			EXTENDED TO MAY 16, 2022		•
	Ω	00	Return of Organization Exempt From		OMB No. 1545-0047
For	m 🕈	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (» 2020	
Depa	artment	of the Treasury	Do not enter social security numbers on this form as it ma		Open to Public
Inter	nal Reve	enue Service	► Go to www.irs.gov/Form990 for instructions and the lat		Inspection
_				JUN 30, 2021	
	Check if applicab	le: C Name o	forganization	D Employer identific	ation number
	Addre	ess PIED	MONT EDUCATION FOUNDATION		
	Name chang	ge Doing b	usiness as	**-***617	6
	Initial returr Final	n Number	and street (or P.O. box if mail is not delivered to street address)	uite E Telephone number 510-653-1	016
	returr termi	n	HIGHLAND AVENUE		4,241,306.
	ated Amer	nded DTED	own, state or province, country, and ZIP or foreign postal code MONT , CA 94611	G Gross receipts \$	
	_lreturr ∏Appli		nd address of principal officer: HEATHER FRANK	H(a) Is this a group ret	
	tion pend		IGHLAND AVENUE, PIEDMONT, CA 94611	for subordinates? H(b) Are all subordinates inc	
<u> </u>	Tax or				ist. See instructions
				H(c) Group exemption	
				rear of formation: 1975 M	
	art I				
	1		e the organization's mission or most significant activities: TO PROVI	DE SUSTATNED F	TNANCTAL
e	1.	SUPPORT	TO PIEDMONT SCHOOLS THROUGH FUNDRAISI	ING AND COMMUNI	
nan	2		x Figure 1 if the organization discontinued its operations or disposed of m		
veri	3				22
Governance	4		lependent voting members of the governing body (Part VI, line 1b)		22
			of individuals employed in calendar year 2020 (Part V, line 2a)		6
ities	6		of volunteers (estimate if necessary)		110
Activities &	7a		d business revenue from Part VIII, column (C), line 12		0.
Ă	b		business taxable income from Form 990-T, Part I, line 11		0.
			· · · · · · · · · · · · · · · · · · ·	Prior Year	Current Year
	8	Contributions	and grants (Part VIII, line 1h)	3,406,305.	3,345,709.
Revenue	9		ce revenue (Part VIII, line 2g)	102,896.	38,380.
eve	10	Investment in	come (Part VIII, column (A), lines 3, 4, and 7d)	168,457.	206,172.
č	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	163,796.	96,598.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,841,454.	3,686,859.
	13	Grants and si	nilar amounts paid (Part IX, column (A), lines 1-3)	3,229,782.	3,437,646.
	14		to or for members (Part IX, column (A), line 4)	0.	0.
ý	15	Salaries, othe	r compensation, employee benefits (Part IX, column (A), lines 5-10)	246,921.	271,306.
Expenses	16a	Professional f	undraising fees (Part IX, column (A), line 11e)	0.	0.
be	. b	Total fundrais	ing expenses (Part IX, column (D), line 25) 184,474.		
ŵ	17	Other expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)	231,553.	221,466.
	18	Total expense	s. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,708,256.	3,930,418.
	19	Revenue less	expenses. Subtract line 18 from line 12	133,198.	-243,559.
OC	201			Beginning of Current Year	End of Year
sets	20	Total assets (F	Part X, line 16)	11,730,033.	13,462,754.
Net Assets or	21		(Part X, line 26)	55,114.	34,717.
			fund balances. Subtract line 21 from line 20	11,674,919.	13,428,037.
	art II				
	-		I declare that I have examined this return, including accompanying schedules and stat		knowledge and belief, it is
true	, corre	ct, and complete	Declaration of preparer (other than officer) is based on all information of which prepared	arer has any knowledge.	

Sign	Signature of officer	Date						
Here	HEATHER FRANK, EXECUTI							
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN				
Paid	SARA KELLEY	SARA KELLEY	05/16/2					
Preparer	Firm's name 🕒 JOHANSON & YAU A	CCOUNTANCY CORP	Fir	Firm's EIN 🕨 **-**2860				
Use Only	Firm's address 💊 42 WEST CAMPBELL	AVENUE, THIRD FLOOR						
	CAMPBELL, CA 950	08	Ph	one no. (408) 288-5111				
May the IF	RS discuss this return with the preparer shown abo	ve? See instructions		X Yes No				
032001 12-2	3-20 LHA For Paperwork Reduction Act Notic	ce, see the separate instructions.		Form 990 (2020)				

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	990 (2020) PIEDMONT EDUCATION FOUNDATION **-**6176 Page 2
Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO PROVIDE SUSTAINED FINANCIAL SUPPORT TO PIEDMONT SCHOOLS THROUGH
	FUNDRAISING AND COMMUNITY ENGAGEMENT.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
U	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 \$ 3,400,792. including grants of \$ 3,400,792.) (Revenue \$)
	GRANTS TO THE PIEDMONT UNIFIED SCHOOL DISTRICT TO PROVIDE PROGRAMS,
	SERVICES, AND ACTIVITIES THAT THE SCHOOL DISTRICT CANNOT PROVIDE FOR IN ITS BUDGET.
4b	(Code:) (Expenses \$36,854. including grants of \$36,854.) (Revenue \$)
	GRANTS TO ORGANIZATIONS THE PIEDMONT EDUCATION FOUNDATION HAS ELECTED TO SPONSOR.
	IO SPONSOR.
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 163,396 • including grants of \$) (Revenue \$ 38,380 •)
4e	Total program service expenses 3,601,042.
	Form 990 (2020)
032002	12-23-20
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12120516 758554 4948

