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### Form **990**

Department of the Treasury

Internal Revenue Service

**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2008

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

	\ Fo	or the	= 2008 calendar year, or tax year beginning $$ JUL $$ 1 $$ $$ $$ $$ $$ 2 $$ 0 $$ 8 $$ $$ and e	nding J	<u>UN 30, 2009</u>					
E	Ch	eck if	Please C Name of organization		D Employer identific	ation number				
		olicabl	use IRS DAYTON FOUNDATION CHARITABLE							
		Addre chang	ss   label or   ACCOUNTS, INC.							
ĺ		Name chang	type		31-1:	330325				
j		Initial return		Room/suite	E Telephone number					
		Termir	I Spanified		937-222-0410					
		ation Amene return			G Gross receipts \$ 1,219,891.					
		Applic								
'	_	tion pendir	F Name and address of principal officer MICHAEL M. PARKS		H(a) Is this a group return for affiliates?  Yes X No					
	SAME AS C ABOVE  H(b) Are all affiliates included? Yes No									
-	Ta	V-0V	empt status. X 501(c) ( 3		i	list (see instructions)				
			te: WWW.DAYTONFOUNDATION.ORG		H(c) Group exemption					
			organization: X Corporation Trust Association Other ►	I Voor		State of legal domicile: OH				
	Par		Summary	L Teal	UI IUI III IIII III III III III III III	State of legal doffficile. Off				
_			Briefly describe the organization's mission or most significant activities SEE S	וותששטי	T.F. O. FOR OR	TANT ZATTON				
	Governance		MISSION STATEMENT	CHEDU	DE O FOR ORG	JANI ZATION				
	a l		Check this box I if the organization discontinued its operations or dispose		than OEW of the second					
	Ver			ea or more	1 1					
	ဗ္ဗ		Number of voting members of the governing body (Part VI, line 1a)		3	14				
	∞		Number of independent voting members of the governing body (Part VI, line 1b)		4	14				
	Ë		Total number of employees (Part V, line 2a)		5	0				
	Activities &		Total number of volunteers (estimate if necessary)		6	0				
	8		Total gross unrelated business revenue from Part VIII, line 12, column (C)		<u>7a  </u>	0.				
-	+	b	Net unrelated business taxable income from Form 990-T, line 34		<u>  7</u> b	0.				
		_		Prior Year	Current Year					
2010	e l		Contributions and grants (Part VIII, line 1h)		71,579.	1,324,469.				
9	ē		Program service revenue (Part VIII, line 2g)							
20	è		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	_	137,859.	-104,578.				
		11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u> </u>	267,267.					
<del>3</del> 20-	_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		476,705.	1,219,891.				
		13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		350,864.	233,543.				
JUL		14	Benefits paid to or for members (Part IX, column (A), line 4)							
	es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)							
SCANNED	Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)							
Z	×	b	Total fundraising expenses (Part IX, column (D), line 25)							
Z	<b>"</b>	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		561,261.	79,547.				
$\circ$		18	Total expenses Add lines 13-17 (must equal Part IX, column A) line 255  Revenue less expenses Subtract line 18 from line 12		912,125.	313,090.				
		19			-435,420.	906,801.				
3	Fund Balances		Total assets (Part X, line 16)		Beginning of Year	End of Year				
ì	aar aar	20	Total assets (Part X, line 16)		3,740,805.	4,190,328.				
2	쏄:	21	Total liabilities (Part X, line 26)		10,755.	7,150.				
			Net assets or fund balances. Subtract line 21 from line 20 TOTAL LIT		3,730,050.	4,183,178.				
	Par	t II	Signature Block							
			Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and and complete. Declaration of preparer (other than officer) is based on all information of which preparer has an	statements, a	and to the best of my knowledg	e and belief, it is true, correct,				
			and complete becaution of preparer has an	y Kilowiedge	/	,				
5	ign		I I Miles IM Mule		1.5/10	/10				
H	lere		Signature of officer		Date	· · · · · · · · · · · · · · · · · · ·				
			MICHAEL M. PARKS, PRESIDENT							
_	_		Type or print name and title	-	-	·, ··				
_			Preparer's Date		r's identifying number					
	aid	earl.	signature Charles Chaft, CPA OS/03	//o self	ployed $\blacktriangleright$ $\Box$	tructions) 00/3094				
	repa		Firm's name (or FLAGEL, HUBER, FLAGEL & CO.		EIN ►					
u	se O	шу	self-employed), 3400 SOUTH DIXIE DRIVE							
_			DAYTON, OH 45439		Phone no. ► ( 9	937)299-3400				
<u>N</u>	/lay t	he II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No				

Form 990 (2008)

Pai	rt III Statement of	Program Service	Accomplis	shments (see insti	uctions)		
1	Briefly describe the orga		•	EDULE O FO		TION	
	DAYTON FOUND	ATION CHARIT	ABLE A	CCOUNTS, I	NC. IS A SI	ECTION 509(	A)(3)
	SUPPORTING O					INC., A SEC	
	501(C)(3) PU	BLICLY SUPPO	RTED C	OMMUNITY F	OUNDATION.		
2	Did the organization und	lertake any significant p	rogram servi	ces during the year v	vhich were not listed	on	·
	the prior Form 990 or 99		-				Yes X No
	If "Yes", describe these	new services on Schedi	ıle O				
3	Did the organization cea			hanges in how it con	ducts, any program	services?	Yes X No
•	If "Yes", describe these	=	_		, , , , , , , , , , , , , , , , , , , ,		
4	Describe the exempt pur	~		organization's three I	argest program servi	ces by expenses.	
•	Section 501(c)(3) and 50	•		=		- ·	
	allocations to others, the	- · · · · -				mount of granto and	
	anocations to others, the	e total expenses, and re-	rende, ii any	, for each program s	sivice reported		
4a	(Code <u>DURING THE Y</u> 248 GRANTS T	EAR, THE DAY	TON FO		HARITABLE A		NC. MADE
	240 GRANIS I	O 103 DIFFER	ENI CH	AKIIADDE U	KGMNIZALIOI	I OC MOA1 GR	י פחאט י
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		***					
4b	(Code.	) (Expenses \$		including grants of	of \$	) (Revenue \$	)
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4c	(Code	) (Expenses \$		including grants of	of \$	) (Revenue \$	)
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4d	Other program services	(Describe in Schedule (	))				
	(Expenses \$	including g	rants of \$		) (Revenue \$	)	
<u>4e</u>	Total program service	expenses > \$	233,	543. (Must equa	al Part IX, Line 25, co	lumn (B) )	
			· <del></del>	<del></del>			Form 990 (2008)

Form 990 (2008) ACCOUNTS, INC.
Part IV Checklist of Required Schedules Page 3 31-1330325

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	N/	Α
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice			
	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Х	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the US?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			
	located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? 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 questions 24b-24d and complete Schedule K.			
	If "No", go to question 25	24a		Х
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		
25a	Section 501(c)(3) and 501(c)(4) 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	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			
	prior year? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X
		Form	990 (	2008)

Form 990 (2008) ACCOUNTS, INC.

Part IV Checklist of Required Schedules (continued)

			Yes	NO
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	_36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes." complete Schedule R. Part VI	37		Х

Form **990** (2008)

Form 990 (2008) ACCOUNTS. INC 31-1330325 Statements Regarding Other IRS Filings and Tax Compliance Ye<u>s</u> No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of 0 US Information Returns Enter -0- if not applicable 1a 0 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable garning (gambling) winnings to prize winners? X 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 0 filed for the calendar year ending with or within the year covered by this return 2a b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? Х За b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 4a 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 **b** 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 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c 6a Did the organization solicit any contributions that were not tax deductible? Х 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? X 7c d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? X 7f g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? Х 7<u>g</u> h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)

supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?

9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966?

b Did the organization make a distribution to a donor, donor advisor, or related person?

