



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-EZ**

**Short Form
Return of Organization Exempt From Income Tax**

OMB No 1545-1150

2008

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.
► The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2008 calendar year, or tax year beginning 7/01/08, and ending 6/30/09

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization THE COMPTON FUND	D Employer identification number 20-0493994
		Number and street (or P O box, if mail is not delivered to street address) Room/suite 100 NORTHWESTERN AVENUE	E Telephone number 215-247-5777
		City or town, state or country, and ZIP + 4 PHILADELPHIA PA 19118	F Group Exemption Number _____

● Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method Cash Accrual
Other (specify) _____

I Website: ► **N/A**

J Organization type (check only one) 501(c) (**3**) ◀ (insert no) 4947(a)(1) or 527

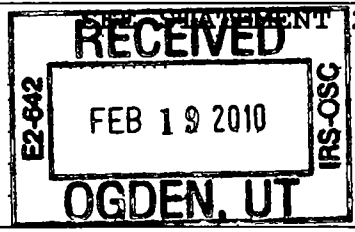
H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ ► **\$ 559,548**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

		1	2	3	4	5a	5b	5c	6a	6b	6c	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
Revenue	1	Contributions, gifts, grants, and similar amounts received						20,000																					
	2	Program service revenue including government fees and contracts																											
	3	Membership dues and assessments																											
	4	Investment income							67,071																				
	5a	Gross amount from sale of assets other than inventory					472,477																						
	b	Less cost or other basis and sales expenses					783,466																						
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach sch)							-310,989																				
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>																											
	a	Gross revenue (not including \$ _____ of contributions reported on line 1)																											
	b	Less direct expenses other than fundraising expenses																											
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)																												
7a	Gross sales of inventory, less returns and allowances																												
b	Less cost of goods sold																												
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)																												
8	Other revenue (describe _____)																												
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8																												
Expenses	10	Grants and similar amounts paid (attach schedule)																											
	11	Benefits paid to or for members																											
	12	Salaries, other compensation, and employee benefits																											
	13	Professional fees and other payments to independent contractors																											
	14	Occupancy, rent, utilities, and maintenance																											
	15	Printing, publications, postage, and shipping																											
	16	Other expenses (describe ► SEE STATEMENT 3)							22,596																				
17	Total expenses. Add lines 10 through 16							147,022																					
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)						-370,940																					
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)						2,488,512																					
	20	Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 4						-211,591																					
	21	Net assets or fund balances at end of year. Combine lines 18 through 20						1,905,981																					



Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II)

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	2,488,512	1,905,981
23	Land and buildings		
24	Other assets (describe _____)		
25	Total assets	2,488,512	1,905,981
26	Total liabilities (describe _____)	0	0
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	2,488,512	1,905,981

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

Form **990-EZ** (2008)

Handwritten initials/signature

SCANNED MAR 12 2010

Part V Other Information (Note the statement requirements in the instructions for Part VI.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T		
a	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instr ▶ 37a _____		
b	Did the organization file Form 1120-POL for this year?		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved ▶ 38b _____		
39	Section 501(c)(7) organizations Enter		
a	Initiation fees and capital contributions included on line 9 ▶ 39a _____		
b	Gross receipts, included on line 9, for public use of club facilities ▶ 39b _____		
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ _____, section 4912 ▶ _____, section 4955 ▶ _____		
b	Section 501(c)(3) and (4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I		X
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____		
d	Enter amount of tax on line 40c reimbursed by the organization ▶ _____		
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		X
41	List the states with which a copy of this return is filed ▶ NONE		
42a	The books are in care of ▶ KEVIN D. SCHRECENGOST Telephone no ▶ 215-247-5777 NA Located at ▶ PHILADELPHIA, PA ZIP + 4 ▶ 19118		
b	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)? If "Yes," enter the name of the foreign country ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		X
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country ▶ _____		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43 _____		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		X

Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

	Yes	No
46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		X
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
49a Did the organization make any transfers to an exempt non-charitable related organization?		X
49b If "Yes," was the related organization(s) a section 527 organization?		