2020.05094 PIEDMONT EDUCATION FOUNDA 4948___1

Form 990 (FOUNDATION								
Part IV Checklist of Required Schedules												

 14a Did the organization maintain an office, employees, or agents outside of the United States? 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 or more? If "Yes," complete Schedule F, Parts I and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 				Yes	No
2 Is the organization engage in direct or indirect pairtial campaign activities on behalf of or in opposition to candidates for public office? If 'Yes, 'complete Schedule C, Part I 3 X 3 Did the organization engage in direct or indirect pairtial campaign activities, on have a section 501(h) election in effect or indirect pairtial campaign activities, or have a section 501(h) election in effect or indirect Part I. 3 X 4 Section 501(c)(d) organization activities, or have a section 501(h) election in effect or indirect pairting activities, or have a section 501(h) election in effect or indirect pairting activities, or have a section 501(h) election in effect or indirect pairting activities, or have a section 501(h) election in effect or indirect pairting activities, or pairting activities, and the organization indirect pairting activities, or pairting activities, and the organization indirect pairting activities, and the organization indirect pairting activities, and the organization manual in the indirect areasures, or other similar associet, and the organization repairt an anount in Part X, ine 21, for secret v or custodial account liability, save as a custodian for amounts not black indirect areasures, or other similar associet, and the organization repairt an anount for investment activities in Part X, line 12, hind account liability, save as a custodian for areas anount for the organization repairt an anount for investments - other securities in Part X, line 12, hind a save areas provide activities activities, and activititis, and actin associate reporten in Part X, line 12, hind activit	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
 3 Did the organization engage in direct or indirect positical campaign activities on bahal of or in opposition to candidates for public official "# "tes," complete Schedule C, Part II 4 Social S01(Q) organizations. Did the organization engage in k00bying activities, or have a section S01(h) election in effect of the social schedule C, Part II 5 Inter organization assection S01(k) all S01(k) or S01(k) all S01(k) or S01(k) all S01(k) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure B-192 // "yes," complete Schedule C, Part II 6 Did the organization receives of adjoint ad				X	
public office3 if ''Yes, complete Schedule Q, Part I 3 X 4 Section 501(c)(3) organization. Did the organization engage in lobbying activities, or have a section 501(h) eluction in effect 4 X 5 is the organization a section 501(c)(4), 507(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar anounce in cellstheol C, Part II 5 X 6 Did the organization in activation to investment of anounce in soci-fluids or acounts for which do ones have the right to provide advise on the distribution or investment of anounce in accil hunds or acounts for which do ones have the memory. 5 X 7 Did the organization endex on theories through a relative as a custodial for anounce in accil hunds or acounts for which do a coounts for these, "activation and the organization memory. 7 X 8 Did the organization memory in anount in Part X, line 21, for escore or outstoalial acount liability, serve as a custodial for anounce in activation advised to acounts for activation and acount liability, serve as a custodial for anounce of the following quastions in Yea, "then complete Schedule D, Part V. 10 X 11 The organization memory an anount for land, buildings, and equipment in Part X, line 12 / #Yes, "complete Schedule D, Part V. 11 X 12 Did the organization report an anount for investments - other securities in Part X, line 12 / #Yes, "complete Schedule D, Part V. 11 X 13 Did the organization report an anount for investments - other securit	-		2		<u> </u>
4 Section 501(c)(3) organizations. Did the organization nigage in lobbying activities, or have a section 501(c)(4) election in effect 4 X 5 Is the organization a section 501(c)(6), or 501(c)(6), or 501(c)(6), or 501(c)(7), or	3				37
during the tax year? If Yes,* complete Schedule C, Part II 4 X 5 Is the organization a section S(10(4), 501(6)(3) (10(4), 501(6)) S(10(4), 501(6)) S(10(4), 501(6)) 6 Did the organization markatin any domoral/vised funds or accounts for which domors have the right to provide advised on the distribution or investment and amounts in such tinds or accounts for which domors have the right to provide advised exec, or historic damounts in such tinds or accounts [0, Part II] 6 X 7 Did the organization markatin assumes, including easements to preserve open space, the environment, historic laterases, or historic attructives? II "vise," complete Schedule D, Part II 7 X 8 Did the organization markatin collections of works of art, historical treasures, or other similar assets? II "vise," complete Schedule D, Part II 8 X 9 Did the organization (nectry or through a related organization, hold assets in donorrestricted endowments 10 X 10 Did the organization (nectry or through a related organization, hold assets in donorrestricted endowments 10 X 11 If the organization report an amount for interpartical in Part X, line 10? II "Yes," complete Schedule D, Part V 10 X 12 If the organization report an amount for the interpartical in Part X, line 10? II "Yes," complete Schedule D, Part X 111 X<			3		<u> </u>
5 Is the organization a sectors 501(c)(4), 501(c)(5), or 501(c)(6) organization that neekes membership dues, assessments, or similar amounts as defined in Revenue Procedure 90-9197 if Yes," complete Schedule C, Part II 5 X Did the organization markan any donor advised 90-9197 if Yes," complete Schedule C, Part II 6 X Did the organization neekeen of hold a conservation funding easement in cluding easemen	4				v
emina amounts as defined in Revenue Procedure 99:199 # Yes," complete Schedule C, Part II 5 X Did the organization maintain any doora advised funds or any similar funds or accounts? If 'Yes,' complete Schedule D, Part II 6 X To be the organization reveive or hold a conservation easement, including easements to preserve open space, the environment, historical faces, or historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part II 7 X B Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part II 8 X 9 Did the organization report an amount in Part X, line 21, for sercew or custodial account liability, serve as a custofian for amounts not listed in Part X, or provide cordit consensities. The Art, and the organization services? 9 X 10 Did the organization report an amount for land, buildings, and equipment, cord the part X, IIN, NU, NU, NU, NU, NU, NU, NU, NU, NU, N	-		4		
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 II I 7 Did the organization mexicity on tobid a conservation assement, including assements to preserva open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II I 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part II I 9 Did the organization mexicity of through a related organization, directly of through a related organization, includ sasets in donor-restricted endowments or in quasi endowment? If 'Yes,' complete Schedule D, Part V I 9 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part V I 10 X III a X 11 X III a X 11 X IIII X 11 X IIII X 11 X IIIII X 11 X IIIIII X 11 X IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	5		-		v
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8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? #'Yes,' complete Schedule D, Part III 8 X 9 Did the organization report an amount in Part X, line 21, for escrew 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? 9 X 10 Did the organization for any of the following questions is "Yes," than complete Schedule D, Part VI, VII, VII, VI, or X as applicable. 9 X 10 Did the organization report an amount for line by lowing questions is "Yes," than complete Schedule D, Part VI, VII, VII, VI, or X as applicable. 10 X 11 Did the organization report an amount for line duplications is "Yes," than complete Schedule D, Part XI bid the organization report an amount for line schedule D, Part XI. 111 X 11 X Did the organization report an amount for threestments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, ine 16? If 'Yes, "complete Schedule D, Part XI 111 X 11 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, ine 16? If 'Yes, "complete Schedule D, Part XI 111 X 11 Did the organization subarity of the liabilities in Part X, line 15, that is 5% or more of its total asset assets reported in Part X, line 16? If 'Y	'		7		x
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10 Did the organization, directly or through a related organization, hold assets in donor restricted endowments 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, VI, VIII, VIII, VI, VIII, VIIII, VIII, VIII, VIIII, VIII, VIII, VIIII, VIII, VIII, VIII, VIII,			9		х
or in quasi endowments? // "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, VII, VII, IX, or X as applicable. a) Did the organization report an amount for land, buildings, and equipment in Part X, line 10? // "Yes," complete Schedule D, Part VI 11a X b) Did the organization report an amount for investments - other securities in Part X, line 12?, that is 5% or more of its total assets reported in Part X, line 16? // "Yes," complete Schedule D, Part VI 11b X c) Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? // "Yes," complete Schedule D, Part VII 11d X d) Did the organization report an amount for other assets in Part X, line 15% or more of its total assets reported in Part X, line 16? // "Yes," complete Schedule D, Part X 11d X e) Did the organization report an amount for other liabilities in Part X, line 15% or more of its total assets reported in Part X, line 16? // "Yes," complete Schedule D, Part X 11d X 11d X 11d X 11d X 12a Did the organization isolatized, independent audited financial statements for the tax year? 11d X 12a Did the organization included in consolidated, independent audited financial statements for the tax year? 12a X 13a Sthe organization isclude in consolidated, indep	10				
11 If the organization's answer to any of the following questions is 'Yes,'' then complete Schedule D, Parts VI, VII, VIII, VX, VX as applicable. 11 11 X a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? 'If 'Yes,'' complete Schedule D, Part VI 11a X b Did the organization report an amount for investments - other securities in Part X, line 12? 'If 'Yes,'' complete Schedule D, Part VII 11a X c Did the organization report an amount for investments - program related in Part X, line 13? 'If 'Yes,'' complete Schedule D, Part VII 11d X c 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 VIII 11d X c Did the organization report an amount for other labilities in Part X, line 25? If 'Yes,'' complete Schedule D, Part X 11e X 11d U the organization report an amount for other labilities in Part X, line 25? If 'Yes,'' complete Schedule D, Part X 11e X 11d U the organization separate or consolidated financial statements for the tax year include a footnote that addresses the organization aspearate, independent audited financial statements for the tax year? 11f X 12b U the organization aspearate, independent audited financial statements for the tax year? 11f X 12a Did the organization obtal section T206(VI)(VI)(VI) 'f 'Yes,' compl			10	x	
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foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 X 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 X 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 X 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 X 19 Did the organization operate one or more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 X 20a X 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20a If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 20b 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 20a X			14b		X
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19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20a If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 20b 21 Did the organization operate on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 X	18			Ţ	
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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					
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					<u> </u>
domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II			200		
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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
b	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
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		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		x
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
•	"Yes," complete Schedule L, Part IV	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			<u> </u>
00	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			<u> </u>
02	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	02		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
04		34		x
35 a	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
	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?			
00	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
0.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	<u>.</u>		
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
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Form	990 (2020) PIEDMONT EDUCATION FOUNDATION **-**6 t V Statements Regarding Other IRS Filings and Tax Compliance (continued)	176	Р	_{age} 5								
			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 6											
b	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?											
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to $e-file$ (see instructions)											
3a	3a Did the organization have unrelated business gross income of \$1,000 or more during the year?											
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b										
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a											
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x								
b	If "Yes," enter the name of the foreign country											
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).											
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X								
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X								
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c										
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit											
	any contributions that were not tax deductible as charitable contributions?	6a		X								
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts											
	were not tax deductible?	6b										
7	Organizations that may receive deductible contributions under section 170(c).											
а	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								
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b										
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required											
	to file Form 8282?	7c		X								
d	If "Yes," indicate the number of Forms 8282 filed during the year7d											
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		L								
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u> </u>								
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>								
h	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		<u> </u>								
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												
11	Section 501(c)(12) organizations. Enter:											
а	Gross income from members or shareholders 11a											
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		<u> </u>								
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year											
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10-	_									
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											
		140		x								
14a h	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b										
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>			<u> </u>								
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		x								
	If "Yes," see instructions and file Form 4720, Schedule N.	15										
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x								
10	If "Yes," complete Form 4720, Schedule O.	10										