10 Section 501(c)(7) organizations. Enter N/A

a Initiation fees and capital contributions included on Part VIII, line 12

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

Section 501(c)(12) organizations. Enter N/A

a Gross income from members or shareholders

b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

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X

Х

8

9a

9b

12a

10a

10b

11a

11b

Form 990 (2008) ACCOUNTS, INC. 31–1330325 Pa

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

bec	tion A. Governing Body and Management						
			Yes	No_			
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,						
	processes, or changes in Schedule O See instructions						
1a	Enter the number of voting members of the governing body  1a 14						
þ	Enter the number of voting members that are independent  1b  14						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other						
	officer, director, trustee, or key employee?	2		<u>X</u>			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision						
	of officers, directors or trustees, or key employees to a management company or other person?	3		<u>X</u>			
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X			
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		<u>X</u>			
6	Does the organization have members or stockholders?	6		<u>X</u>			
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the						
	governing body?	7a		<u>X</u>			
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		<u>X</u>			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year						
	by the following						
а	The governing body?	8a	X				
b	Each committee with authority to act on behalf of the governing body?	8b	X				
	Does the organization have local chapters, branches, or affiliates?	9a		<u>X</u>			
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,						
	and branches to ensure their operations are consistent with those of the organization?	9b					
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must						
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X				
11	1 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	_11		X			
sec	tion B. Policies						
	Described and the second secon		Yes	No			
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X				
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise						
	to conflicts?	12b	Х				
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe						
40	In Schedule O how this is done	12c	X				
13	Does the organization have a written whistleblower policy?	13	X				
14	Does the organization have a written document retention and destruction policy?	14	X				
15	Did the process for determining compensation of the following persons include a review and approval by independent						
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision			7.5			
a	The organization's CEO, Executive Director, or top management official?	15a		<u>X</u>			
D	Other officers or key employees of the organization?	15b		<u> </u>			
16-	Describe the process in Schedule O (see instructions)						
٠va	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			37			
<b>.</b>	taxable entity during the year?	_16a		<u>X</u>			
U	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation						
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's	401					
Sec	exempt status with respect to such arrangements? tion C. Disclosure	16b					
17	List the states with which a copy of this Form 990 is required to be filed ▶OH						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for					
-	public inspection. Indicate how you make these available. Check all that apply	101					
	Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, ai	nd fina	ncıəl				
-	statements available to the public.	.u 1111d	iicidi				
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organizar	מחו	•				
-	THE ORGANIZATION - 937-222-0410						
	500 KETTERING TOWER, DAYTON, OH 45423						
_							

31-1330325

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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

List persons in the following order individual trustees or directors; institutional trustees; officers, key employees, highest compensated employees; and former such persons.

Check this box if the organization did not of	(B)	f					uste	(D)	(E)	(F)
Name and Title	Average		<b>(C)</b> Position					Reportable	(E) Reportable	(F) Estimated
Name and The	hours	<b>Ι</b> (c				арр	ly)	compensation	compensation	amount of
	per	<u> </u>	<del></del>			777,		from	from related	other
	week	liect						the	organizations	compensation
		8	stee		Ì	nsate		organization	(W-2/1099-MISC)	from the
		Trust	al tru		oyee	ЭШЬ		(W-2/1099-MISC)		organization and related
		ndividual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	ᇐ			organizations
		E	E S	8	ē	문 등	Ē			
CHARLES A. JONES										
GOVERNING BOARD MEMBER	0.30	X	<u> </u>	_	<u> </u>	<u> </u>	ļ	0.	0.	0.
THOMAS G. BREITENBACH		ĺ							·	
GOVERNING BOARD MEMBER	0.30	X	<u> </u>	<u> </u>	ļ			0.	0.	0.
FRANZ J. HOGE		1			1					
GOVERNING BOARD MEMBER	0.30	X				<u> </u>		0.	0.	0.
ELLEN IRELAND		1						_	_	_
GOVERNING BOARD MEMBER	0.30	X						0.	0.	0.
HELEN JONES-KELLEY		۱ <sub></sub>							_	_
GOVERNING BOARD MEMBER	0.30	X	<u> </u>		┡	├	_	0.	0.	0.
JAMIE KING	0.00				1					
GOVERNING BOARD MEMBER	0.30	X	<u> </u>	_	├	-		0.	0.	0.
DR. GARY L. LEROY	0.20									
GOVERNING BOARD MEMBER	0.30	X	-		├	├		0.	0.	0.
JUDY D. MCCORMICK GOVERNING BOARD MEMBER	0.30	\								_
VICKI PEGG	0.30	^	-		┢┈	$\vdash$	$\vdash$	0.	0.	0.
GOVERNING BOARD MEMBER	0.30	<b>₩</b>						0.	0.	0.
DOUG C. SCHOLZ	0.50	┢	-	-	╁	$\vdash$	$\vdash$	<u> </u>	0.	<u> </u>
GOVERNING BOARD MEMBER	0.30	v					ļ	0.	0.	0.
RICHARD W. SCHWARTZ	0.50	^			┼	$\vdash$	$\vdash$	0.	<u> </u>	0.
GOVERNING BOARD MEMBER	0.30	v		•				0.	0.	0.
FRED C. SETZER, JR.	1 0.50		<del> </del>		$\vdash$	$\vdash$		0.		0_•
GOVERNING BOARD MEMBER	0.30	$ \mathbf{x} $		İ		ļ		0.	0.	0.
JEROME TATAR	0.55	<u> </u>			H	$\vdash$	$\vdash$	,		•
GOVERNING BOARD MEMBER	0.30	$ _{\mathbf{x}}$					ļ	0.	0.	0.
FRED E. WEBER										
GOVERNING BOARD MEMBER	0.30	X						0.	0.	0.
MICHAEL M. PARKS										
PRESIDENT/SECRETARY	0.80	L	L	x	L	L	L	0.	290,124.	10,663.
STEPHEN D. DARNELL										
V.P. FINANCE	0.80			X	L			0.	90,242.	3,284.
JOSEPH B. BALDASARE										
V.P. DEVELOPMENT	0.80			X		<u> </u>	L	0.	107,073.	5,530.

Form 990 (2008) ACCOUNTS										<u> 1330</u>	<u> 325</u>	Р	age 8
Part VII Section A. Officers, Directors, Tru	<u> </u>	mpl	oyee			High	nest		rees (continued	d)			
(A)	(B)				C)			(D)	(E)	-1-		(F)	
Name and title	Average hours	<sub>(c</sub>	hecl		ition that		olv)	Reportable compensation	Reportat compensa		_		
	per	_	1	T	T	<u> </u>	<u> </u>	from	from relat			other	
	week	direct				Į,		the	organizati			pensa	
		tee or	ustee			ensate		organization (W-2/1099-MISC)	(W-2/1099-N	MISC)		rom th anızat	
		lal trus	onal tr		ployee	를		(** 2, 1000 1100)			_	d relat	
		Individual trustee or director	Institutional trustee	Officer	Key emptoyee	Highest compensated employee	огте				org	anızatı	ons
DEBODAU I GUDUI TEG		-	ļ <u> </u>	-	-	T 0							
DEBORAH L. GURKLIES ADMINISTRATION DIRECTOR	0.80			x				0.	67	067.		3,2	nΩ
DIANE K. TIMMONS	0.80	$\vdash$	1	^	$\vdash$			0.	07,	007.	•	<u>, , , , , , , , , , , , , , , , , , , </u>	00.
V.P. GRANTS & PROGRAMS	0.80			x				0.	82.	947.		9	03.
S. TRACIE BOSHEARS													
ASSISTANT TREASURER	0.80		<u> </u>	X			_	0.	47,	<u>313.</u>		1,8	06.
		├-	-	ļ	-								
		1-		ļ	<del> </del>		<del> </del>						
		_	_	<u> </u>	<u> </u>	ļ							
					Ì								
		$\vdash$	1		1	-		<u> </u>					
					ļ								
				ļ							-		
		<u>L</u>	<u> </u>		<u> </u>								
1b Total						<u> </u>		0.	684,	766.	2	<u>5,3</u>	94.
2 Total number of individuals (including those compensation from the organization	e in 1a) who re	ceiv	ed r	nore	tha	ın \$1	100,	,000 in reportable					(
Compensation from the organization									<del></del>			Yes	No
3 Did the organization list any former officer,	director or tru	ıste	e, ke	y en	nplo	yee,	or	highest compensated ei	mployee on				
line 1a? If "Yes," complete Schedule J for s				•	•				, ,		3		X
4 For any individual listed on line 1a, is the su									the organization	on			
and related organizations greater than \$150											4	X	
5 Did any person listed on line 1a receive or a	-			from	any	/ uni	rela	ited organization for serv	rices rendered	to	_		v
the organization? If "Yes," complete Sched Section B. Independent Contractors	ule J for such	pers	son								5		X
Complete this table for your five highest co	mpensated in	dep	ende	ent c	onti	racto	ors	that received more than	\$100,000 of c	ompens	ation :	from	
the organization NONE	····							· · · · · ·					
(A)								(B)				<b>)</b>	
Name and business	address					_		Description of s	services	+-	ompe	nsatio	<u>n</u>
										+			
										ļ			
			_					<del></del>		1			
2 Total number of independent contractors (i	_	e ın	1) w	ho r	ecer	ved	mo	re than \$100,000 in com	npensation				
from the organization											_	000	

