

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



Department of the Treasury

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)

Open to Public Inspection

OMB No 1545-0047

	artment of th nai Revenue		The organization may hav	e to use a copy of this retu	ım to satısfy st	ate reporting requirem	ents.	Inspection
A	For the 2	010 calenda	year, or tax year beginning	NOV 1, 2010	and ending	OCT 31, 20	11	
В	Check if	C Name of				D Employer ide	ntificat	tion number
	pplicable Address		HORSE SHOW AND	COUNTRY FAIR				
느	change		ATION				270	16777
늗	ichange		siness As	A deleter and A - aA - a - a - a - a - a - a - a - a	10			96777
늗	!retum		nd street (or P 0 box if mail is no STER AVENUE, P. (Room/s	· ·		54-0550
늗	Termin- ated Amended	. ——	wn, state or country, and ZIP +			G Gross receipts \$.0 . 5 (597,357.
F	return Applica-		7, PA 19333-086			H(a) Is this a gro	up retu	
	Itiòn pending		d address of principal officer:W		rT	for affiliates	•	Yes X No
		1809 V	ALUNT STREET, S	UITE 400, PHI	LADELPHI	A, H(b) Are all affiliate	es includ	led? Yes No
	Tax-exem	pt status: 🖸	501(c)(3) 501(c) () ◀ (insert no)	47(a)(1) or 🔲	527 If "No," atta	ch a lis	t. (see instructions)
		► N/A				H(c) Group exen		
		ganization 2	Corporation Trust	Association Other	<u> </u>	Year of formation 199	4 M S	tate of legal domicile ${f PA}$
~ P		Summary			~	TE C EDUCAT	TON	
APR ance			the organization's mission or m	nost significant activities:	CHARITAE	SLE & EDUCAT	TON	<u> </u>
⋖ हूं	I -	UNCTION					-4	
		neck this box	ng members of the governing be	scontinued its operations of	or aisposed of i	more than 25% of its n	asse	54
¥8	1		pendent voting members of the		ine 1h)		4	54
200 S	1		individuals employed in calend		•		5	0
SCANNED APFACTIVITIES & Governance	1		volunteers (estimate if necessa		,		6	0
र्ग है	7 a To	tal unrelated	business revenue from Part VIII	I, column (C), line 12			7a	0.
_	b Ne	et unrelated b	usiness taxable income from Fo	orm 990-T, line 34		,	7ь	0.
	Ì					Prior Year		Current Year
<u>-</u> _			nd grants (Part VIII, line 1h)			859,67		294,647.
Revenu			revenue (Part VIII, line 2g)	0.4 .7.0		5,25	0.	0.
٣		vestment inc	me (Part VIII, column (A), lines	3, 4, and /d)		210,52		4,484. 230,321.
3			Part VIII, column (A), lines 5, 6d addlines 8 through 11 (must ed		no 12)	1,075,44		529,452.
1 [lar amounts paid (Part IX, colur		12)	1,0,3,11	0.	0.
6			or for members (Part IX, colum				0.	0.
<u>\</u>			compensation, employee benef		s 5-10)		0.	0.
Expenses	16a Pr	ofessional fu	ndraising fees (Part IX, column (A), line 11e)			0.	0.
Ď.	b To	otal fundraisin	g expenses (Part IX, column (D)), line 25) 🕨	0.			
ш	1		(Part IX, column (A), lines 11a-			327,51		332,911.
	1		Add lines 13-17 (must equal P			327,51		332,911.
		evenue less e	xpenses. Subtract line 18 from	line 12	<u>·</u>	747,93		196,541.
Net Assets or Find Ralances	20 To	otal assets (Pa	ort X line 16)			Beginning of Current Y 8,846,34		End of Year 8,943,849.
ASS	21 To	•	Part X, line 26)			1,747,94		1,648,907.
Set	22 Ne		ind balances. Subtract line 21 f	rom line 20		7,098,40		7,294,942.
		Signature						
Und	ler penaltie	es of perjury, l	feclare that I have examined this ret	turn, including accompanying	schedules and st	atements, and to the best	of my k	nowledge and belief, it is
true	, correct, a	and complete	Declaration of preparer (other than o	officer) is based on all informat	tion of which pre	parer has any knowledge		
		Signature	of officer		/ / / _ /			
Sig		_		ESIDENT /		Date /	/12	•
He	re		L. MCDEVITT, PR	ESIDENI /	/			
_		rint/Type prepa		Preparer's signature	<u></u>	Date Chec	* X	PTIN
Pai		ALAN C		11/N M 1 24	aekt C	PA 3-26-12 11	employed	'
	parer F	irm's name	GABLE PERITZ M			Firm's Eth		
		irm's address	P.O. BOX 917					
_	L		SPRING HOUSE,			Phone no	(2	<u>15) 628-0500</u>
Ma	<u>y the IRS</u>		return with the preparer shown					X Yes No
032	001 02-22-	11 LHA F	r Paperwork Reduction Act N	lotice, see the separate ir	nstructions.			Form 990 (2010)

DEVON HORSE SHOW AND COUNTRY FAIR

Form 990 (2010)

