEE AS NON-VOTING MEMBERS; THEY ALSO ALLOW UP TO THREE (3) NON-PEC DIRECTORS TO SERVE ON THE ADVANCEMENT COMMITTEE (FORMERLY, DEVELOPMENT COMMITTEE) AS VOTING MEMBERS.

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

PEC'S PROCESS TO REVIEW FORM 990 - THE FORM 990 IS PREPARED BY STAFF,

MANAGEMENT, OR AN INDEPENDENT CPA, AND REVIEWED BY PEC'S PRESIDENT AND

PEC'S FINANCE AND RMAC COMMITTEE. IT IS THEN REVIEWED BY THE EXECUTIVE

COMMITTEE AND FINALLY MADE AVAILABLE TO THE BOARD FOR THEIR INPUT.

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

ENFORCEMENT OF CONFLICT OF INTEREST POLICY - NEW BOARD MEMBERS ATTEND A

FULL DAY ORIENTATION WHERE THEY ARE FAMILIARIZED WITH PEC'S OPERATIONS,

POLICIES AND PROCEDURES, INCLUDING THE CONFLICT OF INTEREST POLICY. ALSO,

DURING THE RECRUITMENT OF BOARD MEMBERS, EACH CANDIDATE IS CAREFULLY VETTED

FOR POTENTIAL CONFLICTS. THESE AND OTHER POLICIES ARE PERIODICALLY REVIEWED

AT BOARD MEETINGS AND ANNUALLY, IN CONNECTION WITH A REQUEST TO BOARD

Schedule O (Form 990) 2022

Schedule O (Form 990) 2022 Page 2

Name of the organization

THE PIEDMONT ENVIRONMENTAL COUNCIL

Employer identification number **-**5569

MEMBERS THAT THEY REVIEW THE AUDIT, AUDITORS' REPORTS AND FORM 990 RETURN.

FINALLY, OFFICERS, DIRECTORS AND KEY EMPLOYEES ARE REQUIRED TO DISCLOSE, ON

AN ANNUAL BASIS, ANY INTEREST THAT COULD GIVE RISE TO A CONFLICT. ANY

POTENTIAL CONFLICTS ARE REVIEWED BY PEC'S PRESIDENT AND EXECUTIVE COMMITTEE

AND, WHERE APPROPRIATE, DISCUSSED WITH THE BOARD.

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

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL:

THE COMPENSATION OF THE PRESIDENT AND OTHER OFFICERS/ KEY EMPLOYEES IS

DETERMINED BY THE BOARD'S EXECUTIVE COMMITTEE AND APPROVED BY THE BOARD AS

PART OF THE BUDGETING PROCESS. THE COMMITTEE REVIEWS SALARY SURVEYS

FOCUSING ON NON-PROFITS AND LAND CONSERVATION ORGANIZATIONS, AND

APPROPRIATE FORM 990S, IN ORDER TO DETERMINE APPROPRIATE SALARY LEVELS.

FORM 990, PART VI, LINE 15B -COMPENSATION PROCESS FOR OFFICERS:

THE COMPENSATION FOR KEY EMPLOYEES IS THE SAME AS THAT FOR TOP OFFICIALS.

LINE 19:

GOVERNING DOCUMENTS, ETC. DISCLOSURE EXPLANATION - THE PUBLIC, UPON

REQUEST, WILL BE PROVIDED COPIES OF PEC'S FINANCIAL DOCUMENTS. THE ANNUAL

REPORT, WHICH IS MAILED TO ALL DONORS AND OTHERS ON REQUEST, CONTAINS AN

ABBREVIATED FINANCIAL STATEMENT AND INVITES ALL READERS TO CONTACT PEC'S

ACCOUNTING OFFICE FOR ANY DOCUMENTS OR FINANCIAL REPORTS THAT ARE DISCUSSED

IN THE FORM 990. AUDITED FINANCIAL STATEMENTS AND THE IRS FORM 990 ARE ALSO

AVAILABLE ON PEC'S WEBSITE.