DAYTON FOUNDATION CHARITABLE

Form 990 (2008) 31-1330325 Page 9 ACCOUNTS, INC. Part VIII Statement of Revenue (D) Revenue excluded from (B) (A) (C) Total revenue Related or Unrelated tax under sections 512, 513, or 514 exempt function business revenue revenue 1 a Federated campaigns b Membership dues 1b c Fundraising events 10 d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 1324469. similar amounts not included above 8,495. g Noncash contributions included in lines 1a-1f \$ ,324,469 h Total. Add lines 1a-1f Business Code Program Service f All other program service revenue g Total, Add lines 2a-2f Investment income (including dividends, interest, and 103,602. 103,602. other similar amounts) Income from investment of tax-exempt bond proceeds 4 Royalties (ı) Real (II) Personal 6 a Gross Rents b Less. rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less cost or other basis and sales expenses 208180. c Gain or (loss) -208,180. d Net gain or (loss) -208,180. 8 a Gross income from fundraising events (not Other Revenue including \$ \_\_\_\_ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less, direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a þ d All other revenue e Total. Add lines 11a-11d  $\triangleright 1,219,891$ Total Revenue Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e 0. 0.-104,578.

Form 990 (2008)

832009 02-02-09 Form 990 (2008)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complete include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	ete column (A) but are (A) Total expenses	(B) Program service expenses	(C)  Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and	·		4	
•	organizations in the U.S. See Part IV, line 21	233,543.	233,543.		
2	Grants and other assistance to individuals in				
_	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				,_
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees).				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	19,585.		19,585.	
g	Other			-11-	
12	Advertising and promotion			1. 14	
13	Office expenses	.,.			
14	Information technology		<u>.</u>		
15	Royalties				···
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		<del>.</del>		
19	Conferences, conventions, and meetings			·	
20	Interest		·		
21	Payments to affiliates	19,092.		19,092.	
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	MISCSEE SCHEDULE O	40,852.		40,852.	·
b	MISCSEE SCHEDULE O	18.		18.	
С		· <del>-</del>			
d					
е		,			
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	313,090.	233,543.	79,547.	0.
26	Joint Costs. Check here   if following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation			1	

Form 990 (2008)
Part X | Balance Sheet

			(A) Beginning of year		(E End o	3) f year	
	1	Cash - non-interest-bearing	241,853.	1			04.
	2	Savings and temporary cash investments	9,303.	2		<u>, , , , , , , , , , , , , , , , , , , </u>	0 = •
	3	Pledges and grants receivable, net	5,505.	3	1,30	14 1	14
	4	Accounts receivable, net		4	<u> </u>		77.
	5	Receivables from current and former officers, directors, trustees, key		7-		21, 2	.,,,
	_	employees, or other related parties. Complete Part II of Schedule L		5			
	6	Receivables from other disqualified persons (as defined under section		3			
	_	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete					
		Part II of Schedule L		6			
w	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use		8			
As	9	Prepaid expenses and deferred charges		9			
	_	Land, buildings, and equipment cost basis   10a		9			
		Less accumulated depreciation Complete	$\dashv$				
	_	Part VI of Schedule D 10b		10c			
	11	Investments - publicly traded securities	3,489,649.	11	2,69	1 6	33
	12	Investments - other securities. See Part IV, line 11	3/103/013.	12	2,0.	<u>,                                    </u>	<u> </u>
	13	Investments - program-related. See Part IV, line 11	7	13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15		-	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,740,805.	16	4,19	30.3	28.
	17	Accounts payable and accrued expenses	10,755.	17		, 0 , 5	20.
	18	Grants payable	= 0 / . 0 0 1	18		7.1	50.
	19	Deferred revenue		19	•	.,_	
	20	Tax-exempt bond liabilities		20	•		
ģ	21	Escrow account liability. Complete Part IV of Schedule D		21			
litie	22	Payables to current and former officers, directors, trustees, key employees,					
Liabilities		highest compensated employees, and disqualified persons. Complete Part II					
		of Schedule L		22			
	23	Secured mortgages and notes payable to unrelated third parties		23			
	24	Unsecured notes and loans payable		24			
	25	Other liabilities Complete Part X of Schedule D		25			
	26	Total liabilities. Add lines 17 through 25	10,755.	26		7,1	50.
		Organizations that follow SFAS 117, check here   X and complete					
Ses		lines 27 through 29, and lines 33 and 34.					
lanı	27	Unrestricted net assets	3,730,050.	27	4,18	<u>33,1</u>	<u>78.</u>
Ba	28	Temporarily restricted net assets		28			
Fund Balances	29	Permanently restricted net assets		29			_
7		Organizations that do not follow SFAS 117, check here and					
S O		complete lines 30 through 34.					
set	30	Capital stock or trust principal, or current funds	<del></del>	30	<del></del>		
Net Assets or	31	Paid-in or capital surplus, or land, building, or equipment fund		31			
Nei	32 33	Retained earnings, endowment, accumulated income, or other funds	2 720 050	32	4 1 6		70
	34	Total habition and not page to fund belonger	3,730,050.	33	4,18		
Par		Total liabilities and net assets/fund balances Financial Statements and Reporting	3,740,805.	34	4,19	, , , ,	<u> </u>
	- / 1	Tindicial Statements and Reporting	<del>-</del>	<del>.</del>		Yes	No
1	Acco	unting method used to prepare the Form 990 Cash X Accrual	Other		Γ		<del> </del>
2a		the organization's financial statements compiled or reviewed by an independent			2a	1	x
b		the organization's financial statements audited by an independent accountant?		2b	X		
С		s" to lines 2a or 2b, does the organization have a committee that assumes resp		audıt.		<u>                                   </u>	
	reviev		X				
За	As a						
		nd OMB Circular A-133?			3a		X
<u>b</u>	If "Ye	s," did the organization undergo the required audit or audits?	<del>-</del>		3b	<u> </u>	<u> </u>

### SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Public Charity Status and Public Support**

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.

2008

Inspection

OMB No 1545-0047

Name of the organization **Employer identification number** DAYTON FOUNDATION CHARITABLE 31-1330325 ACCOUNTS, INC. 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) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii), (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H) 3 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. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi), (Complete Part II.) 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 the Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4), (see instructions) 11 X 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 b X Type II c Type III - Functionally integrated d Type III - Other Type I e X 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) 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 Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? q A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Νo the governing body of the supported organization? 11g(i) X (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the organizations the organization supports (iii) Type of (vi) Is the organization in col. (iv) Is the organization (v) Did you notify the (i) Name of supported (ii) EIN (vii) Amount of organization in col. (i) listed in your organization in col. organization support (described on lines 1-9 (i) organized in the U.S.? governing document? (i) of your support? above or IRC section Yes No Yes No Yes No (see instructions)) THE DAYTON FOUNDATION 31-6027287 8 X X X 313,090.