FOUNDATION Part IV | Checklist of Required Schedules

1 Is the organization described in section 501(kg) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule B, Schedule B, Schedule of Continutors? Jod the organization required to complete Schedule B, Schedule of Continutors? Jod 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 II Section 501(kg) segritariations. Dot the organization engage in lobbying activities, or have a section 501(f) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) (organization that receives membership dues, assessments, or aimilar amounts as defined in Review Procedules 91-91 If 'Yes,' complete Schedule C, Part III Is the organization annihilation or investment of amounts in such funds or accounts' If 'Yes,' complete Schedule D, Part II Is the organization annihilation or investment of amounts in such funds or accounts' If 'Yes,' complete Schedule D, Part II Is the organization maintain annihilation or investment and amounts in such funds or accounts' If 'Yes,' complete Schedule D, Part II Is the organization maintain amount in Part X, ina 21, series as a custodian for amounts not listed in Part X, or profete Schedule D, Part II If the organization's answered or yet of the Indipotation seniores? If 'Yes,' complete Schedule D, Part VI If the organization's answered or yet of the Indipotation seniores? If 'Yes,' complete Schedule D, Part VI If the organization's answered or yet of the Indipotation seniores? If 'Yes,' complete Schedule D, Part VI If the organization report an amount for interiests: order securities in Part X, line 10? If 'Yes,' complete Schedule D, Part VI If the organization report an amount or order seniores to the securities or mark X, line 10? If 'Yes,' complete Schedule D, Part VII If the organization report an amount or order televiside D, Part VII If the organizat				Yes	No
2 Is the organization required to complete Schedule 6, Schedule 6 Contributions? 3 Obd the organization engage in direct or indered political campaign activities on behalf of or in apposition to candidates for public office? If "Yes," complete Schedule C, Part II 3 Section S01(s)(s) organizations and index or index of the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part III 5 Is the organization assection 501(s)(4), 501(s)(5), or 501(s)(6), or 501(s)(6), organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedule 98-197 II "Yes," complete Schedule C, Part III 6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historical areas, or historical streasures, or other similar assets? If "Yes," complete Schedule D, Part IV 8 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 courseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 9 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IV 10 Did the organization answere or any of the following questions is "Yes," then complete Schedule D, Part IV 11 Did the organization and amount for revestments: or program related in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X, III 110 Did the organization report an amount for other habitities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Ye	1			v	
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 I Sections 051(e)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(f)) election in effect during the tax year? If "Yes," complete Schedule C, Part II I Is the organization a section 501(f)(4), 501(e)(6),	_				<u> </u>
public office? If "Yes," complete Schedule C, Part I Section 501(k) agraphizations. Ddt the organization engage in lobbying activities, or have a section 501(k) electron in effect during the tax year? If "Yes," complete Schedule C, Part II I bit the organization associon 501(k) gold (Sig). 300			-	<u> </u>	├─
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(n) election in effect during the tax year? If "Yes," complete Schedule C, Part II is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-189? If "Yes," complete Schedule C, Part II is Did the organization maintain any donor advised funds or any similar funds or accounts where dinors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II is Did the organization relation of rold a conservation easement, including easements to preserve open space, the environment, historical dreas, or historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II is Did the organization report an amount in Part X, ine 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 if "Yes," complete Schedule D, Part IV if "Yes," complete Schedule D, Part IV if "Yes," organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part IV if "Yes," complete Schedule D, Part IV if "Yes," organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IV in Did the organization report an amount for investments - organi	3		,		Y
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6 Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part I 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 Sudding easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Sudding easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Sudding easements or preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part IV 11 If the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part IV 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IV 11 If the organization report an amount for investments - organization assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IV II Did the organization report an amount for westments or program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IV II Did the organization report an amount for westments or the 15 that is 55% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X II Did the organization report an amount for other labilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X II Line 15 that is 51 that is 50 or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part	J		5		x
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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 negotation services? If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII b Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII b Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11b X 11c X 11c X 11d X 11d X 11d X 11e 17d Y 11e X 11d X 11e 17d Y 11e X 11d X			8		X
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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, Parts II and IV 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, Parts III and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
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17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	16				1
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1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)			17		<u> X</u>
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20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	ıa		10		v
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20	•		_	
operate one or more hospitals must attach audited financial statements (see instructions)			∠∪a	<u> </u>	A
	~		20h		
				990	2010)

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States 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 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			7,
_	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			3,7
	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			7.7
	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, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			v
00	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
_	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		x
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
·	director, trustee, or direct or indirect owner? 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	i	х
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)?	35		X
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		}	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		ŀ	
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
		Form	990 (2010)

