

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2013 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2013 or fiscal plan year beginning <u>01/01/2013</u> and ending <u>12/31/2013</u>	
A This return/report is for:	☐ a multiemployer plan; ☐ a multiple-employer plan; or ☒ a single-employer plan; ☐ a DFE (specify) ____
B This return/report is:	☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	☒
D Check box if filing under:	☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information—enter all requested information
1a Name of plan <u>THE DAYTON POWER AND LIGHT COMPANY SAVINGS PLAN FOR COLLECTIVE BARGAINING EMPLOYEES</u>	1b Three-digit plan number (PN) ▶ <u>005</u> 1c Effective date of plan <u>11/01/1986</u>
2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan) <u>DAYTON POWER AND LIGHT COMPANY</u> <u>1065 WOODMAN DRIVE</u> <u>DAYTON, OH 45432</u>	2b Employer Identification Number (EIN) <u>31-0258470</u> 2c Sponsor's telephone number <u>937-259-7374</u> 2d Business code (see instructions) <u>221100</u>

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/10/2014	ED KUNZ
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE
Preparer's name (including firm name, if applicable) and address; include room or suite number. (optional) <u>RONALD ARCULEO</u> <u>DELOITTE TAX LLP</u> <u>1700 MARKET STREET</u> <u>PHILADELPHIA, PA 19103</u>			Preparer's telephone number (optional) <u>215-246-2300</u>

3a Plan administrator's name and address ☒ Same as Plan Sponsor Name ☐ Same as Plan Sponsor Address		3b Administrator's EIN
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name		3c Administrator's telephone number 4b EIN 4c PN
5 Total number of participants at the beginning of the plan year		5 984
6 Number of participants as of the end of the plan year (welfare plans complete only lines 6a , 6b , 6c , and 6d).		
a Active participants		6a 797
b Retired or separated participants receiving benefits		6b 0
c Other retired or separated participants entitled to future benefits.....		6c 120
d Subtotal. Add lines 6a , 6b , and 6c		6d 917
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits		6e 14
f Total. Add lines 6d and 6e		6f 931
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g 901
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested		6h 10
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....		7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2E 2F 2G 2J 2K 2S 2T		
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:		
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)		
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110
		2013
		This Form is Open to Public Inspection.

For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

A Name of plan <u>THE DAYTON POWER AND LIGHT COMPANY SAVINGS PLAN FOR COLLECTIVE BARGAINING EMPLOYEES</u>	B Three-digit plan number (PN) <u>005</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>DAYTON POWER AND LIGHT COMPANY</u>	D Employer Identification Number (EIN) <u>31-0258470</u>

Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... ☒ Yes ☐ No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

DIMENSIONAL FUND ADVISORS 6300 BEE CAVE ROAD
BUILDING ONE
AUSTIN, TX 78746

(b) Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation

VANGUARD MARKETING CORP 100 VANGUARD BLVD
MALVERN, PA 19355

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

T ROWE PRICE RPS INC

100 EAST PRATT STREET
BALTIMORE, MD 21202

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 21 25 28 37 38 49 50 52 59 62 64 65	NONE	18851	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

(a) Enter name and EIN or address (see instructions)

ESLER & VANDERSCHAAFF CO., LPA

2912 SPRINGSBORO WEST
SUITE 100
DAYTON, OH 45439

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29 50	NONE	16619	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

PRUDENTIAL MUTUAL FUND SERVICES, LL

P.O. BOX 9658
PROVIDENCE, RI 02940

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 59	NONE	0	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

PIMCO FUNDS DIST. INST

P.O. BOX 55060
BOSTON, MA 02205

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 59	NONE	0	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

(a) Enter name and EIN or address (see instructions)

OPPENHEIMER FUNDS

TWO WORLD FINANCIAL CENTER
225 LIBERTY STREET
NEW YORK, NY 10281

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 59	NONE	0	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
T ROWE PRICE RPS INC	15 21 25 28 37 38 49 50 52 59 62 64 65	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
OPPENHEIMER INTERNATIONAL BOND TWO WORLD FINANCIAL CENTER 225 LIBERTY STREET NEW YORK, NY 10281	FEE FOR SHAREHOLDER SERVICING BASED UPON 0.4%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
T ROWE PRICE RPS INC	15 21 25 28 37 38 49 50 52 59 62 64 65	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PIMCO TOTAL RETURN ADMIN P.O. BOX 55060 BOSTON, MA 02205	FEE FOR SHAREHOLDER SERVICING BASED UPON 0.25%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
T ROWE PRICE RPS INC	15 21 25 28 37 38 49 50 52 59 62 64 65	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PRUDENTIAL SHRT-TRM CORP BND Z P.O. BOX 9658 PROVIDENCE, RI 02940	FEE FOR SHAREHOLDER SERVICING BASED UPON 0.4%