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

Schedule A (Form 990 or 990-EZ) 2008

	edule A (Form 990 or 990-EZ) 2008	O	D 11 11:	0-4470	M-VAVAVC	1.470/	NAVANC:	Pag	<u>e 2</u>
Pa	Support Schedule for	_			אָסאָ(ז)(A)(IV) ar	10 1/U(t	))(1)(A)(VI	)	
-	(Complete only if you checke	the box on line s	o, 7, or 8 of Part 1						
	ction A. Public Support		T	T	T	<del>                                     </del>			
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	<u>(e)</u>	2008	(f) Total	
1	Gifts, grants, contributions, and								
	membership fees received (Do not								
_	include any "unusual grants.")			<u>-</u>	<del> </del>	+ -			
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
_	or expended on its behalf						$\longrightarrow$		
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)	<u></u> .							
6	Public Support. Subtract line 5 from line 4								
Se	ction B. Total Support								
Cal	endar 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,						1		
	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 instructi	ons)			12			
	First five years. If the Form 990 is for			rd, fourth, or fifth t	ax year as a secti		(3)		
	organization, check this box and stop				•		. •	▶[	
Se	ction C. Computation of Publ	ic Support Pe	rcentage						
14	Public support percentage for 2008 (I	ine 6, column (f) d	ıvıded 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 o	rganization did no	t check the box o	n line 13, and line	14 is 33 1/3% or	more, che	ck this box	and	
	stop here. The organization qualifies							▶[	
t	33 1/3% support test - 2007. If the o	rganization did no	t check a box on	line 13 or 16a, and	d line 15 is 33 1/39	% or more	, check this	s box	
	and stop here. The organization qual							▶[	
17a	10% -facts-and-circumstances tes				e 13, 16a, or 16b.	and line 1	14 is 10% c	or more.	_
	and if the organization meets the "fac								
	meets the "facts-and-circumstances"						- 3- 7-		
t	10% -facts-and-circumstances tes					17a, and	line 15 is 1		
	more, and if the organization meets th								
	organization meets the "facts-and-circ							►[	

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

Sch	edule A (Form 990 or 990-EZ) 2008 Irt III   Support Schedule for C	)rganizations	Described in	Section 509(a)	(2) (Complete only	uf you chacked the h	Page 3
	ction A. Public Support	or garnzations	<u>Booonibou iii</u>	0001.01. 000(2	/ / Complete only	y ii you checked the b	OX OIT III O O OIT GIT II.
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Gifts, grants, contributions, and	(a) 2004	(b) 2003	(6) 2000	(4) 2007	(6)2000	()
•	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 bus-						
	iness under section 513						1
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 · 5						
7 <i>a</i>	Amounts included on lines 1, 2, and						
	3 received from disqualified persons			-			
t	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						
•	Add lines 7a and 7b						<u></u>
_8_	Public support (Subtract line 7c from line 6)						
Se	ction B. Total Support			1		<del></del>	
Cal	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
_	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
ŧ	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b						
	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 fo	r the organization'	's first, second, thi	rd, fourth, or fifth t	ax year as a sect	ion 501(c)(3) organi	zation,
	check this box and stop here						
<u>Se</u>	ction C. Computation of Pub	ic Support Pe	rcentage			<del></del>	
15	Public support percentage for 2008 (	line 8, column (f) c	divided by line 13,	column (f))		15	<u>%</u>
16	Public support percentage from 2007			<u> </u>		16	%
Se	ction D. Computation of Inve					1 1	
17	, , ,	•	•			17	<u>%</u>
18	Investment income percentage from					18	<u>%</u>
19:	a 33 1/3% support tests - 2008. If the						17 is not
_	more than 33 1/3%, check this box a						<b>▶</b> ∟
ı	33 1/3% support tests - 2007. If the	=					
20	line 18 is not more than 33 1/3%, che		-			=	
<u>20</u>	Private foundation. If the organization	лі аю пот спеск а	DOX OR IINE 14, 19	a, or 190, check t	•		00 or 000 EZ) 2009

### **Schedule D**

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

DAYTON FOUNDATION CHARITABLE

ACCOUNTS, INC.

Employer identification number 31-1330325

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		38
2	Aggregate contributions to (during year)		1,324,469.
3	Aggregate grants from (during year)		233,543.
4	Aggregate value at end of year		2,836,017.
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	
	are the organization's property, subject to the organization's	exclusive legal control?	X Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds may be	
	for charitable purposes and not for the benefit of the donor of		
Pai	rt II   Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, F	Part IV, line 7
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or p	oleasure) Preservation of an his	storically important land area
	Protection of natural habitat	Preservation of certifi	ed historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified cons	servation contribution in the form of a con-	servation easement on the last day
	of the tax year		
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	e organization during the taxable
	year >		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, violations, a	
_	enforcement of the conservation easements it holds?		☐ Yes ☐ No
6	Staff or volunteer hours devoted to monitoring, inspecting, a		<u> </u>
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	
_	and section 170(h)(4)(B)(ii)?		└ Yes └ No
9	In Part XIV, describe how the organization reports conservat		
	include, if applicable, the text of the footnote to the organiza conservation easements	ition's financial statements that describes	the organization's accounting for
Pai	rt III Organizations Maintaining Collections o	f Art Historical Treasures or O	ther Similar Assets
<u> </u>	Complete if the organization answered "Yes" to Form		ther omiliar Assets.
		000,1 41117, 1110 0	
1a	If the organization elected, as permitted under SFAS 116, no	of to report in its revenue statement and b	alance shoot works of art, historical
	treasures, or other similar assets held for public exhibition, e		
	the footnote to its financial statements that describes these		bile dervice, provide, in rate xiv, the text of
ь	If the organization elected, as permitted under SFAS 116, to		ice sheet works of art, historical treasures
_	or other similar assets held for public exhibition, education, or		
	these items:	or recording the factor of public service	, provide the following amounts relating to
	(i) Revenues included in Form 990, Part VIII, line 1		<b>▶</b> \$
	(ii) Assets included in Form 990, Part X		<b>S S S S S S S S S S</b>
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financia	Il gain, provide
	the following amounts required to be reported under SFAS 1		Samily Provided
а	Revenues included in Form 990, Part VIII, line 1	<b>5</b>	<b>▶</b> \$
b	Assets included in Form 990, Part X		► \$ ► \$
			* *

### DAYTON FOUNDATION CHARITABLE

	dule D (Form 990) 2008 ACCOUNTS									Page 2
Par	t III Organizations Maintaining Co	ollections of A	rt, His	torical Tr	easures,	or Othe	<u>er Simil</u>	<u>ar Asse</u>	<b>ts</b> (conti	nued)
3	Using the organization's accession and other	records, check any	of the 1	following tha	it are a signif	icant use	e of its col	lection ite	ms (chec	k ali
	that apply).									
а	Public exhibition	d		Loan or exc	hange progr	ams				
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's col	llections and explain	n how ti	ney further tl	he organizati	on's exe	mpt purp	ose in Par	t XIV	
5	During the year, did the organization solicit or									
	to be sold to raise funds rather than to be ma	intained as part of t	he orga	nızatıon's co	ollection?				Yes	□ No
Par	t IV Trust, Escrow and Custodial	Arrangements	Comp	lete if organi	zation answ	ered "Ye	s" to Forn	n 990, Par	t IV, line 9	
	reported an amount on Form 990, Part			•						
1a	Is the organization an agent, trustee, custodia	an or other intermed	lary for	contribution	ns or other as	sets not	ıncluded			
	on Form 990, Part X?		•						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV a	and complete the fo	llowing	table:						
	•	•	3						Amount	
С	Beginning balance						1c			
	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	rm 990. Part X. line	212						Yes	□ No
	If "Yes," explain the arrangement in Part XIV	555, 1 4.174,5							_ 103	
Par		organization answe	red "Ye	s" to Form 9	990. Part IV.	line 10.				
		(a) Current year		Prior year	(c) Two yea		(d) Three v	ears hack	(e) Four	years back
1a	Beginning of year balance	3,730,050.	(5)	nor year	(C) THO YOU	13 back	(u) mico	rear o back	16/1001	yours back
b		,324,469.								
	Investment earnings or losses	-577,836.								
d	Grants or scholarships	233,543.								
	Other expenditures for facilities	233,343.								
-	and programs					i				
	Administrative expenses	59,962.				-				
	·	1,183,178.								
g	_									
2	Provide the estimated percentage of the year	eno balance nelo a								
a	Board designated or quasi-endowment	0/	_%							
b	Permanent endowment ► 100.00	%								
C	Term endowment	-								
За	Are there endowment funds not in the posses	ssion of the organiza	ation th	at are neid a	ind administe	ered for t	ne organi	zation	Г	
	by:									Yes No
	(i) unrelated organizations								3a(i)	<u> X</u>
	(ii) related organizations			==					3a(ii)	X
_	If "Yes" to 3a(ii), are the related organizations								3b	
4 Par	Describe in Part XIV the intended uses of the				5					
rai						10				
	Description of investment	(a) Cost or o		, , ,	or other (other)	(c) D	epreciatio	on	(d) Book	value
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment .									
е	Other									
<u>Total</u>	. Add lines 1a-1e (Column (d) should equal For	rm 990, Part X, colu	mn (B),	line 10(c))		11111	, , ,			0.