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Form	990 (2010) FOUNDATION 23-2796	777	Р	age 5
Par			•	
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		İ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		1
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<u></u>
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	-00		1
74	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:			- -
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		1
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
Va	any contributions that were not tax deductible?	6a		Х
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Oa		
	were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).	OD		
, a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	х	1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	10		
·	to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year	10		-23
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
g	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	- ′ '''		
Ü	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	i	İ
9	Sponsoring organizations maintaining donor advised funds.	-		
а	Did the organization make any taxable distributions under section 4966?	9a		1
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	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 10b	i		
11	Section 501(c)(12) organizations. Enter:	1		
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
	amounts due or received from them.)			
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120	<u></u> .	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state?	13a	l	<u> </u>
a	Note. See the instructions for additional information the organization must report on Schedule O.	100	<u> </u>	t
ь	Enter the amount of reserves the organization is required to maintain by the states in which the			
U	organization is licensed to issue qualified health plans			[
_	Enter the amount of reserves on hand	1		1
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	 	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a	 	1
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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management No Yes 54 1a Enter the number of voting members of the governing body at the end of the tax year 54 1b **b** Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х 2 officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision Х 3 of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Does the organization have members or stockholders? 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a 7b b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a X **b** Each committee with authority to act on behalf of the governing body? 8b is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No Х 10a Does the organization have local chapters, branches, or affiliates? 10a b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with those of the organization? Х 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe In Schedule O how this is done 12c Х 13 Does the organization have a written whistleblower policy? 13 Х 14 Does the organization have a written document retention and destruction policy? 14 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? a The organization's CEO, Executive Director, or top management official 15a 15b **b** Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b 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 exempt status with respect to such arrangements? 16b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filled $\triangleright PA$ 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. J 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, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization. PAUL SAYLOR - 610-964-0550 DEVON SHOW GROUNDS, DEVON, PA, DEVON. 19333

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Form **990** (2010)

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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 neither the organization (A)	(B)	orga 	<u> 2011/28</u>) <u>CO</u> C)	пре	ıısd	(D)	(E)	(F)
Name and Title	Average			Pos	itior			Reportable	Reportable	Estimated
	hours per	(c				app	ly)	compensation	compensation	amount of
	week (describe hours for related organizations in Schedule O)		Institutional frustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
WADE L. MCDEVITT	1 00		1							
PRESIDENT	1.00	├—	├_	-			_	0.	0.	0.
ROBERT W. LAMINA	1 00	ĺ			ĺ	ĺ	ĺ	0.	o.	0.
TREASURER C' DONNELL	1.00	-	┢		-	\vdash		0.	<u> </u>	U.
RICHARD M. O'DONNELL SECRETARY	1.00							0.	0.	0.
	1.00									
	-									
		_				-				<u> </u>
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Form	990 (2010) FOUNDATI	ON								23-2	796	<u>777</u>	Ρ	age (
Pa	TVII Section A. Officers, Directors, Tr	ustees, Key E	mple	oyee	s, a	nd l	High	est	Compensated Employ	ees (continued)				
	(A) Name and title	(B) Average hours per				C) itior	1		(D) Reportable compensation	(E) Reportable compensation	n		(F) stimate nount	of
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Кеу етріоуев	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organization (W-2/1099-MIS	s	fi org an	other npensa rom th ganizat d relat anizati	ation le tion ted
							-							
												-		
			_	_			_					_		
				-										
	Sub-total		<u></u>	<u> </u>			 	L	0.		0.			0.
c	Total from continuation sheets to Part V Total (add lines 1b and 1c)	II, Section A					>		0.		0.			0.
2	Total number of individuals (including but recompensation from the organization	not limited to th	ose	liste	ed at		e) wh	no re	eceived more than \$100),000 in reportable	e 		- -	<u> </u>
3	Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s		stee	, ke	y em	ploy	yee,	or h	nighest compensated er	mployee on		3	Yes	No X
4	For any individual listed on line 1a, is the si and related organizations greater than \$15	um of reportab								the organization		4		х
5 Sec	Did any person listed on line 1a receive or rendered to the organization? If "Yes," contion B. Independent Contractors							elat	ed organization or indiv	idual for services		5		Х
1	Complete this table for your five highest co	empensated inc	depe	ende	nt c	ontr	acto	rs t	hat received more than	\$100,000 of com	pensa	tion f	rom	
	(A) Name and business	address							(B) Description of s	services	Co	(C ompe) nsatio	n
				-			•							
								1						
2	Total number of independent contractors (ot lir	mite	d to	thos		sted	above) who received m	nore than				
	\$100,000 in compensation from the organi	zation 🚩					<u>, </u>					orm (990 (2	2010)