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PIEDMONT EDUCATION FOUNDATION

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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.

						Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		22					
	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 0.								
b	Enter the number of voting members included on line 1a, above, who are independent	1b		22					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	ny other						
	officer, director, trustee, or key employee?				2		Х		
3	Did the organization delegate control over management duties customarily performed by or under the								
	of officers, directors, trustees, or key employees to a management company or other person?				3		Х		
4	Did the organization make any significant changes to its governing documents since the prior Form 9				4		Х		
5	Did the organization become aware during the year of a significant diversion of the organization's ass				5		Х		
6	Did the organization have members or stockholders?				6		Х		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap								
	more members of the governing body?				7a	Х			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st								
	persons other than the governing body?				7b		x		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea				1.5				
a	The governing body?	2	0		8a	х			
	Each committee with authority to act on behalf of the governing body?				8b	X			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read				00				
3	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 Re	<u></u>			3				
	tion 211 enoices (This Section B requests information about policies not required by the internal Re	venue	<u></u>			Yes	No		
100	Did the examination have lead chapters, branches, or efficience?			1	10a	162	No X		
	Did the organization have local chapters, branches, or affiliates?				10a				
D	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		X		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body	rorm?	11a		~				
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
	e organization have a written conflict of interest policy? If "No," go to line 13					X X			
b		Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	,				37			
	in 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	Х			
15	Did the process for determining compensation of the following persons include a review and approva	l by ind	lependent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official				15a		X		
b	Other officers or key employees of the organization				15b		X		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent w	th a						
	taxable entity during the year?				16a		Х		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat	e its p	articipation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	ization	's						
	exempt status with respect to such arrangements?				16b				
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright CA								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	nd 990	T (Section	501(c)(3)s	only)	availa	ble		
	for public inspection. Indicate how you made these available. Check all that apply.								
	Own website Another's website X Upon request Other (explain	on Sc	hedule ()						
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co			olicy, and	financ	cial			
	statements available to the public during the tax year.			, <u>.</u>					
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and	records						
	BETTY WINNACKER - 510-653-1816								
	401 HIGHLAND AVENUE, PIEDMONT, CA 94611								

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

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

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

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

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

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

(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average	(do	Position (do not check more than one					Reportable	Reportable	Estimated
	hours per	box, unless person is both an officer and a director/trustee)				s both	n an	compensation	compensation	amount of
	week					1/		from	from related	other
	(list any hours for	irecto						the organization	organizations (W-2/1099-MISC)	compensation from the
	related	e or d	tee			sated		(W-2/1099-MISC)	(00-2/1099-00130)	organization
	organizations	truste	al trus		yee	mpen				and related
	below	Individual trustee or director	Institutional trustee	۲.	Key employee	Highest compensated employee	er			organizations
	line)	Indiv	In stit	Officer	Key e	Highe	Former			-
(1) HEATHER FRANK	40.00									
EXECUTIVE DIRECTOR		Х						133,027.	0.	0.
(2) EILEEN KWEI	2.00									
IMMEDIATE PAST CHAIR		Х						0.	0.	0.
(3) LINDA SONG WENDEL	2.00									
GOVERNANCE		Х						0.	0.	0.
(4) ABBY SCOTT	2.00									
SECRETARY		Х		Х				0.	0.	0.
(5) CHARLOTTE ERO	2.00									
TREASURER		Х						0.	0.	0.
(6) RICK SMITH	2.00									
ASSISTANT TREASURER		Х						0.	0.	0.
(7) SARAH PUCKETT	2.00									
ALUMNI ENGAGEMENT		Х						0.	0.	0.
(8) MARY LOU RIGHELLIS	2.00									
COMMUNITY ENGAGEMENT		Х						0.	0.	0.
(9) LINDA SMITH MUNYAN	2.00									
DRESS BEST FOR LESS		Х						0.	0.	0.
(10) NICKI GILBERT	2.00									
CHAIR		Х		Х				0.	0.	0.
(11) EILEEN RUBY	2.00									
LEGACY GIVING		Х						0.	0.	0.
(12) SARAH DAVISON DEVRIES	2.00									
SCHOOL REP: BEACH		Х						0.	0.	0.
(13) DANA LUNG	2.00									
SCHOOL REP: HAVENS		Х						0.	0.	0.
(14) JOHN ORTA	2.00									
CO-VICE CHAIR		Х		Х				0.	0.	0.
(15) TOM SNYDER	2.00									
SCHOOL REP: PMS		Х						0.	0.	0.
(16) CORTNEY ALLEN	2.00									
CO-VICE CHAIR		Х		Х				0.	0.	0.
(17) MARY IRELAND	2.00									
PROGRAMS		Х						0.	0.	0.
032007 12-23-20										Form 990 (2020)

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Form 990 (2020)