Schedule D (Form 990) 2008

DAYTON FOUNDATION CHARITABLE Schedule D (Form 990) 2008 ACCOUNTS, INC. 31-1330325 Page 3 Part VII Investments - Other Securities. See Form 990, Part X, line 12 (c) Method of valuation (a) Description of security or category (b) Book value Cost or end-of-year market value (including name of security) Financial derivatives and other financial products Closely-held equity interests Other\_ Total (Col (b) should equal Form 990, Part X, col (B) line 12.) Part VIII Investments - Program Related. See Form 990, Part X, line 13 (c) Method of valuation. (a) Description of investment type (b) Book value Cost or end-of-year market value

Total (Col (b) should equal Form 990, Part X, col (B) line 13.) ▶	
Part IX Other Assets. See Form 990, Part X, line 15	
(a) Description	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col (B) line 15.)	<b>&gt;</b>

(b) Amount

Federal income taxes

Total. (Column (b) should equal Form 990, Part X, col (B) line 25.)

(a) Description of liability

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

DAYTON FOUNDATION CHARITABLE

Sche	edule D (Form 990) 2008 ACCOUNTS, INC.						<u> 31-</u>	<u> 13303</u>	<u> 25</u>	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	<u>Fina</u>	ind	cial Sta	teme	nts				
1	Total revenue (Form 990, Part VIII, column (A), line 12)				1			1,2	19,	891.
2	Total expenses (Form 990, Part IX, column (A), line 25)				2			3	13,	090.
3	Excess or (deficit) for the year Subtract line 2 from line 1				3			9	06,	801.
4	Net unrealized gains (losses) on investments				4			- 4	53,	673.
5	Donated services and use of facilities				5					
6	Investment expenses				6					-
7	Prior period adjustments				7					
8	Other (Describe in Part XIV)				8					
9	Total adjustments (net). Add lines 4-8				9			- 4	53.	673.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9				10					128.
	rt XII Reconciliation of Revenue per Audited Financial Stateme	ents V	Wi	th Rev		er R	eturn			1101
1	Total revenue, gains, and other support per audited financial statements						1		66	217.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.								<del></del>	
a	Net unrealized gains on investments	2a	. 1	- 1	53,6	71				
b	Donated services and use of facilities	2b			<u> </u>	/ = •	1			
-							1			
C	Recoveries of prior year grants  Other (Departs in Part VI)	2c	$\neg$				1			
d	Other (Describe in Part XIV)	2d	<u>. L</u>				1 .	4	E 2	671
_	Add lines 2a through 2d						2e	1 2	:33,	<u>674.</u> 891.
3	Subtract line 2e from line 1						3	1,4	<u>.19,</u>	891.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1.	1							
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	$\neg$				-			
b	Other (Describe in Part XIV)	4b	)				-			•
_	Add lines 4a and 4b						4c			0.
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	4 .	14/	CAL F.			5		<u> 19,</u>	<u>891.</u>
	rt XIII Reconciliation of Expenses per Audited Financial Statem	ients	VV	ith Exp	enses	s per	Retu			
1	Total expenses and losses per audited financial statements						1	3	13,	090.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	1	,							
а	Donated services and use of facilities	2a	4							
b	Prior year adjustments	2b	1							
С	Losses reported on Form 990, Part IX, line 25	2c	:							
d	Other (Describe in Part XIV)	2d	Ц							
е	Add lines 2a through 2d						2e			0.
3	Subtract line 2e from line 1						3	3	<u>.13,</u>	<u>090.</u>
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	4a	Ц							
b	Other (Describe in Part XIV)	4b								
C	Add lines 4a and 4b						4c			0.
	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)						5	3	13,	090.
Pa	rt XIV Supplemental Information									
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part I	III, lines	s 1a	a and 4, I	Part IV, I	ınes 1	b and 2	2b, Part V	, line 4	; Part
X; Pa	art XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b									
PAI	RT V, LINE 4: THE INTENDED USE OF THE ENDO	WME	ľΝ	FUN	DS I	ST	<b>'</b> O			
IN	ITIATE, PROMOTE, ORGANIZE, SPONSOR, CONTRI	BUTI	E	TO A	ND G	ENE	RAL	LY FU	RTH	ER
CHA	ARITABLE, EDUCATIONAL, CIVIC, RELIGIOUS AN	D C	OM	MUNI	TY A	CTI	VIT:	IES,		
										-
UNI	DERTAKINGS AND INSTITUTIONS.									
							-			
								_		
		-								

SCHEDULE I		•					OMB No 1545-0047
(Form 990)		Grants and Governr	Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.	to Organization luals in the U.S.	ώ <sup>°</sup>		2008
Department of the Treasury Internal Revenue Service	► Comp	► Complete if the organizatio	n answered "Yes," on F  ▶ Attach to Form 990.	" on Form 990, P n 990.	ganization answered "Yes," on Form 990, Part IV, lines 21 or 22.  Attach to Form 990.		Open to Public Inspection
Name of the organization DAYTON FOUNDATION ACCOUNTS, INC.	UNDATION INC.	CHARITABLE					Employer identification number 31–1330325
Part I General Information on Grants and Assistance	ind Assistance						
1 Does the organization maintain records to substantiate the amount of	to substantiate th		or assistance, the	grantees' eligibilit	y for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
criteria used to award the grants or assistance?  2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	stance?	toring the use of grant	funds in the United	States			X Yes No
١Ę	Governments an	d Organizations in the	United States. C	omplete if the ord	anization answered "Y	ons in the United States. Complete if the organization answered "Yes" on Form 990. Part IV line 21 for any	IV. line 21, for any
recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	\$5,000 Check this	s box if no one recipien	t received more th	an \$5,000. Use Pa	art IV and Schedule I-1	(Form 990) if addition	al space is needed
1 (a) Name and address of organization or government	( <b>p</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 non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CANCER SOCIETY 5555 FRANTZ RD							OXFORD RELAY FOR LIFE,
DUBLIN OH 43017	34-0726080	501(C)(3)	5,000.	0.	N/A	N/A	GENERAL SUPPORT
AMERICAN HEART ASSOCIATION, INC. 7272 GREENVILLE AVE DALLAS, TX 75231	13-5613797	501(C)(3)	000	0	e v	4 7	GENERAL SUPPORT
CHAPTER - 370 W. FIRST ST, P.O. BOX 517 - DAYTON, OH 45401	31-0537493	501(C)(3)	7 000	0	N/A	N/A	GENERAL SUPPORT
CHAMINADE-JULIENNE HIGH SCHOOL 505 S. LUDLOW ST DAYTON, OH 45402	31-0832408	501(C)(3)	5,000	0	N/A	N/A	SCHOLARSHIPS FOR STUDENTS, GENERAL SUPPORT
COMMUNITY FOUNDATION OF TAMPA BAY, INC 550 NORTH REO ST, SUITE 301 - TAMPA, FL 33609	59-3001853	501(C)(3)	6,561,	0	N/A	N/A	GENERAL SUPPORT
THE DAYTON ART INSTITUTE 456 BELMONTE PARK NORTH DAYTON OH 45405	31-0537480	501(C)(3)	10,475,	0	N/A	N/A	JEFFERSON PATTERSON SOCIETY, TRANSITION FUND GENERAL SUPPORT
<ul> <li>2 Enter total number of section 501(c)(3) and government organizations</li> <li>3 Enter total number of other organizations</li> </ul>	nd government or s	ganizations					16
۱, ۲	ction Act Notice,	see the Instructions 1	or Form 990.				Schedule I (Form 990) 2008