50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

Total number of other employees paid over \$100,000 **0**

51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

Total number of other independent contractors each receiving over \$100,000 **0**

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

Signature of officer: Kevin D. Schrecengost Date: 2/18/10

Type or print name and title: Kevin D. Schrecengost, Trustee

Paid Preparer's Use Only

Preparer's signature: Joseph T. Fabis CPA Date: 2/19/10 Check if self-employed:

Firm's name (or yours if self-employed): RAINER & COMPANY Preparer's Identifying Number (See instr.): P00136215

address, and ZIP + 4: 2 CAMPUS BLVD STE 220 NEWTOWN SQUARE, PA 19073-3270 EIN: 23-2183936 Phone no: 610-353-4610

May the IRS discuss this return with the preparer shown above? See instructions Yes No

SGHÉDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2008

Open to Public
Inspection

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization

THE COMPTON FUND

Employer identification number
20-0493994

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

The organization is not a private foundation because it is (Please check only one organization)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H)
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state.
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)

10 An organization organized and operated exclusively to test for public safety See section 509(a)(4). (see instructions)

11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h

- a Type I
- b Type II
- c Type III—Functionally Integrated
- d Type III—Other

e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		<input checked="" type="checkbox"/>
11g(ii)		<input checked="" type="checkbox"/>
11g(iii)		<input checked="" type="checkbox"/>

h Provide the following information about the organizations the organization supports

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the US?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
MORRIS ARBORETUM OF THE UNIVERSITY OF PENN. (501(C)(5))	23-1352685		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		124,426
Total									124,426

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1-3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						

12 Gross receipts from related activities, etc (see instructions) 12

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 14 %

15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 15 %

16a 33 1/3 % support test—2008. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶

b 33 1/3 % support test—2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶

17a 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶

b 10%-facts-and-circumstances test—2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1-5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
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 IV)						
13 Total support. (Add lines 9, 10c, 11, and 12)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a 33 1/3 % support tests—2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3 % support tests—2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

Federal Statements

Statement 1 - Form 990-EZ, Part I, Line 5c - Sale of Assets Other than Inventory - Securities

Description	How Received	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Depreciation	Gain / Loss
PUBLICLY TRADED SECURITIES								
DONATION			VARIOUS	VARIOUS	472,477	783,466		-310,989
- SEE ATTACHED								
DONATION					472,477	783,466	0	-310,989
TOTAL								

Statement 2 - Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid

Name and Address	Description of Property	Cash Contribution	Noncash Contribution	Relationship to Organization	Class of Activity	Book Value	Book Value Explanation	FMV Explanation	Purpose
MORRIS ARBORETUM		124,426							
100 NORTHWESTERN				SUPPORTED ORG.					
PHILADELPHIA, PA 19118									
TOTAL		124,426							

Statement 3 - Form 990-EZ, Part I, Line 16 - Other Expenses

<u>Description</u>	<u>Amount</u>
EXPENSES	\$
CUSTODY FEES	1,519
INVESTMENT ADVISORY FEES	<u>21,077</u>
TOTAL	<u>\$ 22,596</u>

Statement 4 - Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances

<u>Description</u>	<u>Amount</u>
UNREALIZED LOSS ON INVESTMENTS SHOWN AT FAIR MARKET VALUE	\$ -211,591
TOTAL	<u>\$ -211,591</u>

Statement 5 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose

Description

ENDOWMENT FUND TO SUPPORT THE GENERAL OPERATIONS OF THE MORRIS ARBORETUM.