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Pa	irt VII	II Statement of Reve	nue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts	1 a	Federated campaigns	1a					
Contributions, gifts, grants and other similar amounts	b	Membership dues	1b					
s, c	С	Fundraising events	1c					
a gi	d	Related organizations	1d					
ξĒ	е	Government grants (contribu	tions) 1e					
it s	f	All other contributions, gifts, grain	nts, and					
Β̈́ξ		similar amounts not included abo	ove 1f	294,647.				
E S	9	Noncash contributions included in line	s 1a-1f \$					
2 2	h	Total. Add lines 1a-1f			294,647.			
				Business Code	•			
ë	2 a							
َه ڲٚ	ь							
S	С							
e a	d							
Program Service Revenue	е							
4	f	All other program service reve	enue					
	g	Total. Add lines 2a-2f		•				
	3	Investment income (including	dıvıdends, ınter	est, and				
		other similar amounts)		>	4,484.			4,484.
	4	Income from investment of ta	ax-exempt bond p	proceeds >				
	5	Royalties		•				
			(ı) Real	(II) Personal				
	6 a	Gross Rents	97,512.					
	b	Less: rental expenses						
	С	Rental income or (loss)	97,512.	,				
	d	Net rental income or (loss)		•	97,512.			97,512.
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses						
	c	Gain or (loss)						
	d	Net gain or (loss)						
nue	8 a	Gross income from fundraising including \$						
Other Revenu		contributions reported on line						
<u>ت</u>		Part IV, line 18	a	200,714.				
the l	ь	Less: direct expenses	b	200,714. 67,905.				
0		Net income or (loss) from fun-		•	132,809.			132,809.
		Gross income from gaming a						······································
		Part IV, line 19	а					
	ь	Less: direct expenses	b					
		Net income or (loss) from gan	ning activities	>				
		Gross sales of inventory, less						
		and allowances	а			•		
	b	Less: cost of goods sold	b			į		
		Net income or (loss) from sale	es of inventory	•				
- 1		Miscellaneous Revenu		Business Code				
1	11 a							
	b							
	c							
	d	All other revenue						
	е	Total. Add lines 11a-11d						
	12	Total revenue. See instructions		▶ ∫	529,452.	0.	0.	234,805.
03200	9 -10							Form 990 (2010)

Part IX Statement of Functional Expenses

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

	All other organizations must com not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
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)(8)				
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):				
a	*				
b	Ĭ	· · · · · · · · · · · · · · · · · · ·			
C	<u> </u>				
	Lobbying Professional fundraising services See Part IV, line 17				
e f	· .				
	Other				
9 12	Advertising and promotion				
13	Office expenses			 .	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	104,412.	104,412.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line				
	24f amount exceeds 10% of line 25, column (A)		ļ		
	amount, list line 24f expenses on Schedule 0)	109,482.	109,482.		
a	DETADLIDGENESIE EO DELION	109,482.	109,482.		
b	GENERAL & ADMINISTRATIV	14,574.	14,574.		
C	GENERAL & ADMINISTRATIV	14,014.	17,3/4.		
d				· · · · · · · · · · · · · · · · · · ·	<u> </u>
e	All other expenses				
f 25	All other expenses Total functional expenses Add lines 1 through 24f	332,911.	332,911.	0.	0.
<u>25</u> 26	Joint costs. Check here I if following SOP	002,011.	332,311.		
20	98-2 (ASC 958-720) Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

032010 12-21-10

Form **990** (2010)

Part X Balance Sheet (A) (B) Beginning of year End of year 1,150,619. 1,341,289. 1 Cash · non-interest-bearing 1 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary 6 employees' beneficiary organizations (see instructions) Assets 7 Notes and loans receivable, net 7 8 Inventories for sale or use Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other 7,825,256. basis. Complete Part VI of Schedule D 10a 7,158,866. 258,419. 7,566,837. 10b 10c b Less: accumulated depreciation 11 11 investments · publicly traded securities 12 12 Investments - other securities. See Part IV, line 11 13 Investments · program-related. See Part IV, line 11 13 14 Intangible assets 14 226,393. 8,943,849. 346,194. 15 Other assets. See Part IV, line 11 15 8,846,349. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 10,367. 9,422 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 1,727,681. 1,639,485. 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 9,900. 25 Other liabilities. Complete Part X of Schedule D 25 1,747,948. ,648,907. Total liabilities. Add lines 17 through 25 26 26 Organizations that follow SFAS 117, check here

X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 6,892,115. 7,135,293. 27 Unrestricted net assets 27 106,286. 59,649. 28 28 Temporarily restricted net assets 100,000. 100,000. 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here
and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 7,098,401. 7,294,942. 33 Total net assets or fund balances 33 8,943,849. 8,846,349. Total liabilities and net assets/fund balances

Form **990** (2010)

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

3ь

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

4947(a)(1) nonexempt charitable trust.