Page 2

31-1330325

Schedule I (Form 990) 2008

Part Ⅲ

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) RECOMMENDATIONS FOR THE USE OF GRANT FUNDS TO ASSURE THAT THEY WILL BE USED APPLICATIONS ARE REVEIWED TO INSURE THAT DISTRIBUTIONS WILL NOT BE USED FOR Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information ALL DISTRIBUTIONS ARE MADE DIRECTLY ALL GRANT DAYTON FOUNDATION CHARITABLE ACCOUNTS, INC. REVIEWS ALL 2: AS DETAILED IN THE ENTITY'S ARTICLES OF ANY PRIVATE BENEFIT OR FOR ANY POLITICAL ACTIVITIES OR CAMPAIGNS. (d) Amount of non-cash assistance TO THE CHARITABLE ORGANIZATION TO WHICH THE GRANT IS AWARDED. (c) Amount of cash grant (b) Number of recipients EXCLUSIVELY FOR CHARITABLE PURPOSES. (a) Type of grant or assistance LINE PART I, INCORPORATION, SCHEDULE I, Part IV

▲ Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990). Continuation Sheet for Schedule I (Form 990) DAYTON FOUNDATION CHARITABLE ACCOUNTS, INC. Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE I-1 (Form 990)

OMB No 1545-0047
2008
Open to Public
Inspection

Employer identification number 31-1330325

	INC		:			C	27-123022
(a) Name and address of the Inc. (b) IDC	Assistance to Go		and Organizations in the U.S. (Schedule   (Form 959), Fart    )	(a) Amount of	m 990), Part II )	(a) Description of	(h) Durance of great
organization or government	(c)	section rf applicable	cash grant	assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
THE DAYTON FOUNDATION 500 KETTERING TOWER			C	c	Ş		מסימינים יגימסיאמים
DAYTON PHILHARMONIC ORCHESTRA ASSOCIATION - 109 N. MAIN ST, SUITE 200 - DAYTON OH 45402	31-6000101	501(0)(3)	7 675		N/A N/A	N/8	GENERAL SUFFORT
UTHERAN CHINGTON PIKE	31-0838106	501(C)(3)	5 000		N/A	e/N	
	31-1195311	501(C)(3)	000 5		e/N	ď.	GENERAL SUPPORT
HOSPICE OF DAYTON FOUNDATION 324 WILMINGTON AVE DAYTON OH 45420	31-1769696	501(C)(3)		ő	e v	ď.	GENERAL SUPPORT
KETTERING MEDICAL CENTER FOUNDATION - 3535 SOUTHERN BOULEVARD - KETTERING OH 45429	23-7419897	501(C)(3)	000 6	O	N/A	ď/N	GENERAL SUPPORT
F X 7	İ	501(C)(3)	,	0	M/A	N/A	GENERAL SUPPORT
	31-0672037	501(C)(3)	5,000	0	N/A	N/A	GENERAL SUPPORT
2 Enter total number of Section 501(c)(3) and government organizations	nd government org	anizations					•

Enter total number of Section 501(c)(3) and government organizations
 Enter total number of other organizations

832241 12-17-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Open to Public Inspection OMB No 1545-0047 2008 STRONG KIDS CAMPAIGN, (h) Purpose of grant or assistance **Employer identification number** SENERAL SUPPORT SENERAL SUPPORT 31-1330325 (g) Description of non-cash assistance appraisal, other) (f) Method of valuation (book, FMV, Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II) ▲ Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990). Continuation Sheet for Schedule I (Form 990) (e) Amount of non-cash assistance 5 000 (d) Amount of cash grant 7,000 DAYTON FOUNDATION CHARITABLE (c) IRC Code section if applicable 62-0646012 501(C)(3) 31-0537517 |501(C)(3) Enter total number of Section 501(c)(3) and government organizations (p) EIN ACCOUNTS, INC. 3 Enter total number of other organizations HOSPITAL - P.O. BOX 50 - MEMPHIS (a) Name and address of organization or government ST JUDE CHILDREN'S RESEARCH 111 W. FIRST ST, SUITE 207 YMCA OF GREATER DAYTON Name of the organization DAYTON OH 45402 Department of the Treasury Internal Revenue Service SCHEDULE 1-1 (Form 990) TN 38101

Schedule I-1 (Form 990) 2008

832241 12-17-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

## SCHEDULE J (Form 990)

Department of the Treasury

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

➤ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization

DAYTON FOUNDATION CHARITABLE

ACCOUNTS, INC.

Employer identification number 31-1330325

Pa	Part I Questions Regarding Compensation			
			Yes	No
1a	a Check the appropriate box(es) if the organization provided any of the following to or for a	ı person listed in Form 990,		
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regardin	g these items.		
	First-class or charter travel Housing allowance	or residence for personal use	İ	
	Travel for companions Payments for busing	ness use of personal residence		
	Tax indemnification and gross-up payments Health or social clu	b dues or initiation fees		
	Discretionary spending account Personal services (	e g , maid, chauffeur, chef)		
b	b If line 1a is checked, did the organization follow a written policy regarding payment or rei	mbursement or provision		
	of all of the expenses described above? If "No," complete Part III to explain	1b		Ĺ
2	2 Did the organization require substantiation prior to reimbursing or allowing expenses incu	urred by all officers, directors,		
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
_				ĺ
3	, , , ,	on of the organization's		ł
	CEO/Executive Director. Check all that apply.			
	X Compensation committee X Written employmen			
	Independent compensation consultant  X Compensation sun			
	Form 990 of other organizations  Approval by the bo	ard or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a			
а	a Receive a severance payment or change of control payment?	4a		X
b	<b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
	c Participate in, or receive payment from, an equity-based compensation arrangement?	4c		х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each	ı ıtem ın Part III		
	Only 504(-VO) - 1504(-V4) - 1 - 1 - 1 - 1 - 1 - 1 - 1			
_	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or ac contingent on the revenues of:	crue any compensation		
-	a The organization?	5-		v
	b Any related organization?	<u>5a</u>	<u> </u>	X
b	If "Yes," to line 5a or 5b, describe in Part III	<u>5b</u>		
6	_	conto any componention		l
•	contingent on the net earnings of:	crue any compensation		
а	a The organization?	6a	}	x
	b Any related organization?	6b		X
_	If "Yes" to line 6a or 6b, describe in Part III.	. 00	<del> </del>	
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide a	any non-fixed navments		
-	not described in lines 5 and 6? If "Yes," describe in Part III	7		x
8	· · ·	<del></del>		41
-	initial contract exception described in Regs. section 53 4958-4(a)(3)? If "Yes," describe in	•		x
	The second in th		Ь	- 43

31-1330325

DAYTON FOUNDATION CHARITABLE

ACCOUNTS, IN

Schedule J (Form 990) 2008 ACCOUNT

ACCOUNTS, INC.

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	0	Q	(E)	(F)
					Deferred	Nontaxable	Total of columns	Compensation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(D)·(i)(B)	reported in prior Form 990 or Form 990-EZ
	Ξ	0	0	0	0.	0.	0	0
MICHAEL M. PARKS	(ii)	290,124	0	0	0.	10,663	300,787.	0
	Ξ							
	Œ							
	Ξ							
	(ii)							
	Θ							
	(1)							
	Θ							
	Œ							
	ε							
	(ii)							
	ε							
	▣							
	Ξ							
	(1)							
	ε							
	⊞							
	Ξ							
	⊞							
	Ξ							
	(ii)							
	Ξ							
	Ξ							
	Ξ							
	(ii)							
	Ξ							
	Œ							
	Ξ							
	Ξ							
	Ξ							
	(ii)							

Schedule J (Form 990) 2008

### **SCHEDULE O**

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Information to Form 990**

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

DAYTON FOUNDATION CHARITABLE ACCOUNTS, INC.