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III **Termination Information on Accountants and Enrolled Actuaries (see instructions)**
(complete as many entries as needed)

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2013 This Form is Open to Public Inspection.
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For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

A Name of plan <u>THE DAYTON POWER AND LIGHT COMPANY SAVINGS PLAN FOR COLLECTIVE BARGAINING EMPLOYEES</u>	B Three-digit plan number (PN) ►	<u>005</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>DAYTON POWER AND LIGHT COMPANY</u>	D Employer Identification Number (EIN) <u>31-0258470</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>TRP RETIREMENT INCOME ACTIVE TRUST</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>38-7011316-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>447681</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>TRP RETIREMENT 2005 TRUST ACTIVE</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>61-6434302-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>2315154</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>TRP RETIREMENT 2010 TRUST ACTIVE</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>32-6199795-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>4343881</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>TRP RETIREMENT 2015 TRUST ACTIVE</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>35-6941654-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>14104802</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>TRP RETIREMENT 2020 TRUST ACTIVE</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>36-7594871-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>18982888</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>TRP RETIREMENT 2025 TRUST ACTIVE</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>37-6495447-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>8389792</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>TRP RETIREMENT 2030 TRUST ACTIVE</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>38-7010946-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>5685502</u>

a Name of MTIA, CCT, PSA, or 103-12 IE: [TRP RETIREMENT 2035 TRUST ACTIVE](#)**b** Name of sponsor of entity listed in (a): [T. ROWE PRICE TRUST COMPANY](#)

c EIN-PN 36-7595013-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4547993
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a Name of MTIA, CCT, PSA, or 103-12 IE: [TRP RETIREMENT 2040 TRUST ACTIVE](#)**b** Name of sponsor of entity listed in (a): [T. ROWE PRICE TRUST COMPANY](#)

c EIN-PN 35-6941729-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3802587
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a Name of MTIA, CCT, PSA, or 103-12 IE: [TRP RETIREMENT 2045 TRUST ACTIVE](#)**b** Name of sponsor of entity listed in (a): [T. ROWE PRICE TRUST COMPANY](#)

c EIN-PN 32-6199848-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3825240
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a Name of MTIA, CCT, PSA, or 103-12 IE: [TRP RETIREMENT 2050 TRUST ACTIVE](#)**b** Name of sponsor of entity listed in (a): [T. ROWE PRICE TRUST COMPANY](#)

c EIN-PN 30-6303214-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2730245
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a Name of MTIA, CCT, PSA, or 103-12 IE: [TRP RETIREMENT 2055 TRUST ACTIVE](#)**b** Name of sponsor of entity listed in (a): [T. ROWE PRICE TRUST COMPANY](#)

c EIN-PN 35-6941728-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 531917
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a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
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plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2013 This Form is Open to Public Inspection
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For calendar plan year 2013 or fiscal plan year beginning <u>01/01/2013</u> and ending <u>12/31/2013</u>		
A Name of plan <u>THE DAYTON POWER AND LIGHT COMPANY SAVINGS PLAN FOR COLLECTIVE BARGAINING EMPLOYEES</u>	B Three-digit plan number (PN) ►	<u>005</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>DAYTON POWER AND LIGHT COMPANY</u>	D Employer Identification Number (EIN) <u>31-0258470</u>	

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	1901655	37756
(2) Participant contributions.....	1b(2)		
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	14643120	13133238
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common.....	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property).....	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans.....	1c(8)	3130146	4167507
(9) Value of interest in common/collective trusts	1c(9)	0	69707682
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities.....	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	94918077	46170345
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	114592998	133216528

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j	0	59319
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	59319

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	114592998	133157209
---	-----------	-----------	-----------

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	3089354	
(B) Participants	2a(1)(B)	4234043	
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		7323397
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	1757	
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	155035	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		156792
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	1595108	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		1595108
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		5060842
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		14889240
c Other income.....	2c		159376
d Total income. Add all income amounts in column (b) and enter total.....	2d		29184755

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	10529712	
(2) To insurance carriers for the provision of benefits.....	2e(2)		
(3) Other.....	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		10529712
f Corrective distributions (see instructions).....	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees.....	2i(1)	20332	
(2) Contract administrator fees.....	2i(2)		
(3) Investment advisory and management fees.....	2i(3)		
(4) Other.....	2i(4)	18850	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		39182
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		10568894

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		18615861
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan.....	2l(2)		51650

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☐ Unqualified (2) ☐ Qualified (3) ☒ Disclaimer (4) ☐ Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)?

☒ Yes ☐ No

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: **BATTELLE RIPPE KINGSTON, LLP**

(2) EIN: **31-0210560**

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....

b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....