Form 990 (2020) PIEDMONT									**_**	*62	L76	Pa	ige 8
Part VII Section A. Officers, Directors, Trus		ploy	ees,			ghes	t C	ompensated Employee	s (continued)				
(A) Name and title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				an	(D) Reportable compensation from	(E) Reportable compensatior from related	n	Esti amo	(F) imate ount c other		
	(list any hours for related organizations below line)	ndividual trustee or director	nstitutional trustee	Officer	<ey em="" ployee<="" td=""><td>Highest compensated employee</td><td>Former</td><td>the organization (W-2/1099-MISC)</td><td>organizations (W-2/1099-MIS</td><td></td><td>orga</td><td>m the nization relate</td><td>e on ed</td></ey>	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		orga	m the nization relate	e on ed
(18) ANGEL FIERRO	2.00				-	_ 0							
MEMBER AT LARGE	2 00	Х						0.		0.			0.
(19) REBECCA THORNBORROW SCHOOL REP: PHS	2.00	x						0.		0.			0.
(20) AMELIE KAPPES	2.00												
GIVING CAMPAIGN		Х						0.		0.			0.
(21) EMILY HARROLD COMMUNICATIONS	2.00	x						0.		0.			0.
(22) RICH THOMPSON	2.00	Λ						0.		••			0.
MEMBER AT LARGE		х						0.		0.			0.
1b Subtotal								133,027.		0.			0.
c Total from continuation sheets to Part VI d Total (add lines 1b and 1c)								0.		<u>0.</u> 0.			0.
2 Total number of individuals (including but n							o re		000 of reportable	••1			1
compensation from the organization												Yes	⊥ No
3 Did the organization list any former officer	director, truste	ee, k	ey e	mplo	oyee	e, or	hig	hest compensated emp	oyee on	[
line 1a? If "Yes," complete Schedule J for sFor any individual listed on line 1a, is the st											3	_	X
and related organizations greater than \$15	0,000? If "Yes,	" со	mple	ete S	Sche	dule	J f	or such individual			4		x
5 Did any person listed on line 1a receive or a								0			5		х
rendered to the organization? If "Yes." con Section B. Independent Contractors	<u>ipiete Scheaule</u>	<u> </u>	or su	icn p	berso	on .					5		
1 Complete this table for your five highest co the organization. Report compensation for	•	•							•	ensat	ion fror	n	
(A))NE					(B) Description of s		С	(C) ompens	sation	
		110		<u> </u>									
							-						
• Total number of index or deat contractors (her	0.11-1			we then				
2 Total number of independent contractors (i \$100,000 of compensation from the organi	•	JU IIN	nted		nos 0		lea	above) who received mo	חר נוומוו		_ ^	00	000

Form **990** (2020)

032008 12-23-20

Form				EDUC	ATION FOU	JNDATION		**-***6	176 Page 9
I ai		Check if Schedule O		rosponso	or noto to any lin	o in this Dart VIII			
		Oneck in Schedule O C				(A) Total revenue	(B) Related or exempt function revenue	(C)	(D) Revenue excluded from tax under sections 512 - 514
ts ts	1 a	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues		1b					
Am G	C	Fundraising events		1c					
Sift: ar /	d	Related organizations		1d					
is, (е	Government grants (contr	ibutions)	1e					
tion S	f	All other contributions, gifts,	grants, and						
ibu		similar amounts not included	above		345,709.				
nd C	g	Noncash contributions included in	lines 1a-1f	1g \$					
<u>a C</u>	h	Total. Add lines 1a-1f				3,345,709.			
				~	Business Code		00 505		
e	2 a			SERI	611600	28,795.	28,795.		
ervi Je	b	STUDENT DIREC	TORY		611710	9,585.	9,585.		
n S ent	C								
Program Service Revenue	c								
jo Loc	e								
<u>а</u>		All other program service				38,380.			
		Total. Add lines 2a-2f				30,300.			
	3	Investment income (includ	-			206,172.			206,172.
	4	other similar amounts)				200,172.			200,172.
	4 5	Income from investment of							
	5	Royalties		i) Real	(ii) Personal				
	6 0	Gross rents	6a	i) Hour					
	6а ь		6b						
	c	Less: rental expenses Rental income or (loss)	60 60						
		Net rental income or (loss)							
		Gross amount from sales of		ecurities	(ii) Other				
	1 0	assets other than inventory	7a		() 0 00.				
	h	Less: cost or other basis	14						
e	~	and sales expenses	7b						
/enue	с	Gain or (loss)	7c						
		Net gain or (loss)	· · · · ·						
Other Re		Gross income from fundraisir							
f		including \$							
		contributions reported on							
		Part IV, line 18		88	124,726.				
	b	Less: direct expenses			43,633.				
	С	Net income or (loss) from	fundraising	g events	►	81,093.			81,093.
	9 a	Gross income from gamin	g activities	s. See					
		Part IV, line 19		9a	1				
	b	Less: direct expenses		9t)				
	C	Net income or (loss) from	gaming ac	tivities	►				
	10 a	Gross sales of inventory, I							
		and allowances			526,319.				
		Less: cost of goods sold		····· <u> </u>	510,814.	4 5 5 5 5			4 5 5 5 5
\rightarrow	С	Net income or (loss) from	sales of in	ventory .		15,505.			15,505.
s					Business Code				
eou	11 a								
evenue:	b								
Miscellaneous Revenue	c								
Mis		All other revenue							
1	е	Total. Add lines 11a-11d Total revenue. See instruction			····· •	3,686,859.	38,380.	0.	302,770.
	12						1 20,200.	i U.	

032009 12-23-20

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PIEDMONT EDUCATION FOUNDATION Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX **(D)** Fundraising (C) Management and general expenses (B) (A) Do not include amounts reported on lines 6b, Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 3,437,646. 3,437,646. and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members 4 5 Compensation of current officers, directors, 250,644. 130,207. 47,048. 73,389. trustees, and key employees Compensation not included above to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 7 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 1,020. 1,020. Other employee benefits 9 19,642. 10,495. 3,628. 5,519. 10 Payroll taxes 11 Fees for services (nonemployees): Management а b Legal 29,460. 48,626. 19,166. С Accounting Lobbying d Professional fundraising services. See Part IV, line 17 е 26,887. 26,887. Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, g column (A) amount, list line 11g expenses on Sch O.) 4,187. 4,187 Advertising and promotion 12 2,491. 2,474. 17 Office expenses _____ 13 Information technology 14 15 Royalties 19,020. 19,020. 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 Depreciation, depletion, and amortization 22 4,771. 4,771. 23 Insurance Other expenses. Itemize expenses not covered 24 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.) 45,474. 4,212. 41,262. CREDIT CARD FEES а 21,101. PRINTING AND PUBLICATIO 11,202. 9,899. h 18,631. 18,631. BAD DEBT EXPENSE С 14,407. 8,812. 4,396. 1,199. SOFTWARE AND LICENSING d 15,871. 9,395. 2,884. 3,592. All other expenses е 3,930,418. 3,601,042. 144,902. 184,474. Total functional expenses. Add lines 1 through 24e 25 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

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Form 990 (2020)

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Form 990 (2020)

Assets

Liabilities

Net Assets or Fund Balances

Part X | Balance Sheet

PIEDMONT EDUCATION FOUNDATION

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

Total net assets or fund balances

Total liabilities and net assets/fund balances

(A) Beginning of year End of year 1,670,636. 3,847,486. 1 1 Cash - non-interest-bearing Savings and temporary cash investments 2 2 79,268. 59,838. 3 3 Pledges and grants receivable, net 4 Accounts receivable, net 4 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disqualified persons (as defined 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) Notes and loans receivable, net 7 7 39,486. 21,390. 8 Inventories for sale or use 8 41,638. 41,638. 9 Prepaid expenses and deferred charges 9 **10a** Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D _____ 10a b Less: accumulated depreciation 10b 10c 11 Investments - publicly traded securities 11 9,872,603. 9,481,044. Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets 26,402. 11,358. 15 15 Other assets. See Part IV, line 11 11,730,033. 13,462,754. 16 16 **Total assets.** Add lines 1 through 15 (must equal line 33) 520. 25,499. Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 Deferred revenue 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 54,594. 25 9,218. of Schedule D 55,114. 34,717. 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here 🕨 🔀 and complete lines 27, 28, 32, and 33. 11,523,677. 27 13,133,331. 27 Net assets without donor restrictions 151,242. Net assets with donor restrictions 294,706. 28 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 31 Retained earnings, endowment, accumulated income, or other funds 31

(B)

13,462,754. Form 990 (2020)

13,428,037.