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

2010

Open to Public Inspection

Name of the organization

DEVON HORSE SHOW AND COUNTRY FAIR FOUNDATION

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

Employer identification number 23-2796777

The	organ	ization is not a	a private foundation	because it is: (For lines	1 through	11, check	only one t	oox.)			
1		A church, co	nvention of churche	s, or association of chur	ches desc	ribed in s e	ction 170)(b)(1)(A)(i).		
2				'0(b)(1)(A)(ii). (Attach Sc							
3				tal service organization							
4		A medical res	search organization	operated in conjunction	with a hos	spital desci	rıbed in se	ection 170	(b)(1)(A)(i	ii). Enter t	he hospital's name,
		city, and stat					_				
5		An organizat	ion operated for the	benefit of a college or u	niversity o	wned or op	perated by	a governi	mental un	it describe	ed in
		section 170	(b)(1)(A)(iv). (Comple	ete Part II.)							
6		A federal, sta	ate, or local governm	ent or governmental uni	it describe	d in sectio	n 170(b)(1)(A)(v).			
7		An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general p	oublic described in
		section 170	(b)(1)(A)(vi) . (Comple	te Part II.)							
8		A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II.)					
9		An organizati	on that normally rec	eives: (1) more than 33	1/3% of its	support f	rom contr	ibutions, n	nembersh	ıp fees, ar	nd gross receipts from
		activities rela	ited to its exempt fur	nctions - subject to certa	ain excepti	ons, and (2) no more	e than 33 1	1/3% of its	support	from gross investment
		income and i	unrelated business ta	axable income (less sect	tion 511 ta	x) from bu	sinesses	acquired b	y the orga	anization a	ifter June 30, 1975.
		See section	509(a)(2). (Complete	e Part III.)							
10		An organizati	ion organized and or	perated exclusively to te	st for publ	ıc safety. S	See secti o	on 509(a)(4	1).		
11	X	An organizati	ion organized and or	perated exclusively for the	he benefit	of, to perfo	orm the fu	nctions of,	or to carr	y out the	purposes of one or
		more publicly	y supported organiza	ations described in secti	on 509(a)(1) or section	on 509(a)(2	2) See se c	ction 509	a)(3) . Che	ck the box that
		describes the	e type of supporting	organization and compl	et <u>e lin</u> es 1	1e through	11h.				
		a Type I	l b X	Type II c	с 🗀 Тур	e III - Fund	tionally in	tegrated		d	Type III · Other
е		By checking	this box, I certify tha	it the organization is not	controlled	directly o	r indirectly	by one o	r more dıs	qualified p	persons other than
		foundation m	nanagers and other t	han one or more publicly	y supporte	ed organiza	ations des	cribed in s	ection 50	9(a)(1) or s	section 509(a)(2).
f		If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III		
		supporting of	rganization, check th	nis box							L
g		Since August	t 17, 2006, has the o	rganization accepted ar	ny gift or c	ontribution	from any	of the follo	owing per	sons?	
		(i) A perso	n who directly or ind	irectly controls, either al	lone or tog	ether with	persons o	described i	ın (II) and ((III) below,	
		the gove	erning body of the su	upported organization?							11g(i) X
		(ii) A family	member of a persor	n described in (i) above?)						11g(ii) X
		(iii) A 35% d	controlled entity of a	person described in (i)	or (II) above	e?					11g(iii) X
h		Provide the fe	ollowing information	about the supported or	ganization	(s).					
			·								
(i)	Name	of supported	(ii) EIN	(III) Type of		organization		u notify the	(vi) Is organizati	the col	(vii) Amount of
		inization	, , ,	organization (described on lines 1-9		sted in your		tion in col	l (i) organiz	ed in the	support
				above or IRC section	governing	document?	(i) oi you	r support?	US	7	
				(see instructions))	Yes	No	Yes	No	Yes	No	
		HORSE		_	i						
SHO	W.	& COUNT	23-1575217	LINE 9		X	X		X	<u> </u>	104,443.
								}]))	
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						_				1	
					<u> </u>						·
T-4-1			i i	i	1	F .	I	t .	5	1	104 443

032021 12-21-10

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2010						Pag
Part II Support Schedule for C (Complete only if you checked fails to qualify under the tests	the box on line	5, 7, or 8 of Part I e	or if the organization			
Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total

1	Gifts, grants, contributions, and membership fees received. (Do not						
_	include any "unusual grants.")		_			 	
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
_	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge				 	 	
	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
_	column (f)		**************************************		 		
	Public support. Subtract line 5 from line 4 ction B. Total Support	<u> </u>		<u> </u>	1		
	indar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Amounts from line 4	(a) 2000	(0) 2007	(0) 2000	(0) 2003	(6) 2010	(i) Total
0	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
_	and income from similar sources					 	
9	Net income from unrelated business					1	
	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.)	<u> </u>	<u> </u>			,	
	Total support. Add lines 7 through 10		1	<u> </u>	1	10	
	Gross receipts from related activities					12	
13	First five years. If the Form 990 is fo	-	s first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3)	
Sal	organization, check this box and stor ction C. Computation of Publ		rcentage				
	Public support percentage for 2010 (column (fl)	·	14	%
	Public support percentage for 2010 (Column (1))		15	
	33 1/3% support test - 2010.If the o			n line 13 and line	14 is 33 1/3% or i		
100	stop here. The organization qualifies				14 15 55 175 76 61 1	nore, check this co	^ and
	33 1/3% support test - 2009.If the o		_		line 15 is 33 1/39	% or more, check th	ıs box
•	and stop here. The organization qual					o or thoro, oncon in	▶□
179	10% -facts-and-circumstances tes				13 16a or 16b	and line 14 is 10%	or more.
176	and if the organization meets the "fac						
	meets the "facts-and-circumstances"					art iv now the organ	▶ □
						17a and line 15 in 1	10% or
•	10% -facts-and-circumstances tes						
	more, and if the organization meets the						,
40	organization meets the "facts-and-circ						
10	Private foundation. If the organization	n did not check a	DOX OF THE 13, 10	رم, ا <u>رس, ۱</u> ۲۵, ۱۲		edule A (Form 990	
					301		

Schedule A (Form 990 or 990-EZ) 2010 Part, III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

				_		
(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e	2010	(f) Total
-				İ		
						
					,	
				 	-	
				1		
			-			
			1			
				}		
				1		
	1	<u></u>	1			
(a) 2006	(b) 2007	(=) 2008	(4) 2000	10	12010	(f) Total
(a) 2000	(0) 2007	(6) 2008	(4) 2009	10	2010	tij Total
				 		