	Yes	No	Amount
4a		X	
4b		X	

	Yes	No	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
e Was this plan covered by a fidelity bond?	X		10000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?
 If "Yes," enter the amount of any plan assets that reverted to the employer this year. ☐ Yes ☒ No Amount:

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)
THE DAYTON POWER AND LIGHT COMPANY EMPLOYEE SAVINGS PLAN	31-0258470	004

5c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (see ERISA section 4021)? ☐ Yes ☐ No ☐ Not determined

Part V Trust Information (optional)

6a Name of trust	6b Trust's EIN

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation		Retirement Plan Information This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.		OMB No. 1210-0110 2013 This Form is Open to Public Inspection.	
For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013					
A Name of plan THE DAYTON POWER AND LIGHT COMPANY SAVINGS PLAN FOR COLLECTIVE BARGAINING EMPLOYEES				B Three-digit plan number (PN) ▶	005
C Plan sponsor's name as shown on line 2a of Form 5500 DAYTON POWER AND LIGHT COMPANY				D Employer Identification Number (EIN) 31-0258470	
Part I Distributions					
All references to distributions relate only to payments of benefits during the plan year.					
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....				1	0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 52-1481931					
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.					
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....				3	
Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part)					
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?..... ☐ Yes ☐ No ☐ N/A					
If the plan is a defined benefit plan, go to line 8.					
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.					
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived).....				6a	
b Enter the amount contributed by the employer to the plan for this plan year.....				6b	
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)				6c	
If you completed line 6c, skip lines 8 and 9.					
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?..... ☐ Yes ☐ No ☐ N/A					
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?..... ☐ Yes ☐ No ☐ N/A					
Part III Amendments					
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... ☐ Increase ☐ Decrease ☐ Both ☐ No					
Part IV ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.					
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ☐ Yes ☐ No					
11 a Does the ESOP hold any preferred stock? ☐ Yes ☐ No					
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)..... ☐ Yes ☐ No					
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?..... ☐ Yes ☐ No					
For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.				Schedule R (Form 5500) 2013 v. 130118	

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

- 14** Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	14a	
b The plan year immediately preceding the current plan year	14b	
c The second preceding plan year	14c	

- 15** Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	15a	
b The corresponding number for the second preceding plan year	15b	

- 16** Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	16a	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	16b	

- 17** If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

- 18** If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

- 19** If the total number of participants is 1,000 or more, complete lines (a) through (c)

a Enter the percentage of plan assets held as:
 Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate line 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____

**THE DAYTON POWER AND LIGHT COMPANY
SAVINGS PLAN FOR COLLECTIVE BARGAINING EMPLOYEES**

FINANCIAL STATEMENTS

DECEMBER 31, 2013

The Dayton Power and Light Company
Savings Plan for Collective Bargaining Employees

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INDEPENDENT AUDITORS' REPORT

To the Participants and the Plan Trustees
The Dayton Power and Light Company Savings Plan for Collective Bargaining Employees
Dayton, Ohio

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of The Dayton Power and Light Company Savings Plan for Collective Bargaining Employees (the Plan), which comprise the statement of net assets available for benefits as of December 31, 2013, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these 2013 financial statements based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion on the 2013 financial statements.

Basis for Disclaimer of Opinion on the 2013 Financial Statements

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information described in Note 11, which was certified by T. Rowe Price, the trustee of the Plan, except for comparing this information with the related information included in the 2013 financial statements. We have been informed by the Plan administrator that the trustee holds the Plan's assets and executes transactions. The Plan administrator has obtained a certification from the trustee as of and for the year ended December 31, 2013, that the information provided to the Plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion on the 2013 Financial Statements

Because of the significance of the matter described in the Basis for Disclaimer of Opinion on the 2013 Financial Statements paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion on the 2013 financial statements. Accordingly, we do not express an opinion on these financial statements.

Other Matter - Report on Supplementary Information

The supplemental schedule of assets held at end of year as of December 31, 2013 is required by the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purposes of additional analysis but is not a required part of the financial statements. This supplemental schedule is the responsibility of the Plan's management. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedule.

Other Matter—Report on 2012 Financial Statements

We have audited the accompanying 2012 financial statement of the Plan, which comprise the statement of net assets available for benefits as of December 31, 2012 and the related statement of changes in net assets available for benefits for the year then ended, and in our report dated October 10, 2013, we expressed our opinion that such financial statement presents fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2012 and the changes in net assets available for benefits for the year then ended, in accordance with accounting principles generally accepted in the United States of America.