11,674,919.

11,730,033.

32

33

Form	1990 (2020) PIEDMONT EDUCATION FOUNDATION	**.	-***6176	Pag	_{ge} 12
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	3,686		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,930),4:	18.
3	Revenue less expenses. Subtract line 2 from line 1	3	-243	3,5	<u>59.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	11,674	1,9 :	<u>19.</u>
5	Net unrealized gains (losses) on investments	5	1,996	5,6'	<u>77.</u>
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	13,428	3,0:	<u>37.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		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?		2b	Х	
	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:				
	X Separate basis 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?			х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Au	dit		
	Act and OMB Circular A-133?		<u>3a</u>		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red aud	lit		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			000	

Form **990** (2020)

SCH	EDU	LE	Α
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Department of the Treasury Internal Revenue Service

(Form	990	or	990-EZ)
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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
	2020
	Open to Public Inspection
Employer	identification number

nume	PIEI	OMONT EDUCA	TION FOUNDAT	ION			*	*-***6176
Part					nis part.) S	ee instruction	S.	
The or	ganization is not a private found							
1	A church, convention of cl					I)(A)(i).		
2	A school described in sec							
3	A hospital or a cooperative					ii).		
4	A medical research organi	zation operated in co	njunction with a hospital	described	in sectio	n 170(b)(1)(A	(iii). Enter	the hospital's name,
	city, and state:							
5	An organization operated	for the benefit of a co	llege or university owned	or operate	ed by a go	overnmental u	nit describe	ed in
	section 170(b)(1)(A)(iv). ((Complete Part II.)						
6	A federal, state, or local go	overnment or governr	nental unit described in	section 17	70(b)(1)(A)	(v).		
7	An organization that norm	ally receives a substa	ntial part of its support fi	om a gove	ernmental	unit or from th	e general p	oublic described in
	section 170(b)(1)(A)(vi). (0	Complete Part II.)						
8 _	A community trust describ	oed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)				
9	An agricultural research or	rganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a	land-grant	college
	or university or a non-land-	-grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of	the college	or
_	university:							
10 🛛	An organization that norm	ally receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	ip fees, and	d gross receipts from
	activities related to its exe		-					-
	income and unrelated bus		(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	Ifter June 30, 1975.
	See section 509(a)(2). (Co			_				
11 L	An organization organized	-	•	•				
12 🗌	An organization organized		•	•		-	•	• •
	more publicly supported o	-						Sheck the box in
_	lines 12a through 12d that						-	a in size a
а	Type I. A supporting org		-	• • • •	-			
	the supported organizat organizat		• • • •	majonty o				ipporting
b		-	or controlled in connect	ion with its	s sunnorte	nd organization	hy hav	vina
		-	anization vested in the sa			-		-
	organization(s). You mu			ine perso				bonted
с		•	g organization operated	in connect	tion with. a	and functional	lv integrate	d with.
•			b). You must complete I				.,	
d			oorting organization oper				ted organiz	zation(s)
	that is not functionally in	tegrated. The organiz	zation generally must sat	isfy a distri	ibution rec	quirement and	an attentiv	veness
	requirement (see instruc	tions). You must co	nplete Part IV, Sections	A and D,	and Part	V.		
е	Check this box if the org	anization received a	written determination fro	m the IRS	that it is a	Type I, Type	I, Type III	
	functionally integrated, o	or Type III non-functio	nally integrated supporti	ng organiz	ation.			
f E	Enter the number of supported	organizations						
<u> </u>	Provide the following informatic			(iv) Is the oras	nization listed			
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi		(v) Amount of support (see ir		(vi) Amount of other support (see instructions)
	organization		above (see instructions))	Yes	No	Support (See II	structions	
Total								

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032021 01-25-21 Schedule A (Form 990 or 990-EZ) 2020 14

Schedule A (Form 990 or 990-EZ) 2020 PIEDMONT EDUCATION FOUNDATION

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 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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
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						
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)						
~							
	Public support. Subtract line 5 from line 4.						
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 4		(6) 2017		(0) 2013	(e) 2020	
8	Gross income from interest,						
Ŭ	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
-	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instructi	ons)			12	
13	First 5 years. If the Form 990 is for th	e organization's f	irst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3)	
	organization, check this box and stop						>
See	ction C. Computation of Publi	c Support Per	rcentage				
14	Public support percentage for 2020 (I	ine 6, column (f), c	divided by line 11,	column (f))		14	%
	Public support percentage from 2019					15	%
16 a	33 1/3% support test - 2020. If the c	organization did no	ot check the box o	on line 13, and line	14 is 33 1/3% or n	nore, check this bo	x and
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2019. If the c						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test		-				
	and if the organization meets the fact			-	-	vi now the organiz	
	meets the facts-and-circumstances te	-		• • • •	•	17	
b	10% -facts-and-circumstances test		-				IU% Or
	more, and if the organization meets the						
10	organization meets the facts-and-circu Private foundation If the organization			-			
10	Private foundation. If the organizatio	THUIL HOL CHECK a		Ja, 100, 17a, 01 17		edule A (Form 990	
					001		

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Schedule A (Form 990 or 990 EZ) 2020 PIEDMONT EDUCATION FOUNDATION Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2813577.	2776226.	3209614.	3406305.	3345709.	<u>15551431.</u>
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	329,114.	379,122.	421,212.	129,293.	81,093.	1339834.
3	Gross receipts from activities that			/			
Ū	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
•	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	3142691.	3155348.	3630826.	3535598.	3426802.	16891265.
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						0.
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c	Add lines 7a and 7b						0.
	Public support. (Subtract line 7c from line 6.)						16891265.
Se	ction B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6	3142691.	3155348.	3630826.	3535598.	3426802.	16891265.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	195,744.	198,904.	176,908.	168,457.	206,172.	946,185.
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b	195,744.	198,904.	176,908.	168,457.	206,172.	946,185.
11	Net income from unrelated business activities not included in 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.)	3338435.	3354252.	3807734.	3704055.	3632974.	17837450.
14	First 5 years. If the Form 990 is for th	e organization's fir	rst, second, third, f	ourth, or fifth tax y	vear as a section 5	01(c)(3) organizatio	on,
Se	ction C. Computation of Publi	c Support Per	centage			rr	
15	Public support percentage for 2020 (li	ne 8, column (f), d	ivided by line 13, c	olumn (f))		15	<u>94.70 %</u>
	Public support percentage from 2019					16	95.00 %
	ction D. Computation of Inves					<u>г г</u>	
	Investment income percentage for 20			ne 13, column (f))		17	5.30 %
	Investment income percentage from 2						<u> </u>
19a	a 33 1/3% support tests - 2020. If the	-					
	more than 33 $1/3\%$, check this box ar	-	•				► <u>X</u>
t	33 1/3% support tests - 2019. If the						
20	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organizatio	THUIL HOL CHECK & I	UUX UIT IIITIE 14, 192	I, OF THE, CHECK IN			
ບບ∠ປະ					50110		

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16 0 05004 D

Schedule A (Form 990 or 990-EZ) 2020 PIEDMONT EDUCATION FOUNDATION

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1

Yes No

Part IV Supporting Organizations

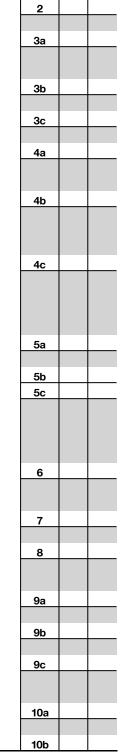
(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and 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?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If* "Yes." *complete Part I of Schedule L (Form 990 or 990-EZ).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 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.)