					ļ	
	ļ			ļ		
				<u> </u>		
	† 					
				= FO1/s	.)/3\ ======	otion
ne organization:	s iirst, second, thir	u, louren, or time to	an year as a section	או טיי ווע	_{ഗ്യ} ാ organiz	ation,
Cummand Da						
				T T		· · · · · · · · · · · · · · · · · · ·
• • • • • • • • • • • • • • • • • • • •	•	olumn (f))		\vdash		
				16		
ment Incom	e Percentage			, ,		
0 (line 10c, colur	mn (f) divided by lir	ne 13, column (f))		17		
)09 Schedule A,	Part III, line 17			18		
rganization did r	not check the box	on line 14, and line	e 15 is more than	33 1/3%	, and line 1	7 is not
						▶ □
-	- ·		• •		33 1/3%.	and
=						▶ 🗀
GIO HOL CHECK A	DOX OIT IIIIE 14, 19	a, or 130, check th				0 000 F70 000
	he organization Support Pe 8 column (f) of Schedule A, Part ment Incom 0 (line 10c, colum) 0 Schedule A, organization did in d stop here. The organization did in k this box and s	(a) 2006 (b) 2007 (b) 2007 (c) 2006 (b) 2007 (b) 2007 (c) Support Percentage (e 8, column (f) divided by line 13, companion of the compani	(a) 2006 (b) 2007 (c) 2008 (b) 2007 (c) 2008 (c) 2008 (b) 2007 (c) 2008 (c) 2008 (d) 2006 (b) 2007 (c) 2008 (e) 2008 (e) 2008 (f) 4000 (f) 4000 (f) 5000 (f) 5000 (f) 5000 (f) 6000 (f)	(a) 2006 (b) 2007 (c) 2008 (d) 2009 (b) 2007 (e) 2008 (d) 2009 (c) 2008 (d) 2009 (d) 2009 (e) 2008 (d) 2009 (f) 2009 (e) 2008 (d) 2009 (e) 2008 (d) 2009 (f) 2009 (g) 2008 (e) 2009 (g) 2008 (e) 2009 (g) 2008 (e) 2009 (g) 2008 (e) 2009 (g) 2008 (e) 2009 (g) 2009 (e) 2008 (e) 2009 (g) 2009 (e) 2008 (e) 2009 (g) 2009 (e) 2008 (e) 2009 (g) 2009 (e) 2008 (e) 2009 (g) 2009 (e) 2008 (e) 2009 (g) 2009 (e) 2008 (e) 2009 (g) 2009 (e) 2008 (e) 2009 (g) 2009 (e) 2008 (e) 2009 (g) 2009 (e) 2008 (e) 2009 (g) 2009 (e) 2008 (e) 2009 (g) 2009 (e) 2008 (e) 2009 (g) 2009 (e) 2008 (e) 2009 (g) 2009 (e) 2008 (e) 2009 (g) 2009 (e) 2008 (e) 2009 (g) 2009 (e) 2008 (e) 2009 (g) 2009 (e) 2008 (e) 2009 (g) 2009 (e) 2009 (g) 2009 (e) 2009 (g) 2009 (e)	(a) 2006 (b) 2007 (c) 2008 (d) 2009 (e) the organization's first, second, third, fourth, or fifth tax year as a section 501(c) Support Percentage to 8, column (f) divided by line 13, column (f)) Schedule A, Part III, line 15 III to 15 III to 10, column (f) divided by line 13, column (f)) 17 Iganization did not check the box on line 14, and line 15 is more than 83 1/3% d stop here. The organization qualifies as a publicly supported organization granization did not check a box on line 14 or line 19a, and line 16 is more than 8 this box and stop here. The organization qualifies as a publicly supported organization did not check a box on line 14 or line 19a, and line 16 is more than 8 this box and stop here. The organization qualifies as a publicly supported organization did not check a box on line 14, 19a, or 19b, check this box and see instruction did not check a box on line 14, 19a, or 19b, check this box and see instruction	(a) 2006 (b) 2007 (c) 2008 (d) 2009 (e) 2010 he organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organizes a section for the second first second for the second first second for the second first second for the second first second for the second first second for the second first second for the second first

SCHEDULE D

Department of the Treasury

(Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

ZUIUOpen to Public Inspection

Internal Revenue Service

Name of the organization

DEVON HORSE SHOW AND COUNTRY FAIR

Employer identification number 23-2796777

FOUNDATION Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a 2b **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art. Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990. Part X