Report on Form and Content in Compliance With DOL Rules and Regulations

The form and content of the information included in the 2013 financial statements and supplemental schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Battelle Rippe Kingston LLP

Dayton, Ohio
October 10, 2014

The Dayton Power and Light Company
Savings Plan for Collective Bargaining Employees
Statements of Net Assets Available for Benefits

	At December 31,	
	2013	2012
<u>ASSETS</u>		
<u>Investments at Fair Value (Notes 2(f) and 3):</u>		
Money Market Fund	\$ 13,133,238	\$ 14,643,120
Mutual Funds	46,170,345	94,918,077
Common/Collective Trusts	69,707,682	-
Total Investments	<u>129,011,265</u>	<u>109,561,197</u>
Employer Contributions Receivable	37,756	1,901,655
Notes Receivable From Participants (Notes 1(h) and 11)	<u>4,167,507</u>	<u>3,130,146</u>
Total Receiveables	<u>4,205,263</u>	<u>5,031,801</u>
<u>LIABILITIES</u>		
Excess Participant Deferrals	<u>59,319</u>	<u>-</u>
	59,319	-
Net Assets Available for Benefits	<u>\$ 133,157,209</u>	<u>\$ 114,592,998</u>

The accompanying notes are an integral part of the financial statements.

The Dayton Power and Light Company
Savings Plan for Collective Bargaining Employees
Statements of Changes in Net Assets Available for Benefits

	Year Ended December 31,	
	2013	2012
<u>Investment Income (Note 2(f)):</u>		
Net Appreciation in Fair Value of Investments: *		
Mutual Funds	14,889,240	10,828,207
Common/Collective Trusts	5,060,842	-
Total Net Appreciation	19,950,082	10,828,207
Dividend Income	1,596,865	2,684,931
Net Investment Income	21,546,947	13,513,138
Interest on Notes Receivable From Participants **	155,035	105,080
Employer Contributions	3,089,354	3,024,454
Participant Contributions (Note 4)	4,234,043	4,074,492
Other Income	159,376	92,737
	29,184,755	20,809,901
Deductions in Net Assets Attributable to:		
Transfers to Other Company Sponsored Plan (Note 6)	(51,650)	(131,556)
Benefits Paid to Participants	(10,529,712)	(13,995,869)
Administrative Expenses	(39,182)	-
Total Deductions	(10,620,544)	(14,127,425)
Net Increase in Net Assets	18,564,211	6,682,476
Net Assets Available for Benefits:		
Beginning of Year	114,592,998	107,910,522
End of Year	<u>\$ 133,157,209</u>	<u>\$ 114,592,998</u>

* Includes realized and unrealized gains and losses on investments.

** Includes interest on deemed distributions.

The accompanying notes are an integral part of the financial statements.

The Dayton Power and Light Company
Savings Plan for Collective Bargaining Employees
Notes to Financial Statements
December 31, 2013 and 2012

Note 1 - Plan Description

(a) General

The Dayton Power and Light Company Savings Plan for Collective Bargaining Employees (the "Plan"), effective November 1, 1986, as amended, was established by the Board of Directors of The Dayton Power and Light Company (the "Company") to provide eligible union employees of the Company with a 401(k) plan. The Plan is a defined contribution plan that is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended. A union employee becomes eligible for the Plan on the first day of the first month following thirty days of employment.

(b) Participant Contributions

An eligible participant may execute a salary reduction agreement directing the Company to contribute to the Plan on behalf of the participant up to 85 percent (in whole percentages) of regular compensation. In addition, the participant may contribute up to 85 percent (in whole percentages) of eligible incentive compensation. Both salary reduction and incentive compensation contributions are subject to certain Internal Revenue Service (IRS) limitations. Participants who would have attained age 50 before the close of the plan year are eligible to make additional "catch-up" contributions, subject to certain IRS limitations.

Effective October 1, 2006, all new employees are automatically enrolled in the Plan at a default contribution rate of 3 percent which is invested in the Retirement Income Fund appropriate for the participant's age. Employees may opt out of this automatic election or choose to change the deferral percentage.

Participants may also elect to direct a portion of funds from a Company sponsored welfare cafeteria benefit plan, another component of compensation, into the Plan. Contributions to this plan were \$107,074 and \$98,295 for the years ended December 31, 2013 and 2012, respectively, and are included within Participant Contributions on the Statement of Changes in Net Assets Available for Benefits.

(c) Employer Contributions

The Company matches \$1.50 for every \$1.00 of participant contributions. For 2013 and 2012, respectively, employer matching contributions were capped at \$1,900 and \$1,800 for the year.

(d) Vesting

Participants are immediately vested in their voluntary contributions plus actual earnings thereon. Employer matching contributions for 2013 were cliff-vested 100 percent after three years' service. Forfeited, non-vested accounts totaled \$25,359 and \$8,797 at December 31, 2013 and 2012, respectively. Forfeitures of \$0 and \$6,210 were used to reduce employer matching contributions in 2013 and 2012, respectively.

(e) Participant Accounts

Each participant's account is credited with the participant's elective deferrals and an allocation of employer contributions, if any, Plan earnings or losses and any Plan expenses the Company may not elect to pay. Participants can self-direct their contributions to a variety of investment options offered by the Plan with varied risk and return potentials.