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Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020 PIEDMONT EDUCATION FOUNDATION

Pa	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 in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
с	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
		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	4		
•	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,			
<u> </u>	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 potification, and (iii) copies of the			

	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	
3	By reason of the relationship described in 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**

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year	(see instructions).
	Show the box next to the method that the organization dood to battery the integral rate root during the year	· · · · · · · · · · · · · · · · · · ·

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

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

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in 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.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *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 of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.* 032025 01-25-21

Schedule A (Form 990 or 990-EZ) 2020

2a

2b

3a

3b

Yes No

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	dule A (Form 990 or 990 EZ) 2020 PIEDMONT EDUCATION FOUN			**-***6176 Page 6
Pa				
1	Check here if the organization satisfied the Integral Part Test as a qualifyin			Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	t complete S	Sections A through E.	1
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
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):			
а	Average monthly value of securities	1a		
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		
Sect	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		

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

Schedule A (Form 990 or 990-EZ) 2020

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Schedule A (Form 990 or 990-EZ) 2020 PIEDMONT EDUCATION FOUNDATION

Par	t V Type III Non-Functionally Integrated 509	a)(3) Supporting Orga	inizations _{(contine}	ued)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer		1		
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	S	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 (<i>describe in Part VI</i>). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive	1		
	(provide details in Part VI). See instructions.	-		8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2020	ns	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
a	From 2015				
b	From 2016				
C	From 2017				
d	From 2018				
e	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, 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 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j and 4c.				
8	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

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Schedule A	Form 990 or 990-EZ) 2020 PIEDMONT EDUCATION	I FOUNDATION	**-***6176 Page 8
Part VI	Supplemental Information. Provide the explanations of Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 1line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, a (See instructions.)	required by Part II, line 10; Part II, line 17a c 11a, 11b, and 11c; Part IV, Section B, lines s 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part	r 17b; Part III, line 12; 1 and 2; Part IV, Section C, V, Section B, line 1e; Part V,
032028 01-25-2		Schedu	ile A (Form 990 or 990-EZ) 2020

Department of the Treasury

Internal Revenue Service

(Form	990)
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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.



Employer identification number

-*6176

Name	of the	organization
name	or unc	organization

PIEDMONT EDUCATION FOUNDATION

Par	tl	Drganizations Maintaining Donor Advise	d Funds or Othe	r Similar Funds	or Ac	counts. Cor	nplete if the	e
	(organization answered "Yes" on Form 990, Part IV, lin	ne 6.					
			(a) Donor ad	vised funds	(b) Funds and ot	her accour	nts
1	Total nu	mber at end of year						
2	Aggrega	ate value of contributions to (during year)						
3	Aggrega	ate value of grants from (during year)						
4	Aggrega	ate value at end of year						
5	Did the	organization inform all donors and donor advisors in	writing that the assets	s held in donor advise	ed fund	S		
	are the	organization's property, subject to the organization's	exclusive legal contro	ol?			Yes	No
6	Did the	organization inform all grantees, donors, and donor a	dvisors in writing that	t grant funds can be i	used or	nly		
	for char	itable purposes and not for the benefit of the donor o	or donor advisor, or fo	r any other purpose o	conferri	ng		
	imperm	ssible private benefit?					Yes	No
Par	tll	Conservation Easements. Complete if the or	ganization answered	"Yes" on Form 990, F	Part IV,	line 7.		
1	Purpose	e(s) of conservation easements held by the organizati	on (check all that app	ly).				
	Р	reservation of land for public use (for example, recrea	tion or education)	Preservation of	a histo	rically importan	t land area	
	Р	rotection of natural habitat		Preservation of	a certif	fied historic stru	cture	
	P	reservation of open space						
2	Comple	te lines 2a through 2d if the organization held a quali	fied conservation con	tribution in the form o	of a cor	servation easer	ment on the	e last
	day of t	ne tax year.				Held at th	ne End of the	e Tax Year
а	Total nu	mber of conservation easements				2a		
b	Total ac	reage restricted by conservation easements				2b		
С		of conservation easements on a certified historic str				2c		
d		of conservation easements included in (c) acquired a						
		the National Register				2d		
3	Numbe	of conservation easements modified, transferred, rel	leased, extinguished,	or terminated by the	organiz	zation during the	e tax	
	year 🕨							
4		of states where property subject to conservation eas						
5		e organization have a written policy regarding the per		pection, handling of			٦.,	<u> </u>
_		ns, and enforcement of the conservation easements it					_ Yes	No
6	Staff an	d volunteer hours devoted to monitoring, inspecting,	handling of violations	s, and enforcing cons	ervatior	n easements du	ring the yea	ar
_	►							
7		of expenses incurred in monitoring, inspecting, hand	dling of violations, and	l enforcing conservat	ion eas	ements during	the year	
•	▶\$_			anto of continu 170/	-)///D)/	.)		
8		tion 170(b)(4)(P)(ii)2					Yes	No
9		tion 170(h)(4)(B)(ii)? (III, describe how the organization reports conservati						
9		sheet, and include, if applicable, the text of the footr						
		ation's accounting for conservation easements.	lote to the organizatio			it describes the		
Par	t III	Organizations Maintaining Collections of	f Art, Historical 1	reasures, or Ot	her Si	imilar Asset	s.	
	(Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	-				
1a	If the or	ganization elected, as permitted under FASB ASC 95	8, not to report in its	revenue statement a	nd bala	nce sheet work	s	
	of art, h	istorical treasures, or other similar assets held for put	olic exhibition, educat	ion, or research in fu	rtheran	ce of public		
	service,	provide in Part XIII the text of the footnote to its finar	ncial statements that	describes these item	s.			
b	If the or	ganization elected, as permitted under FASB ASC 95	8, to report in its reve	enue statement and b	alance	sheet works of		
	art, hist	prical treasures, or other similar assets held for public	c exhibition, educatior	n, or research in furth	erance	of public servic	e,	
	provide	the following amounts relating to these items:						
		enue included on Form 990, Part VIII, line 1				▶ \$		
						► \$		
2	If the or	ganization received or held works of art, historical tre				provide		
		wing amounts required to be reported under FASB A						
а	Revenu	e included on Form 990, Part VIII, line 1	-			▶ \$		
		ncluded in Form 990, Part X				▶ \$		
LHA	For Pap	erwork Reduction Act Notice, see the Instruction	s for Form 990.			Schedule	e D (Form 9	990) 2020
032051	12-01-20		~ ~					
			22					