Employer identification number 31-1330325

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
DAYTON FOUNDATION CHARITABLE ACCOUNTS, INC. IS A SECTION 509(A)(3)
SUPPORTING ORGANIZATION TO THE DAYTON FOUNDATION, INC., A SECTION
501(C)(3) PUBLICLY SUPPORTED COMMUNITY FOUNDATION. THE DAYTON
FOUNDATION IS THE SOLE MEMBER OF THE DAYTON FOUNDATION CHARITABLE
ACCOUNTS, INC. THE DAYTON FOUNDATION FORMED DAYTON FOUNDATION
CHARITABLE ACCOUNTS, INC. AS A DONOR-DESIGNATED ENDOWMENT FUND TO
CONDUCT ACTIVITIES TO RAISE MONEY AND GIFTS OF PROPERTY FROM INTERESTED
INDIVIDUALS, CORPORATIONS, BUSINESS ORGANIZATIONS, GROUPS AND
ASSOCIATIONS, AND DISTRIBUTE SUCH FUNDS EXCLUSIVELY FOR CHARITABLE
PURPOSES WITHIN THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL
REVENUE CODE OF 1986, AS AMENDED, AND IN A MANNER SUPPORTIVE OF THE
CHARITABLE PURPOSES OF THE DAYTON FOUNDATION.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE DAYTON FOUNDATION IS THE SOLE MEMBER OF THE DAYTON FOUNDATION
CHARITABLE ACCOUNTS, INC. THE DAYTON FOUNDATION FORMED DAYTON
FOUNDATION CHARITABLE ACCOUNTS, INC. AS A DONOR-DESIGNATED ENDOWMENT
FUND TO CONDUCT ACTIVITIES TO RAISE MONEY AND GIFTS OF PROPERTY FROM
INTERESTED INDIVIDUALS, CORPORATIONS, BUSINESS ORGANIZATIONS, GROUPS
AND ASSOCIATIONS, AND DISTRIBUTE SUCH FUNDS EXCLUSIVELY FOR CHARITABLE
PURPOSES WITHIN THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL
REVENUE CODE OF 1986, AS AMENDED, AND IN A MANNER SUPPORTIVE OF THE
CHARITABLE PURPOSES OF THE DAYTON FOUNDATION.

### **SCHEDULE 0**

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Information to Form 990**

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

DAYTON FOUNDATION CHARITABLE ACCOUNTS, INC.

Employer identification number 31-1330325

FORM 990, PART VI, SECTION A, LINE 10: THE FORM 990 WILL BE E-MAILED TO
THE OFFICERS OF THE GOVERNING BODY FOR THEIR REVIEW.
FORM 990, PART VI, SECTION B, LINE 12C: ALL BOARD AND COMMITTEE MEMBERS
ARE ASKED TO DISCLOSE ANY CONFLICTS OF INTEREST ON AN ANNUAL BASIS.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING
DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE
AVAILABLE TO THE PUBLIC UPON REQUEST.
MUE DECCERGES FOR OVERSENTING MUE NUDITE NOR OF THE TOWNS
THE PROCESSES FOR OVERSEEING THE AUDIT AND SELECTION OF AN INDEPENDENT
ACCOUNTANT HAVE NOT CHANGED SINCE THE PRIOR YEAR.
FORM 990, PART IX, LINE 24A
OTHER EXPENSES
ADMINISTRATIVE FEES PAID TO THE DAYTON FOUNDATION.
FORM 990, PART IX, LINE 24B
OTHER EXPENSES
LIQUIDATION FEES PAID ON GIFTS OF SECURITIES.

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Name of the organization

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. Related Organizations and Unrelated Partnerships ▶ See separate instructions.

2008 Open to Public Inspection

OMB No 1545-0047

Employer identification number 31-1330325

Identification of Disregarded Entities Part

DAYTON FOUNDATION CHARITABLE

ACCOUNTS, INC.

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity

Identification of Related Tax-Exempt Organizations Part II

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
THE DAYTON FOUNDATION - 31-6027287					
500 KETTERING TOWER				170(B)(1)	
DAYTON OH 45423	COMMUNITY FOUNDATION	онго	501(C)(3)	(A)(VI)	N/A
THE DAYTON FOUNDATION DEPOSITORY -					
31-1044298, 500 KETTERING TOWER, DAYTON, OH				170(B)(1)	
45423	COMMUNITY FOUNDATION	оню	501(C)(3)	(A)(VI)	THE DAYTON FOUNDATION
THE DAYTON FOUNDATION PLUS, INC					
54-2101090, 500 KETTERING TOWER, DAYTON, OH					
45423	SUPPORTING ORGANIZATION	оніо	501(C)(3)	509(A)(3)	THE DAYTON FOUNDATION
DAYTON HISTORY ~ 31-6037490					
500 KETTERING TOWER					
DAYTON OH 45423	SUPPORTING ORGANIZATION	онто	501(C)(3)	509(A)(3)	THE DAYTON FOUNDATION
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	ice, see the Instructions for Form 99	Ö			Schedule R (Form 990) 2008

DAYTON FOUNDATION CHARITABLE

ACCOUNTS, INC Schedule R (Form 990) 2008 Part III Identification of Related Organizations Taxable as a Partnership

General or managing partner?

Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)

Page 2

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ate allocations? Yes No Disproportion-Î Share of end-of-year assets 9 Share of total income Œ Predominant income (related, investment, unrelated) Direct controlling entity 9 Legal domicile (state or foreign country) <u>Θ</u> Primary activity <u>@</u> Name, address, and EIN of related organization

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(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) (C corp., S corp., S corp., or trust)	(E) Type of entity (C corp., S corp, or trust)	(F) Share of total	(G) Share of end-of-year assets	(H) Percentage ownership
							_
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# DAYTON FOUNDATION CHARITABLE

Page 3

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INC ACCOUNTS, Schedule R (Form 990) 2008

# Transactions With Related Organizations Part V

		19
Note. Complete line 1 if any entity is listed in Parts II, III, or IV	1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	a Recept of (i) interest (ii) annuties (iii) royalties (iv) rent from a controlled entity

- a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity
  - b Gift, grant, or capital contribution to other organization(s)
- c Gift, grant, or capital contribution from other organization(s)
- d Loans or loan guarantees to or for other organization(s)
- e Loans or loan guarantees by other organization(s)
- Sale of assets to other organization(s)
- Purchase of assets from other organization(s)
- Exchange of assets
- i Lease of facilities, equipment, or other assets to other organization(s)
- j Lease of facilities, equipment, or other assets from other organization(s)
- Performance of services or membership or fundraising solicitations for other organization(s)
- l Performance of services or membership or fundraising solicitations by other organization(s)
- m Sharing of facilities, equipment, mailing lists, or other assets
  - Sharing of paid employees
- Reimbursement paid to other organization for expenses
- Reimbursement paid by other organization for expenses
- q Other transfer of cash or property to other organization(s)
- r Other transfer of cash or property from other organization(s)

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(A) Name of other organization(s)	(B) Transaction type (a-r)	(C) Amount involved
(1) THE DAYTON FOUNDATION	0	40,852.
(2) THE DAYTON FOUNDATION	O	19,092.
(3) THE DAYTON FOUNDATION	В	11,050.
(4)		
(5)		

832163 12-23-08

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Schedule R (Form 990) 2008

31-1330325 Page 4

DAYTON FOUNDATION CHARITABLE

Schedule R (Form 990) 2008 ACCOUNTS, INC.