The Dayton Power and Light Company
Savings Plan for Collective Bargaining Employees
Notes to Financial Statements
December 31, 2013 and 2012

(f) Payment of Benefits

In general, participants are eligible for lump sum distributions upon termination of their employment and the submission and subsequent approval of an application for benefits. Earlier distributions can occur for a Qualified Domestic Relations Order, disability or death. Otherwise, distribution must occur within 60 days after the plan year in which the latest of the following events occurs: 65th birthday; 10th anniversary of participation in the Plan; or termination of employment. Participants are allowed to take distributions during employment if older than 59-1/2 and/or for a hardship as defined in the Plan document.

Additionally, the Plan allows for automatic payment of a participant's vested balance upon termination, provided that the vested balance is \$1,000 or less and the participant is less than 65 years old.

(g) Plan Termination

Although the Company expects the Plan to continue indefinitely, it reserves the right to discontinue employer contributions or terminate the Plan at any time. If the Plan should be terminated, in whole or in part, participants will be entitled to withdraw the full value of their accounts, or to the extent allowed by law.

(h) Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid balance, plus any accrued interest, in accordance with FASB Accounting Standards Update (ASU) 2011-25 "Reporting Loans to Participants by Defined Contribution Pension Plans." Any such loan or loans must be a minimum of \$1,000 and shall not exceed the lesser of 50% of the participant's vested account balance or \$50,000. For loans made on or after November 15, 2010, participants will not be entitled to receive a loan more frequently than once in any 12 month period of time. Participants are entitled to a maximum of two loans. Loans must be paid back within 60 months (unless the loan is used to acquire a principal residence) to prevent the loan from being treated as a distribution. Loan payments must be made through payroll deductions while the participant is employed.

Note 2 - Summary of Significant Accounting Policies

(a) Basis of Accounting

The financial statements of the Plan have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP) and in accordance with the Financial Accounting Standards Board (FASB) Accounting Standards Codification (FASC).

(b) Use of Estimates

The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from these estimates.

The Dayton Power and Light Company
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(c) Payment of Benefits

Benefits are recorded when paid.

(d) Excess Contributions

Refund of excess participant deferral contributions may be required to satisfy the relevant non-discrimination provision of the Plan. Such refunds are accrued as a liability and reduction in contributions in the Plan year in which the excess deferrals were made.

(e) Subsequent Events

We have evaluated all subsequent events through October 10, 2014, the date these statements were available to be issued.

(f) Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Investments in mutual funds and money market funds are reported at fair value based on the fair value of the underlying net assets of the funds as determined by those funds. Investments in common/collective trusts are valued at the closing net asset value ("NAV") of the units held by the Plan at year end based on information provided by the trustee.

Realized and unrealized gains and losses are based on the difference between the fair values of the investments at the beginning of the year or the purchase dates and the fair values at the end of the year or the sales dates, as applicable, and are included within Net Appreciation on the Statement of Changes in Net Assets Available for Benefits.

Purchases and sales of investments are recorded on a trade-date basis. Dividend income is recorded on an ex-dividend basis. Capital gain distributions are included in dividends. Interest income is recorded on an accrual basis.

The fair value hierarchy, as discussed in FASC 820 "Fair Value Measurements," requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs when measuring fair value. These inputs are then categorized as: Level 1 (quoted prices in active markets for identical assets or liabilities); Level 2 (observable inputs such as quoted prices for similar assets or liabilities or quoted prices in markets that are not active); or Level 3 (unobservable inputs).

Valuations of assets and liabilities reflect the value of the instrument including the values associated with counterparty credit risk. We include our own credit risk and our counterparty's credit risk in our calculation of fair value using the Global Corporate Cumulative Average Default Rates.

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The fair value of assets measured on a recurring basis and the respective category within the fair value hierarchy was determined as follows:

Assets Measured at Fair Value on a Recurring Basis				
		Level 1	Level 2	Level 3
	Fair Value at December 31, 2013	Based on Quoted Prices in Active Market	Based on Other Observable Inputs	Unobservable Inputs
Assets				
Money Market Fund	\$ 13,133,238	\$ 13,133,238	\$ -	\$ -
Mutual Funds	46,170,345	46,170,345	-	-
Common/Collective Trusts	69,707,682	-	69,707,682	-
Total	\$ 129,011,265	\$ 59,303,583	\$ 69,707,682	\$ -

Assets Measured at Fair Value on a Recurring Basis				
		Level 1	Level 2	Level 3
	Fair Value at December 31, 2012	Based on Quoted Prices in Active Market	Based on Other Observable Inputs	Unobservable Inputs
Assets				
Money Market Fund	\$ 14,643,120	\$ 14,643,120	\$ -	\$ -
Mutual Funds	94,918,077	94,918,077	-	-
Total	\$ 109,561,197	\$ 109,561,197	\$ -	\$ -

Level 1 inputs are used to value open-ended mutual funds held by the Plan using the end of day Net Asset Value (NAV) traded in an active exchange market. This is in accordance with FASC Topic 820, which states that assets valued at quoted prices that represent the net asset value of shares in active markets for identical assets or liabilities should be classified as Level 1.