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

Schedule D (Form 990) 2010

_	rt III Organizations Maintaining C		t Historical Tr	easures or Oth		Seets (continued)
3	Using the organization's acquisition, access					
3		ion, and other record	is, check any or the	ioliowing that are a	significant use	or its conection items
_	(check all that apply):	_		h		
a	Public exhibition	a		hange programs		
ь	Scholarly research	е	Other			
C	Preservation for future generations					5
4	Provide a description of the organization's c	·	-	_		n Part XIV.
5	During the year, did the organization solicit of				ar assets	
	to be sold to raise funds rather than to be m					Yes No
Pa	rt IV Escrow and Custodial Arran		ete if the organizatio	n answered "Yes" to	o Form 990, Pa	rt IV, line 9, or
	reported an amount on Form 990, Pa					
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for contribution	s or other assets no	t included	
	on Form 990, Part X?					Yes No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table:		[<u>-</u>	
					ļ	Amount
C	Beginning balance				1c	······································
d	Additions during the year				1d	
е	Distributions during the year				1e	
f	Ending balance				1f	
2a	Did the organization include an amount on F	orm 990, Part X, line	21?			Yes No
	If "Yes," explain the arrangement in Part XIV	,				
Pa	* V Endowment Funds. Complete	f the organization an	swered "Yes" to For	rm 990, Part IV, line	10	
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years	back (e) Four years back
1a	Beginning of year balance	106,286.	115,782.		<u> </u>	
b	Contributions			114,397.		
c	Net investment earnings, gains, and losses	645.	304.	1,385.		
d	Grants or scholarships					
е	Other expenditures for facilities					
	and programs	6,931.	9,800.			
f	Administrative expenses					
g	End of year balance	100,000.	106,286.	115,782.		
2	Provide the estimated percentage of the year	r end balance held a	s:			
а	Board designated or quasi-endowment		%			
b	Permanent endowment ►	%	_			
С		 %				
3a	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	nd administered for	the organization	n
	by:	_			-	Yes No
	(i) unrelated organizations					3a(i) X
	(ii) related organizations					3a(ii) X
ь	If "Yes" to 3a(II), are the related organizations	s listed as required or	n Schedule R?			3ь
4	Describe in Part XIV the intended uses of the	•				L
Par	t VI Land, Buildings, and Equipm					
	Description of investment	(a) Cost or ot		or other (c) A	ccumulated	(d) Book value
		basis (investm	1 ''	' '	preciation	(4, 200
1a	Land	6,432,4			inner and the same	6,432,419.
	Buildings					
	Leasehold improvements	1,392,8	337.		258,419.	1,134,418.
	Equipment				, 	
	Other					
	Add lines 1a through 1e (Column (d) must e	qual Form 990 Port	Y column (P) line 1	0(a)		7,566,837,

Schedule D (Form 990) 2010

FOUNDATIO

Part VII Investments - Other Securities. Se	ee Form 990, Part X, line	12		
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valuat st or end-of-year mark	
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
<u>(F)</u>				
(G)				
(H)				
<u>(l)</u>				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12)		<u> </u>		<u></u>
Part VIII Investments - Program Related. S	<u>ee Form 990, Part X, line</u> T	13.	(-) Makhad of value	
(a) Description of investment type	(b) Book value	Cos	(c) Method of valuat at or end-of-year mark	
(2)		1		
(3)		<u> </u>		
			· · · · · · · · · · · · · · · · · · ·	
(5)	-		 	
(6)				
		- 		
(9)				
(9) (10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13)				
Part IX Other Assets. See Form 990, Part X, line	15.	_ k		
	Description			(b) Book value
(1)	· · · · · · · · · · · · · · · · · · ·			
(2)	*			
(3)				
(4)		•		· · · · · · · · · · · · · · · · · · ·
(5)				
(6)				·
(7)				
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col (B) line [Part X Other Liabilities. See Form 990, Part X,			>	
1. (a) Description of liability		(b) Amount		
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)	25)			
Total. (Column (b) must equal Form 990, Part X, col (B) line FIN 48 (ASC 740) Footnote in Part XIV, provide the text of the footnote to 2. FIN 48 (ASC 740)	e 25.) the organization's financial state	ements that reports the organize	ation's liability for uncertain	tax positions under
032053	-	-		
12-20-10			Sche	dule D (Form 990) 2010

,,	DEVON HORSE SHOW AND COUNTR	XI F.	AIK			
	dule D (Form 990) 2010 FOUNDATION	A. 154				96777 Page 4
	t XI Reconciliation of Change in Net Assets from Form 990 to	Audit	ed Finar		atements	E20 4E2
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1 1		529,452
2	Total expenses (Form 990, Part IX, column (A), line 25)			2		332,911
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3	-	196,541
4	Net unrealized gains (losses) on investments			4		
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 through 8			9		0.
<u>10</u>	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and			10		196,541.
Pai	t XII Reconciliation of Revenue per Audited Financial Statemer	nts w	ith Reve	nue pe		E20 4E2
1	Total revenue, gains, and other support per audited financial statements				1	529,452
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1				
а	Net unrealized gains on investments	2a				
b	Donated services and use of facilities	2b				
C	Recoveries of prior year grants	2c			_	
d	Other (Describe in Part XIV.)	_2d			—	^
е	Add lines 2a through 2d				2e	520 453
3	Subtract line 2e from line 1				3	529,452
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			_	
b	Other (Describe in Part XIV)	4b			 	0
C	Add lines 4a and 4b				4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	14	Cale Com		5	529,452.
	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents v	vitn Expe	enses p		332,911.
1	Total expenses and losses per audited financial statements				1	332,911
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 . 1				
а	Donated services and use of facilities	2a				
	Prior year adjustments	2b			 {	
C	Other losses	2c	 _			
	Other (Describe in Part XIV.)	2d			\dashv	0.
	Add lines 2a through 2d				2e	332,911
3	Subtract line 2e from line 1				3	332,911.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	,				
	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
	Other (Describe in Part XIV.)	4b			 	0.
	Add lines 4a and 4b				4c	332,911
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) **XIV Supplemental Information	_	 -		5	332,911.
		linna 1	o and 4: De	and IV limit	a 1b and Ob.	Dort V. June 4: Dort
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,					
v, iirie	2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comple	ete inis	part to pro	wide any	additional init	ormation
						