THE COMPTON FUND
MARKETABLE SECURITIES SALES DETAIL
YEAR ENDED JUNE 30, 2009

# SHARES	STOCK DESCRIPTION	DATE OF PURCHASE	DATE OF SALE	SALES PROCEEDS	COST BASIS	GAIN (LOSS)	ST	LT
SEPTEMBER								
400	AMERICAN INTL GROUP INC COM	3/8/2004	9/11/2008	6 312 04	29 488 00	(23 155 96)		(23 155 96)
200	AMERICAN INTL GROUP INC COM	5/20/2004	9/11/2008	3 158 02	14 033 00	(10 876 98)		(10 876 98)
200	AMERICAN INTL GROUP INC COM	6/14/2004	9/11/2008	3 158 02	14 543 00	(11 386 98)		(11 386 98)
200	AMERICAN INTL GROUP INC COM	12/21/2005	9/11/2008	3 158 02	13 331 00	(10 174 98)		(10 174 98)
200	AMERICAN INTL GROUP INC COM	12/26/2007	9/11/2008	3 158 02	11 898 00	(8 741 98)	(8 741 98)	
600	AMERICAN INTL GROUP INC COM	12/26/2007	9/11/2008	9 468 07	35 700 00	(26 231 93)	(26 231 93)	
200	AMERICAN INTL GROUP INC COM	3/19/2008	9/11/2008	3 158 02	8 048 70	(5 792 68)	(5 792 68)	
				31 560 22	127 921 70	(96 361 48)	(40 786 59)	(55 594 89)
OCTOBER								
400	AMERICAN EXPRESS CO COM	8/2/2005	10/14/2008	11 265 37	19 398 57	(8 133 20)		(8 133 20)
200	AMERICAN EXPRESS CO COM	12/21/2005	10/14/2008	5 632 69	10 515 00	(4 882 31)		(4 882 31)
500	AMERICAN EXPRESS CO COM	12/28/2007	10/14/2008	14 081 72	26 498 85	(12 417 13)	(12 417 13)	
				30 979 78	56 412 42			
200	GENERAL ELECTRIC CO COM	2/17/2004	10/14/2008	3 895 68	6 612 00	(2 616 34)		(2 616 34)
800	GENERAL ELECTRIC CO COM	12/26/2007	10/14/2008	15 982 63	30 080 00	(14 097 37)	(14 097 37)	
300	GENERAL ELECTRIC CO COM	12/28/2007	10/14/2008	5 993 49	11 277 00	(5 283 51)	(5 283 51)	
				25 971 77	47 969 00	(47 429 87)	(31 798 02)	(15 631 85)
NOVEMBER								
600	JOHNSON CONTROLS	3/8/2004	10/30/2008	10 367 46	11 882 00	(1 514 54)		(1 514 54)
400	JOHNSON CONTROLS	12/28/2007	10/30/2008	6 811 64	14 361 60	(7 449 96)	(7 449 96)	
				17 279 10	26 243 60			
300	PRUDENTIAL FINANCIAL INC	7/19/2007	11/6/2008	10 141 54	28 954 86	(18 813 32)		(18 813 32)
200	PRUDENTIAL FINANCIAL INC	12/26/2007	11/6/2008	6 781 02	18 841 00	(12 079 98)	(12 079 98)	
				16 922 56	47 795 86	(39 893 30)	(19 529 94)	(20 327 85)
JANUARY								
100	COLGATE PALMOLIVE CO COM	3/8/2004	1/16/2009	5 248 46	5 668 00	580 46		580 46
				6 248 46	5 668 00			
50	ABBOTT LABS COM	10/28/2004	1/16/2009	2 480 03	2 127 00	363 03		363 03
200	ABBOTT LABS COM	12/26/2007	1/16/2009	9 860 10	11 808 44	(1 948 34)		(1 948 34)
				12 450 13	13 735 44			
70	JOHNSON & JOHNSON COM	2/17/2004	1/16/2009	3 896 73	3 808 70	188 03		188 03
80	JOHNSON & JOHNSON COM	11/21/2005	1/16/2009	4 567 69	4 970 00	(402 31)		(402 31)
400	JOHNSON & JOHNSON COM	12/28/2007	1/16/2009	22 838 43	27 071 60	(4 233 17)		(4 233 17)
				31 402 84	35 850 30			
200	PROCTER & GAMBLE CO COM	12/26/2007	1/16/2009	11 508 78	14 815 56	(3 306 78)		(3 306 78)
				11 508 78	14 815 56			
						(8 459 09)		(8 459 09)
MARCH								
1300	GENERAL ELECTRIC CO COM	2/17/2004	3/3/2009	9 164 82	42 978 00	(33 813 18)		(33 813 18)
200	GENERAL ELECTRIC CO COM	6/14/2004	3/3/2009	4 809 87	6 297 00	(4 887 03)		(4 887 03)
				10 574 78	49 275 00			
25000	FEDERAL HOME LOAN BANK		3/25/2009	25 000 00	25 000 00			
				25 000 00	25 000 00	(38 700 21)		(38 700 21)
APRIL								
200	AUTOMATIC DATA PROCESSING IN COM	12/26/2007	4/23/2009	6 944 26	9 091 08	(2 146 82)		(2 146 82)
				6 944 26	9 091 08			
100	PEPSICO INC COM	5/4/2007	4/23/2009	4 746 37	6 743 40	(1 997 03)		(1 997 03)
100	PEPSICO INC COM	12/26/2007	4/23/2009	4 746 37	7 756 94	(3 010 57)		(3 010 57)
				9 492 74	14 500 34	(7 154 42)		(7 154 42)
MAY								
400	MEDTRONIC INC COM	3/8/2004	5/8/2009	13 886 69	20 088 00	(6 401 31)		(6 401 31)
700	MEDTRONIC INC COM	12/26/2007	5/8/2009	23 851 70	35 078 12	(11 126 42)		(11 126 42)
				37 638 39	55 166 12			
200	NOVARTIS A G SPONSORED ADR	3/1/2006	5/8/2009	7 623 06	10 716 98	(3 093 92)		(3 093 92)