Level 2 inputs are used to value investments in common/collective trusts held by the Plan using the end of year Net Asset Value (NAV). This is in accordance with FASC Topic 820, which states that assets valued at quoted prices that represent the net asset value of shares in active markets for similar assets or liabilities should be classified as Level 2.

There were no transfers in or out of Levels 1 and 2 during the years ended December 31, 2013 and 2012. However 2012 was re-classed to present the money market and mutual funds as Level 1 instead of Level 2.

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Net Asset Value per Unit

The following table discloses the fair value and redemption frequency of those Plan investments whose fair value is estimated using the NAV per unit as of December 31, 2013 and 2012. Fair values estimated using the NAV per unit are categorized as Level 2 within the fair value hierarchy, unless the investments cannot be redeemed at the NAV on the reporting date. Investments that have restrictions on redemption would be categorized as Level 3 assets within the hierarchy. As of December 31, 2013 and 2012, the Plan did not have any investments for sale at a price other than the NAV.

Fair Value Estimated Using Net Asset Value per Unit					
Investment	December 31, 2013 Fair Value	December 31, 2012 Fair Value	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Equity Mutual Funds (a)	\$ 40,753,262	\$ 29,576,083	\$ -	Immediate	None
Fixed Income Mutual Funds (b)	5,417,083	6,545,356	-	Immediate	None
Target Maturity Mutual Funds (c)	-	58,796,638	-	Immediate	None
Money Market Mutual Fund (d)	13,133,238	14,643,120	-	Immediate	None
Common/Collective Trusts (e)	69,707,682	-	-	Immediate	90 days
Total	<u>\$ 129,011,265</u>	<u>\$ 109,561,197</u>	<u>\$ -</u>		

(a) This category primarily includes investments in equity securities of large, small and medium sized companies and equity securities of foreign companies including those in developing countries. The funds are valued using the NAV method in which an average of the market prices for the underlying investments is used to value the fund. Investments in this category can be redeemed immediately at the current NAV per unit.

(b) This category primarily includes investments in investment grade fixed income instruments, US dollar denominated debt securities of emerging market issuers and high yield fixed income securities that are rated below investment grade. The funds are valued using the NAV method in which an average of the market prices for the underlying investments is used to value the fund. Investments in this category can be redeemed immediately at the current NAV per unit.

(c) This category includes investments in equity and fixed income securities including equity investments of large, small and medium sized companies and equity securities of foreign companies including those in developing countries as well as investment grade fixed income instruments, US dollar-denominated debt securities of emerging market issuers and high yield fixed income securities that are rated below investment grade. The funds are valued using the NAV method in which an average of the market prices for the underlying investments is used to value the fund. Investments in this category can be redeemed immediately at the current NAV per unit.

(d) This category includes investments in a money market mutual fund. The fund is valued using the NAV method in which an average of the market prices for the underlying investments is used to value the fund. Investments in this category are highly liquid and can be redeemed immediately at the NAV per unit.

(e) This category includes investments in common/collective trusts. The trusts are valued at the NAV of units held by the Plan at year end, as reported to the Plan by the trustee, which represents the fair value of units held by the Plan.

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Investments That Exceed Five Percent of Net Assets

The following table discloses investments that exceed 5% of Net Assets Available for Benefits:

	At December 31,	
	2013	2012
Prime Reserve Fund	\$ 13,133,238	\$ 14,643,120
Retirement 2020 Active Trust A	18,982,888	*
Retirement 2015 Active Trust A	14,104,802	*
Equity Income Fund	10,315,858	7,900,239
New Horizons Fund	9,995,367	6,917,674
Vanguard 500 Index Fund	8,750,940	6,840,378
Retirement 2025 Active Trust A	8,389,792	*
Retirement 2020 Fund	*	16,856,642
Retirement 2015 Fund	*	13,237,061
Retirement 2025 Fund	*	6,164,767

* Investment did not exceed 5% of Net Assets Available for Benefits

Note 3 - Related Party Transactions (Parties-in-Interest)

Certain Plan investment purchases and sales are shares of mutual funds and common/collective trust funds managed by T. Rowe Price. T. Rowe Price is the Trustee as defined by the Plan; therefore, these transactions qualify as party-in-interest transactions. During the years ended December 31, 2013 and 2012, such purchases were \$82,207,570 and \$16,518,709, respectively, and such sales totaled \$82,668,924 and \$23,968,703, respectively.

Note 4 - Contributions

Participant contributions withheld by the Company are paid into the Plan as soon as administratively possible.