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Schedule D (Form 990) 2020 PIEDMONT EDUCATION FOUNDATION **-**6176 P						Page 2		
Par	t III Organizations Maintaining Co	ollections of Art	, Historical Tre	asures, or Othe	er Simil	ar Assets	(continu	ied)
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing that make s	significan	t use of its		
	collection items (check all that apply):							
а	Public exhibition	d	Loan or exc	hange program				
b	Scholarly research	e	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co					ose in Part	XIII.	
5	During the year, did the organization solicit or				r assets		_	
	to be sold to raise funds rather than to be ma						Yes	No
Par	t IV Escrow and Custodial Arrang		te if the organizatio	n answered "Yes" or	n Form 99	90, Part IV,	line 9, or	
	reported an amount on Form 990, Par							
1 a	Is the organization an agent, trustee, custodia						٦	—
	on Form 990, Part X?					L	Yes	No
b	If "Yes," explain the arrangement in Part XIII a	and complete the foll	owing table:					
							Amount	
	Beginning balance							
	Additions during the year							
e	Distributions during the year				<u>1e</u> 1f			
20	Ending balance Did the organization include an amount on Fo				···		Yes	No
	If "Yes," explain the arrangement in Part XIII.				• • • • •			
Par		f the organization and	swered "Yes" on Fo	rm 990. Part IV. line	10.			
		(a) Current year	(b) Prior year	(c) Two years back	1	e years back	(e) Four y	/ears back
1a	Beginning of year balance	7,410,341.	7,073,549.	6,777,089.		610,675.		206,071.
b	Contributions	70,587.	60,162.			117,175.		71,834.
с	Net investment earnings, gains, and losses	2,209,852.	646,979.	478,979.		389,203.		555,686.
d	Grants or scholarships	375,280.	339,404.	321,828.		305,000.	2	288,000.
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses	26,887.	30,945.	34,371.		34,964.		34,916.
g	End of year balance	9,288,613.	7,410,341.	7,073,549.	6	777,089.	6,6	510,675.
2	Provide the estimated percentage of the curre	ent year end balance	(line 1g, column (a)) held as:				
а	Board designated or quasi-endowment		_%					
b	Permanent endowment	%						
С	Term endowment	%						
	The percentages on lines 2a, 2b, and 2c should be a should be should be a should be a should be a should be should be a should							
3a	Are there endowment funds not in the posses	ssion of the organizat	tion that are held an	nd administered for t	he organi	zation	Г	
	by:							Yes No
	(i) Unrelated organizations						3a(i)	<u>X</u>
	(ii) Related organizations						3a(ii)	<u> </u>
b	If "Yes" on line 3a(ii), are the related organization						3b	
4 Par	t VI Land, Buildings, and Equipme		ment funds.					
1 41	Complete if the organization answered		Part IV line 11a S	oo Form 000 Port V	lino 10			
	Description of property	(a) Cost or ot	- Í		Accumula	tod		
	Description of property	basis (investm	• •		epreciatio		(d) Book	value
1a	Land							
b	Buildings							
с	Leasehold improvements							
	Equipment							
	Other							
Tota	. Add lines 1a through 1e. (Column (d) must ed	qual Form 990, Part X	(, column (B), line 10	0c.)		🕨 🗌		0.

Schedule D (Form 990) 2020

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	UCATION FOUND	ATION	**-***6176 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(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) NEUBERGER-BERMAN ACCOUNTS	9,481,044.	END-OF-YEAR 1	MARKET VALUE
(B)	5,101,011.		
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ►	9,481,044.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation:	Cost or end-of-year market value
(1)			
(2)			
<u>(3)</u>			
<u>(4)</u>			
(5)			
<u>(6)</u>			
(7)(9)			
(8) (9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, lii	ne 15.
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X, col. (B) line Part X Other Liabilities.	<u>e 15.)</u>		
	on Form 000 Port IV line	110 or 11f Soo Form 000 Do	ort V line 25
Complete if the organization answered "Yes" 1. (a) Description of liability	on Form 990, Fait IV, line		(b) Book value
(1) Federal income taxes			
(2) OTHER LIABILITIES			315.
(3) ACCURED VACATION			8,903.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 25.)		9,218.
2. Liability for uncertain tax positions. In Part XIII, provide		the organization's financial s	tatements 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) 2020

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Sche	Schedule D (Form 990) 2020 PIEDMONT EDUCATION FOUNDATION			**-***6176 Page 4		
Par	t XI Reconciliation of Revenue per Audited Financial Stat	ements With				
	Complete if the organization answered "Yes" on Form 990, Part IV, lir	ie 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	5,656,6	49.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	1,996,677.			
b	Donated services and use of facilities	2b				
с	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e	1,996,6	77.
3	Subtract line 2e from line 1			3	3,659,9	72.
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	26,887.			
b	Other (Describe in Part XIII.)	4b				
С	Add lines 4a and 4b			4c	26,8	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)		5	3,686,8	59.
Pa	t XII Reconciliation of Expenses per Audited Financial Sta		h Expenses per R	eturi	า.	
	Complete if the organization answered "Yes" on Form 990, Part IV, lin				2 002 5	21
1	Total expenses and losses per audited financial statements			1	3,903,5	<u>31.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1				
а	Donated services and use of facilities					
b	Prior year adjustments					
С	Other losses					
d	Other (Describe in Part XIII.)					•
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	3,903,5	31.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b		26,887.			
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b			4c	26,8	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I, line 1	<u>3.)</u>		5	3,930,4	18.
Pa	t XIII Supplemental Information.					

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

032054 12-01-20

SCHEDULE G Supplemental Information Regarding Fundraising or Gaming Activities						OMB No. 1545-0047			
(Form 990 or 990-EZ) 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.								2020	
► Attach to Form 990 or Form 990-EZ.								Open to Public	
Internal Revenue Service Name of the organization		to www.irs.gov/Form990 for instruction	uction	s and	the latest information	on.	Employer ide	Inspection entification number	
rtanie er tile erganization		T EDUCATION FOUNDA	TIO	N			**_**6		
	ing Activities.	Complete if the organization answe	red "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-E	Z filers are not	
 Indicate whether the a Mail solicitat Mail solicitat Internet and Phone solicitat In-person so 2 a Did the organization key employees list 	e organization rais ions email solicitations tations licitations on have a written o ed in Form 990, Pa highest paid indiv	ed funds through any of the followin e Solicitat f Solicitat g Special or oral agreement with any individual art VII) or entity in connection with pur- viduals or entities (fundraisers) pursue	tion of tion of fundra (incluc	non-g gover aising ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		Ye		
(i) Name and addres or entity (func		(ii) Activity	(iii) fundr have c or cor contrib	ntrol of	(iv) Gross receipts from activity	tò (e	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization	
			Yes	No				1	
								<u> </u>	
3 List all states in whi or licensing.	ich the organizatio	n is registered or licensed to solicit c	ontrib	utions	or has been notified	it is	exempt from re	gistration	
LHA For Paperwork Re	eduction Act Noti	ce, see the Instructions for Form 9	90 or	990-E	Z. S	Sche	dule G (Form	990 or 990-EZ) 2020	

032081 11-25-20

Schedule C	G (Form 990 or 990-EZ) 2020	PIEDMONT	EDUCATION	FOUNDATION
Part II	Fundraising Events.	Complete if the c	organization answere	ed "Yes" on Form 990, Pa