900	NOVARTIS A G SPONSORED ADR	12/26/2007	5/8/2009	34 303 79	48 769 65	(14 465 86)		(14 465 86)
				41 926 85	59 486 63			
300	WAL MART STORES INC COM	10/28/2004	5/8/2009	14 857 68	16 194 00	(1 236 32)		(1 236 32)
100	WAL MART STORES INC COM	12/21/2005	5/8/2009	4 985 89	4 893 80	92 09		92 09
				19 843 57	21 087 80	(36 231 74)		(36 231 74)
JUNE								
300	AFLAC INC COM	12/20/2006	6/2/2009	11 060 71	13 756 26	(2 665 55)		(2 665 55)
				11 060 71	13 756 26			
100	AUTOMATIC DATA PROCESSING IN COM	3/8/2004	6/2/2009	3 848 90	3 867 84	(18 94)		(18 94)
300	AUTOMATIC DATA PROCESSING IN COM	12/26/2007	6/2/2009	11 546 70	13 636 62	(2 089 92)		(2 089 92)
				15 395 60	17 504 46			
600	LOWES COS INC COM	11/22/2005	6/2/2009	12 329 68	19 836 00	(7 506 32)		(7 506 32)
				12 329 68	19 836 00			
200	PEPSICO INC COM	3/8/2004	6/2/2009	11 076 71	10 490 00	586 71		586 71
100	PEPSICO INC COM	5/4/2007	6/2/2009	5 538 36	6 743 40	(1 205 04)		(1 205 04)
				16 615 07	17 233 40			
250	TARGET CORP COM	12/26/2007	6/2/2009	10 339 73	12 749 42	(2 409 69)		(2 409 69)
				10 339 73	12 749 42			
100	WELLS FARGO & CO NEW COM	12/26/2007	6/2/2009	2 450 94	3 102 79	(651 86)		(651 86)
300	WELLS FARGO & CO NEW COM	3/19/2008	6/2/2009	7 352 81	9 717 00	(2 364 20)		(2 364 20)
				9 803 74	12 819 79			
25000	AMERICAN GENERAL FINANCIAL	9/6/2007	6/5/2009	20 437 50	24 799 25	(4 361 75)		(4 361 75)
				20 437 50	24 799 25			
100	COLGATE PALMOLIVE CO COM	3/8/2004	6/19/2009	7 110 02	5 668 00	1 442 02		1 442 02
				7 110 02	5 668 00			
600	MICROSOFT CORP COM	12/26/2007	6/19/2009	14 469 53	21 874 26	(7 404 73)		(7 404 73)
				14 469 53	21 874 26			
350	UNITED TECHNOLOGIES CORP	12/26/2007	6/19/2009	19 059 60	27 204 70	(8 145 10)		(8 145 10)
				19 059 60	27 204 70	(36 794 36)		(36 794 36)
				944 950 84	1 566 928 78	(310 988 97)	(184 189 09)	(437 788 84)

Form **8868**
(Rev. April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**

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

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

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

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

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

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

Type or print	Name of Exempt Organization THE COMPTON FUND	Employer identification number 20-0493994
File by the due date for filing your return See instructions	Number, street, and room or suite no. If a P O box, see instructions 100 NORTHWESTERN AVENUE	
	City, town or post office, state, and ZIP code For a foreign address, see instructions PHILADELPHIA PA 19118	

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

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

● The books are in the care of ▶ **KEVIN D. SCHRECENGOST**

Telephone No ▶ **215-247-5777** FAX No ▶

● If the organization does not have an office or place of business in the United States, check this box

● If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box If it is for part of the group, check this box and attach

a list with the names and EINs of all members the extension will cover

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **2/15/10**, to file the exempt organization return for the organization named above. The extension is for the organization's return for
 - ▶ calendar year _____ or
 - ▶ tax year beginning **7/01/08**, and ending **6/30/09**
- 2 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period

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

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

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

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