During 2013 and 2012, there were no incoming transfers between the Plan and the Company's Employee Savings Plan for non-union employees. Transfers of this type reflect the movement of savings for employees who have changed from non-union to union status. Refer to Note 6 for detail regarding transfers out of the Plan.

The Dayton Power and Light Company
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December 31, 2013 and 2012

Note 5 - Administrative Expenses

The Plan is administered by the Company, without charge to the Plan, and T. Rowe Price is the Trustee. The Company has elected to pay a portion of the fees incurred in the administration of the Plan, including a portion of the Trustee's compensation and expenses. Effective April 1, 2012, the Company has an ERISA account in the Plan whereby a portion of the fund fees is collected in an Administrative Budget account and can be used to pay qualified plan expenses. The administrative budget account totaled \$218,928 and \$87,813 at December 31, 2013 and 2012, respectively. Fees of \$28,283 were paid from this account in 2013. Excess funds in the Administrative Budget account, that are not used to pay qualified plan expenses, will be periodically distributed to plan participants on a pro-rata basis.

Note 6 - Benefits

There were no benefit obligations to participants who had withdrawn from the Plan at December 31, 2013 and 2012.

There was an outgoing balance transfer of \$51,650 to the Plan during 2013 to the Company's Employee Savings Plan for non-union employees. During 2012, there were outgoing balance transfers of \$77,847 and loan transfers of \$53,709 between the Plan and the Company's Employee Savings Plan for non-union employees. These transfers reflect the movement of savings for employees who have changed from union to non-union status.

Note 7 - Federal Income Taxes

The Plan is designed and being operated to be exempt from federal income tax as a qualified employee benefit plan under Sections 401(a) and 501(a) of the Internal Revenue Code (IRC). The Plan received a favorable determination letter from the IRS dated August 7, 2012 indicating that the Plan is so qualified. The Plan was amended subsequent to the filing of the determination request with the IRS and prior to the receipt of the determination letter, yet the Plan Administrator believes the Plan is currently designed and being operated in compliance with applicable IRC requirements and continues to be tax exempt as of December 31, 2013.

There are no uncertain tax positions with respect to the Plan and the Plan has no tax positions that are expected to significantly increase or decrease over the next twelve months. The Plan is subject to normal statutes of limitations with regard to tax examinations. With few exceptions, the Plan is no longer subject to income tax examinations for years before 2010. No interest or penalties have been recognized in the Plan's financial statements.

Note 8 - Risks and Uncertainties

Investment securities are exposed to various risks, such as interest rate risk, market risk and credit risk. Due to the level of risk associated with certain investment securities and the level of uncertainty related to the changes in the fair value of investment securities, it is at least reasonably possible that changes in risks in the near term could materially affect the amounts reported in the Statement of Net Assets Available for Benefits.

The Dayton Power and Light Company
Savings Plan for Collective Bargaining Employees
Notes to Financial Statements
December 31, 2013 and 2012

Note 9 – Fund Changes

On July 26, 2013, the Plan exchanged the existing 12 targeted mutual funds for 12 different T. Rowe Price targeted Active Trust A common/collective trust funds. There were no new funds added to the investment lineup during the year ended December 31, 2012.

Note 10 - Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements to the Form 5500:

	2013	2012
Net Assets Available for Benefits per the Financial Statements	\$ 133,157,209	\$ 114,592,998
Differences in:		
Investments	(4,167,507)	(3,130,146)
Receivables - Notes Receivable From Participants	4,167,507	3,130,146
Net Assets Available for Benefits per the Form 5500	<u>\$ 133,157,209</u>	<u>\$ 114,592,998</u>

NOTE 11 – INFORMATION CERTIFIED BY THE PLAN'S TRUSTEE

The information related to investments and notes receivable from participants that is included throughout the Plan's financial statements and supplemental schedule as of December 31, 2013 and for the year then ended was prepared by or derived from information provided by the trustee and furnished to the Plan administrator. The Plan administrator has obtained a certification from the trustee that information provided to the Plan administrator by the trustee related to these plan assets is complete and accurate. Accordingly, as permitted by 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to 2013 information in Note 2(f) and the supplemental schedule related to the Plan's assets.

T. Rowe Price also certified to the completeness and accuracy of \$19,950,082 of net appreciation in fair value of investments and \$1,596,865 of dividends related to investments and \$155,035 of interest income from notes receivable from participants for the year ended December 31, 2013.