Part VI Unrelated Organizations Taxable as a Partnership

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

Yes No General or managing partner? Code V.UBI amount in box 20 of Schedule K-1 (Form 1065) ල Disproportionate allocations? Yes No Share of end-ofyear assets Are all partners section 501(c)(3) organizations? Yes No <u>@</u> Legal domicile (state or foreign country) Primary activity Name, address, and EIN of entity

Schedule R (Form 990) 2008

31-1330325

Page 2

DAYTON FOUNDATION CHARITABLE Schedule R-1 (Form 990) 2008 ACCOUNTS, INC.

Part II Continuation of Identification of Related Tax-Exempt Organizations

(A)	(B)	(0)	<u>0</u>	(E)	(£)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501(c)(3))	Direct controlling entity
THE OHIO COMMUNITY POOLED ANNUITY TRUST - 59-3788888 500 KETTERING TOWER, DAYTON, OH 45423	SUPPORTING ORGANIZATION	OIHO	501(C)(3)	509(A)(3)	THE DAYTON POINDATION
ISABILITY FOUNDATION - 31-1725978 ETTERING TOWER N OH 45423	SUPPORTING ORGANIZATION	OIHO	501(C)(3)	509(A)(3)	THE DAYTON FOUNDATION
PAVILION FOUNDATION - 20-0443066  TTERING TOWER OH 45423	SUPPORTING ORGANIZATION	ОНО	501(C)(3)	509(A)(3)	THE DAYTON FOUNDATION
GREENER PASTURES FOUNDATION - 31-1725746 500 KETTERING TOWER DAYTON, OH 45423	SUPPORTING ORGANIZATION	ОНІО	501(¢)(3)	509(A)(3)	THE DAYTON FOUNDATION
AMERICAN SOCIETY OF EPHESUS - 34-6560998 500 KETTERING TOWER DAYTON, OH 45423	SUPPORTING ORGANIZATION	ОІНО	501(C)(3)	509(A)(3)	THE DAYTON FOUNDATION
THE GLENNON FAMILY CHARITABLE TRUST - 31-6615264, 500 KETTERING TOWER, DAYTON, OH 45423	SUPPORTING ORGANIZATION	ОНО	501(C)(3)	509(A)(3)	THE DAYTON FOUNDATION
THE HUNDRED CLUB OF DAYTON - 23-7046227 500 KETTERING TOWER DAYTON OH 45423	SUPPORTING ORGANIZATION	ОНІО	501(C)(3)	509(A)(3)	THE DAYTON FOUNDATION
THE HARRY W, AND MARGARET MOORE FOUNDATION,  INC 31-6040186, 500 KETTERING TOWER,  DAYTON, OH 45423	SUPPORTING ORGANIZATION	отно	501(C)(3)	509(A)(3)	THE DAYTON FOUNDATION
MORAINE CADDY SCHOLARSHIP FUND - 31-1773877 500 KETTERING TOWER DAYTON, OH 45423	SUPPORTING ORGANIZATION	оню	501(C)(3)	509(A)(3)	THE DAYTON FOUNDATION

Schedule R-1 (Form 990) 2008

1

FOOTNOTES

STATEMENT

FORM 990, PART IX, LINE 24A

STATEMENT REGARDING OPERATING EXPENSES

OPERATING EXPENSES ARE PAID BY THE DAYTON FOUNDATION, INC. FUNDS IN THE DAYTON FOUNDATION CHARITABLE ACCOUNTS, INC. ARE ASSESSED FEES THAT ARE TRANSFERRED TO THE DAYTON FOUNDATION TO OFFSET THE COSTS INCURRED TO OPERATE DAYTON FOUNDATION CHARITABLE ACCOUNTS, INC.

### Form **8868**

(Rev April 2009)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545 1709

• If you	are filing for an Automatic 3-Month Extension, complete only Part I and check this box			$\triangleright$ $\mathbf{X}$
<ul><li>If you</li></ul>	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	form)		
Do not o	omplete Part II unless you have already been granted an automatic 3-month extension on a previously fi	iled Fo	rm 8868	
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed)			
A corpor	- ation required to file Form 990-T and requesting an automatic 6-month extension - check this box and con	anlota		
Part I on		ibiete		<b></b>
	corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request at ome tax returns	n exter	ision of time	
noted be (not auto you must	ic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electron matic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or co submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file to chanties & Nonprofits	ically il	f (1) you want the ated Form 990-T.	additional
Type or print	Name of Exempt Organization DAYTON FOUNDATION CHARITABLE	Emp	loyer identificati	on number
Cilo biraba	ACCOUNTS, INC.	3	1-133032	5
File by the due date for	Number, street, and room or suite no. If a P O. box, see instruction			
filing your return See	500 KETTERING TOWER			
instructions	City, town or post office, state, and ZIP code. For a foreign addressive instructions.  DAYTON, OH 45423		·	<u> </u>
Check ty	pe of return to be filed (file a separate application for each return)			
For	m 990	227 069		
	THE ORGANIZATION  boks are in the care of ► 500 KETTERING TOWER - DAYTON, OH 45423  one No ► 937-222-0410 FAX No ►			
	rganization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this for part of the group, check this box    If it is for part of the group    If it is for part of the group, check this box    If it is for part of the group     If it is for part of the group     If it is for part of the group     If it is for part of the group     If it	s is foi memb	r the whole group ers the extension	o, check this
ıs fo	quest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt <b>FEBRUARY 15, 2010</b> , to file the exempt organization return for the organization named a or the organization's return for.    calendar year		The extension	
2 If th	is tax year is for less than 12 months, check reason Initial return Final return		Change in accou	nting penod
	is application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any refundable credits. See instructions	2-	\$	·
	is application is for Form 990 PF or 990-T, enter any refundable credits and estimated	3a	<del>-</del>	
	payments made Include any prior year overpayment allowed as a credit.	3b	\$	
	ance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required,			<del> </del>
dep	osit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)			
See	instructions	3с	\$	N/A
Caution.	f you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-E	O for payment in	structions
LHA F	or Privacy Act and Paperwork Reduction Act Notice, see Instructions.		Form <b>8868</b>	(Rev 4-2009)

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form 8868 (Rev. 4-2009)		_		Page 2
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this be Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed		 8868.	<b>&gt;</b>	X
Part II Additional (Not Automatic) 3-Month Extension, complete only Part I (on page 1).  Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no complete only Part II)	onies n	eeded).		
Name of Exempt Organization DAYTON FOUNDATION CHARITABLE ACCOUNTS, INC.	Empl		tification	number
Number, street, and room or suite no. If a P.O. box, see instructors.  Number, street, and room or suite no. If a P.O. box, see instructors.  Number, street, and room or suite no. If a P.O. box, see instructors.	<del> </del>	S use on		
clity, town or post office, state, and ZIP code. For a foreign address, see instructions.  DAYTON, OH 45423		<u> </u>	` .	
Check type of return to be filed (File a separate application for each return):  X Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A  Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720	= -	rm 5227 rm 6069	☐ Fo	orm 8870
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previou	sly file	d Form 8	868.	
THE ORGANIZATION  The books are in the care of ► 500 KETTERING TOWER - DAYTON, OH 45423  Telephone No. ► 937-222-0410  FAX No. ►				
Telephone No. ▶ 937-222-0410 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 the place of the group, check this box ▶ and attach a list with the names and EINs of all the place of the group in the group, check this box ▶ and attach a list with the names and EINs of all the place of the group in the	s is for membe	ers the ex	tension is	
6 If this tax year is for less than 12 months, check reason: Initial return Final return			accountir	ng period
7 State in detail why you need the extension INFORMATION NEEDED TO FILE A COMPLETE AND ACCURATE TAX AVAILABLE.	RE'	TURN	IS NO	T YET
<ul> <li>8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.</li> <li>b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid</li> </ul>	8a	\$	·	
previously with Form 8868.	8b	\$		
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	N	/A
Signature and Verification				
Inder penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the tis true, correct, and complete, and that I am authorized to prepare this form				ilief,
Signature > Charles Chaft, CPA Title > CPA	Date	► 0×		<del></del>
•		For	m <b>8868</b> (R	ev 4-2009)