FORM 990, PART XII, LINE 2C:

FORM 990, PART VI, SECTION C

PEC HAS NOT CHANGED EITHER ITS OVERSIGHT OR SELECTION PROCESS OF AN

Schedule O (Form 990) 2022					Page 2
Name of the organization	ion THE PIED	MONT ENVIROR	NMENTAL CO	UNCIL		Employer identification number * * - * * * 5 5 6 9
INDEPENDENT	ACCOUNTANT	DURING THE	TAX YEAR.			
					1)
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		40				
		<i>\(\)</i>				
	\overline{Q}					

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

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

OMB No. 1545-0047 2022

Open to Public Inspection

WARRENTON, VA 45 HORNER STREET THE PIEDMONT FOUNDATION -Name of the organization Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. Name, address, and EIN (if applicable) Name, address, and EIN of related organization 20186 of disregarded entity THE PIEDMONT ENVIRONMENTAL COUNCIL 54-1954368 SUPPORT Primary activity Primary activity VIRGINIA Legal domicile (state Legal domicile (state or foreign country foreign country) 0 <u>ල</u> Exempt Code section <u>@</u> Total income <u>a</u> status (if section 501(c)(3)) LINE 12A, I Public charity End-of-year assets **(e) (e)** N/A Direct controlling Employer identification number **-**5569 Direct controlling entity $\widehat{\Xi}$ **(g)** Section 512(b)(13) Yes controlled entity? S

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

Schedule R (Form 990) 2022 Part IV Name, address, and EIN of related organization **Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Identification of Related Organizations Taxable as a Corporation or Trust. Complete of the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. Name, address, and EIN of related organization (a) (a) Primary activity ₫ Legal domicile (state or foreign country) Primary activity 05 Direct controlling <u>a</u> Legal domicile (state or foreign country) Predominant income (related, unrelated, excluded from tax under sections 512-514) <u>ල</u> (e) Direct controll entity Share of total income Type of entity (C corp, S corp, or trust) 3 **e** Share of end-of-year **(**9) Share of total income 3 Yes Disproportionate allocations? Ξ N_o Share of end-of-year Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) **(g)** \equiv Percentage ownership managing partner? Yes No Ξ General or Percentage ownership Yes No Section Section 512(b)(13) controlled entity? Page 2 Ē

Schedule R (Form 990) 2022

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

N N N N N N N N N N N N N N N N N N N	(6)	(5)	(4)	(3) PIEDMONT FOUNDATION Q 105,141. GAAP	(2) PIEDMONT FOUNDATION D 151,933. GAAP	(1) PIEDMONT FOUNDATION C 1,755,428. GAAP	(a) Name of related organization (b) Transaction type (a-s) (c) Method of determining amount involved	2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	Other transfer of cash or property from related organization(s)	r Other transfer of cash or property to related organization(s)		p Reimbursement paid to related organization(s) for expenses		n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			j Lease of facilities, equipment, or other assets to related organization(s)	i Exchange of assets with related organization(s)	h Purchase of assets from related organization(s)	g Sale of assets to related organization(s)	f Dividends from related organization(s)	e Loans or loan guarantees by related organization(s)	d Loans or loan guarantees to or for related organization(s)	Gift, grant, or capital contribution from related organization(s)	Gift, grant, or capital contribution to related organization(s)	a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	Note: Complete line in any entity is listed in Farts II, III, or two it in scriedule. 1 During the tay year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	2
'l							<u> </u>		ls	1r	Н	<u> </u>	6	\vdash	+		F	╬	=	19	⇉	-	\vdash	\vdash	Н	a		
									×	×	ľ	×	×	Н	+	۶ ×			×	×	×	×	×	×	×	×	es	_

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

							(a) Name, address, and EIN of entity
						S	(b) Primary activity
					5		(c) Legal domicile (state or foreign country)
-			O'	S			Predominant income (related, unrelated, excluded from tax under sections 512-514)
		·•.C)				(e) Are all e partners sec. 501(c)(3) der orgs.? Yes No
		O)					(f) Share of total income
							(g) Share of end-of-year assets
-							(h) Disproportionate allocations? Yes No
Cabadula							(h) (i) (j) (k) Dispropor- Code V-UBI General or Percentage inorate amount in box 20 managing ownership of Schedule K-1 partner? ownership yes No
D (Ecro							General or managing partner?
Schodule B (Form 990) 2022							(k) Percentage ownership