The Dayton Power and Light Company
Savings Plan for Collective Bargaining Employees
EIN # 31-0258470
Plan # 005

Schedule H, Line 4i – Schedule of Assets Held at End of Year
December 31, 2013

Party-in-Interest	Identity of Issuer	Description of Investment	Current Value
(a)	(b)	(c)	(e)
	Money Market Fund:		
*	T. Rowe Price Trust Company	Prime Reserve Fund (13,133,238 shares)	\$13,133,238
	Mutual Funds:		
*	T. Rowe Price Trust Company	DFA Emerging Markets Value Fund (15,271)	421,646
*	T. Rowe Price Trust Company	Vanguard 500 Index Fund (62,187)	8,750,940
*	T. Rowe Price Trust Company	Prudential Short-Term Corp. Bond Z Fund (17,679)	200,833
*	T. Rowe Price Trust Company	Oppenheimer International Bond A Fund (19,394)	117,914
*	T. Rowe Price Trust Company	Pimco Real Return Institutional Fund (21,252)	233,129
*	T. Rowe Price Trust Company	Pimco Total Return Admin (153,489)	1,640,801
*	T. Rowe Price Trust Company	Mid-cap Value Fund (29,862)	897,356
*	T. Rowe Price Trust Company	International Stock Fund (125,546)	2,046,402
*	T. Rowe Price Trust Company	New Horizons Fund (216,023)	9,995,367
*	T. Rowe Price Trust Company	Small-cap Value Fund (11,539)	581,241
*	T. Rowe Price Trust Company	Vanguard Int Termbond IDX, SIG (48,451)	537,319
*	T. Rowe Price Trust Company	Mid-cap Growth Fund (15,705)	1,143,031
*	T. Rowe Price Trust Company	Equity Income Fund (314,125)	10,315,858
*	T. Rowe Price Trust Company	Spectrum Income Fund (210,587)	2,687,087
*	T. Rowe Price Trust Company	Blue Chip Growth Fund (102,189)	6,601,421
	Total Mutual Funds		46,170,345
	Common/Collective Trusts:		
*	T. Rowe Price Trust Company	Retirement 2020 Active Trust A (1,428,359)	18,982,888
*	T. Rowe Price Trust Company	Retirement 2025 Active Trust A (612,394)	8,389,792
*	T. Rowe Price Trust Company	Retirement 2055 Active Trust A (36,862)	531,917
*	T. Rowe Price Trust Company	Retirement 2015 Active Trust A (1,096,796)	14,104,802
*	T. Rowe Price Trust Company	Retirement 2030 Active Trust A (404,950)	5,685,502
*	T. Rowe Price Trust Company	Retirement 2035 Active Trust A (317,819)	4,547,993
*	T. Rowe Price Trust Company	Retirement 2040 Active Trust A (262,973)	3,802,587
*	T. Rowe Price Trust Company	Retirement 2045 Active Trust A (264,722)	3,825,240
*	T. Rowe Price Trust Company	Retirement 2005 Active Trust A (192,289)	2,315,154
*	T. Rowe Price Trust Company	Retirement 2010 Active Trust A (351,447)	4,343,881
*	T. Rowe Price Trust Company	Retirement 2050 Active Trust A (188,814)	2,730,245
*	T. Rowe Price Trust Company	Retirement Income Active Trust A (37,811)	447,681
	Total Common/Collective Trusts		69,707,682
	Notes Receivable From Participants:		
*	Participant Loans	Interest rate of 4.25% with maturity at various dates through July 2028	4,167,507
	Total		\$ 133,178,772

Note: An (*) in column (a) identifies a person known to be a party-in-interest to the Plan.
Column (d) has been omitted as it is not applicable.

Plan Name	The Dayton Power and Light Company Savings Plan for Collective Bargaining Employees
Plan Sponsor EIN	31-0258470
ERISA Plan #	005
Plan Year Ending	December 31, 2013

The required attachment marked with an "X" in the Attachment column is included within the Accountant's Opinion attachment to Sch. H, Part III, Line 3, which consists of the entire audit report issued by the plan's Independent Qualified Public Accountant (IQPA).

Form/Schedule	Line #	Description	Attachment
5500 Sch. H	Line 3	Financial statements used in formulating the IQPA's opinion	X
5500 Sch. H	Line 4i	Schedule of Assets (Held at End of Year)	X
5500 Sch. H	Line 4i	Schedule of Assets (Acquired and Disposed of Within Year)	
5500 Sch. H	Line 4j	Schedule of Reportable Transactions	
5500 Sch. H	Line 4a	Schedule of Delinquent Participant Contributions	

Plan Name	The Dayton Power and Light Company Savings Plan for Collective Bargaining Employees
Plan Sponsor EIN	31-0258470
ERISA Plan #	005
Plan Year Ending	December 31, 2013

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Form/Schedule	Line #	Description	Attachment
5500 Sch. H	Line 3	Financial statements used in formulating the IQPA's opinion	X
5500 Sch. H	Line 4i	Schedule of Assets (Held at End of Year)	X
5500 Sch. H	Line 4i	Schedule of Assets (Acquired and Disposed of Within Year)	
5500 Sch. H	Line 4j	Schedule of Reportable Transactions	
5500 Sch. H	Line 4a	Schedule of Delinquent Participant Contributions	