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-F7 lines 1 and 6b. List events with gross groater than \$5 000

		of fundraising event contributions and gro				
			(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			SPRING FLING			col. (c)
e			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	124,726.			124,726.
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)	124,726.			124,726.
	4	Cash prizes				
s	5	Noncash prizes				
pense	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
D	~	Fatadaianaat				
	8 9	Entertainment				43,633.
	9 10	Other direct expenses Direct expense summary. Add lines 4 through				43,633.
		Net income summary. Subtract line 10 from li			>	81,093.
Pa	rt I					02/0301
		\$15,000 on Form 990-EZ, line 6a.		, , , ,		
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bing		(d) Total gaming (add col. (a) through col. (c))
Rev	1	Gross revenue				
ses	2	Cash prizes				
Expen	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes	% Yes %	
	6	Volunteer labor	□ 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)			
		er the state(s) in which the organization condu				
а	ls t	he organization licensed to conduct gaming a	ctivities in each of these s	tates?		· Yes No
b	lf "	No," explain:				
		re any of the organization's gaming licenses re				. Yes No
b	If "	Yes," explain:				
	00 11	-25-20			Schedule G (Fo	rm 990 or 990-EZ) 2020

Sch	edule G (Form 990 or 990-EZ) 2020 PIEDMONT EDUCATION FOUNDATION	***61	176	Page 3
	Does the organization conduct gaming activities with nonmembers?	<u>ا</u>	Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?	ו 🗌 ו	Yes	No No
13	Indicate the percentage of gaming activity conducted in:			
	The organization's facility	13a		%
	An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	י 🗌 א	Yes	No No
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
	of gaming revenue retained by the third party > \$			
С	If "Yes," enter name and address of the third party:			
	Name			
	Address 🕨			
16	Gaming manager information:			
	Name			
	Gaming manager compensation > \$			
	Description of services provided 🕨			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	์ []	Yes	No No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year > \$			
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa	rt III, line	es 9, 9	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
03208	33 11-25-20 Schedule G (Forr	n 990 o	r 990	-EZ) 2020
				, _0_0

	Form 990 or 990-EZ)			FOUNDATION
Part IV	Supplemental Infor	mation _{(continue}	ed)	

Schedule G (Form 990 or 990-EZ)

SCHEDULE I	(Grants and Oth	ner Assistan	ce to Organ	izations.		OMB No. 1545-0047
(Form 990)	Go	overnments, ar	nd Individual	s in the Ŭni	ted States		2020
Department of the Treasury	Comp	nete il the organizatio	Attach to For		111 0 , inte 21 01 22.		Open to Public
Internal Revenue Service		Go to www.ii	rs.gov/Form990 fo		nation.		Inspection
Name of the organization PIEDMONT	EDUCATION	I FOUNDATION					Employer identification number **-**6176
Part I General Information on Grants a	nd Assistance						
1 Does the organization maintain records	to substantiate th	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the selecti	on
criteria used to award the grants or assis	stance?	-			-		X Yes No
2 Describe in Part IV the organization's pro	ocedures for moni	toring the use of grant	funds in the United	States.			
Part II Grants and Other Assistance to	Domestic Organi	izations and Domestic	c Governments. C	Complete if the org	anization answered "Y	′es" on Form 990, Part	IV, line 21, for any
recipient that received more than	\$5,000. Part II car	be duplicated if additi	ional space is need	ed.		1	1
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
PIEDMONT UNIFIED SCHOOL DISTRICT 800 MAGNOLIA AVE PIEDMONT, CA 94611	**-***2444	501(C)3	3,400,792.	0.			TO SUPPORT PUBLIC SCHOOLS
PIEDMONT UNIFIED SCHOOL DISTRICT - ART AND WELLNESS - 800 MAGNOLIA AVE - PIEDMONT, CA 94611	**-***2144	501(C)3	35,414.	0.			TO SUPPORT PUBLIC SCHOOLS
2 Enter total number of section 501(c)(3) a	nd government or	 rganizations listed in th	e line 1 table		1	I	▶
3 Enter total number of other organization	-						

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

Schedule I (Form 990) 2020

PIEDMONT EDUCATION FOUNDATION

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Page 2

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.

(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
			· · · ·		1

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART 1, LINE 2

EACH GRANT AWARD IS VERIFIED BY A LETTER CONTAINING INSTRUCTIONS FOR

PAYMENT AND REPORTING. GRANTEES ARE ASKED TO SUBMIT A REPORT AT THE

END OF THE SCHOOL YEAR, RECONCILING THE AMOUNTS RECEIVED AND THE

AMOUNTS SPENT, ACCORDING TO THEIR SPECIFIC INTENT. THE BOARD MEMBERS

SERVING AS GRANTS CHAIRPERSONS, AS WELL AS AN INDEPENDENT COMMITTEE

FROM THE COMMUNITY, MONITOR THE RESULTS, PROCESS, AND REPORTING OF THE

GRANTEES. REPORTS ARE SHARED WITH THE PIEDMONT UNIFIED SCHOOL DISTRICT

AND THE PIEDMONT EDUCATIONAL FOUNDATION'S TREASURER.

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information.



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PIEDMONT EDUCATION FOUNDATION

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

ENGAGEMENT.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

ADDITIONAL FUNCTIONAL EXPENSES AS LISTED BELOW - THESE AMOUNTS

REPRESENT THE PORTION ALLOCABLE TO PROGRAM SERVICES:

PRINTING AND PUBLICATION \$11,202

SOFTWARE AND LICENSING \$4,396

CREDIT CARD FEES \$4,212

BANK FEES \$10

WEBSITE \$2,874

SALARIES \$130,207

PAYROLL TAXES \$10,495

INCLUDING GRANTS OF \$ 0. EXPENSES \$ 163,396. REVENUE \$ 38,380.

FORM 990, PART VI, SECTION A, LINE 7A:

THE BOARD OF DIRECTORS SOLICITS NOMINATIONS AND SELECTS VOLUNTEERS FROM THE

PIEDMONT COMMUNITY TO FILL VACANCIES ON THE BOARD. THE BOARD OVERSEES ALL

ACTIVITY OF THE PIEDMONT EDUCATIONAL FOUNDATION.

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

THE FORM 990 IS REVIEWED IN DRAFT FORM BY A COMMITTEE INCLUDING THE

PRESIDENT AND TREASURER. ANY CHANGES TO THE DRAFT FORM 990 ARE

INCORPORATED INTO THE FINAL DRAFT.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032211 11-20-20

Schedule O (Form 990 or 990-EZ) 2020

20516 758554 4948	33 2020.05094 PIEDMONT EDUCATION FOUNDA 4948
032212 11-20-20	Schedule O (Form 990 or 990-EZ) 2020
AVAILABLE FOR REVIEW AT THE PIEDM	MONT EDUCATIONAL FOUNDATION OFFICE.
GOVERNING DOCUMENTS, POLICIES, FI	INANCIAL STATEMENTS, AND FORM 990S ARE
FORM 990, PART VI, SECTION C, LIN	NE 19:
INTEREST.	
	IAL CONFLICT IS AN ACTUAL CONFLICT OF
DIRECTOR AND KEY EMPLOYEE OF POTE	ENTIAL CONFLICTS OF INTEREST. THE BOARD
THE COMPLIANCE OFFICER SOLICITS A	AND REVIEWS, ANNUALLY, A DISCLOSURE OF EACH

Schedule O (Form 990 or 990-EZ) 2020

PIEDMONT EDUCATION FOUNDATION

Name of the organization

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Employer identification number **-**6176