						
			· · · · · ·			

SCHEDULE G

(Form 990 or 990-EZ)
Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

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

2010

Open To Public Inspection

Name of the organization

DEVON HORSE SHOW AND COUNTRY FAIR

Employer identification number

23-2796777 FOUNDATION Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Internet and email solicitations Solicitation of government grants Special fundraising events Phone solicitations C In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or _ No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col (i) Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

Schedule G (Form 990 or 990-EZ) 2010

P	art	of fundraising Events. Complete if the fundraising event contributions and gr				
		or toricialsing event commonions and gr	(a) Event #1	(b) Event #2 BLACK TIE &	(c) Other events	(d) Total events (add col. (a) through
			ART SHOW	BOOTS BALL	4_	col. (c))
e			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	33,004.	93,654.	74,056.	200,714.
	2	Less: Charitable contributions				
	3_	Gross income (line 1 minus line 2)	33,004.	93,654.	74,056.	200,714.
	4	Cash prizes				
ses	5	Noncash prizes				
Oirect Expenses	6	Rent/facility costs				
Direct	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	13,122.	54,116.	667.	
	10	Direct expense summary. Add lines 4 through			>	(67,905)
TE:	11		n (d), and line 10			132,809.
Pa	irt l		answered "Yes" to Form	1990, Part IV, line 19, or re	eported more than	
	1	\$15,000 on Form 990-EZ, line 6a.	T	(b) Pull tabs/instant		(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
~ —	1	Gross revenue			·	
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes %	Yes %	☐ Yes % ☐ No	
	7	Direct expense summary. Add lines 2 through	n 5 ın column (d)		>	()
	8	Net gaming income summary. Combine line 1	, column d, and line 7		.	
		er the state(s) in which the organization opera	_			
		he organization licensed to operate gaming ac No," explain:		states?		Yes No
10a	We	re any of the organization's gaming licenses re	evoked, suspended or te	rminated during the tax v	ear?	Yes No
		Yes, explain:				
	_					
03208	B2 01	-13-11			Schedule G (For	m 990 or 990-EZ) 2010

DEVON HORSE SHOW AND COUNTRY FAIR FOUNDATION Schedule G (Form 990 or 990-EZ) 2010 11 Qoes the organization operate gaming activities with nonmembers? 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? 13 Indicate the percentage of gaming activity operated in: 13a % a The organization's facility 13b **b** An outside facility 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records: Address > No. 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ _____ and the amount of gaming revenue retained by the third party > \$ c If "Yes," enter name and address of the third party: 16 Gaming manager information: Gaming manager compensation ▶ \$ Description of services provided Director/officer Independent contractor 17 Mandatory distributions: a is the organization required under state law to make charitable distributions from the gaming proceeds to Yes retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$ Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (III) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions) FORM 990, SCHEDULE G, PART III DETAIL INFORMATION FOR ADDITIONAL FUNDRAISING EVENTS **REVENUE EXPENSES** INCOME 7,633.18 31.80 7,601.00 1,772.54 635.00 1,138.00

CHRISTMAS TREE SALE COOKBOOKS HOSPITALITY ROOM 28,750.00 0.00 28,750.00 35,900.00 0.00 35,900.00 SPONSORSHIPS

73,388.92 74,055.72 TOTAL 666.80 032083 01-13-11

Schedule I (Form 990) (2010) % × Open to Public . **Employer identification number** 23-2796777 ISE OF GROUND FOR HORSE OMB No 1545-0047 Inspection (h) Purpose of grant or assistance \\ \text{Yes} Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any SHOW recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection non-cash assistance (g) Description of IN-KIND RENT (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. OMPARABLE RENTALS Governments, and Individuals in the United States Grants and Other Assistance to Organizations, 97,512. (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ► Attach to Form 990. (d) Amount of 6,931 cash grant SHOW AND COUNTRY FAIR (c) IRC section 3 Enter total number of other organizations
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. if applicable 501(C)(4) Enter total number of section 501(c)(3) and government organizations 23-1575217 General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? DEVON HORSE FOUNDATION 1 (a) Name and address of organization IN - LANCASTER AVENUE - DEVON, PA DEVON HORSE SHOW & COUNTRY FAIR, or government Name of the organization Department of the Treasury Internal Revenue Service **SCHEDULE 1** (Form 990) Part Parti

DEVON HORSE SHOW AND COUNTRY FAIR

FOUNDATION

Schedule I (Form 990) (2010) FOUNDATION

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

Part III can be duplicated if additional space is needed

Page 2

23-2796777

		1	1		1	1	ŀ	ı	ı	1			1	
(f) Description of non-cash assistance														
(e) Method of valuation (book, FMV, appraisal, other)					additional information.									
(d) Amount of non- cash assistance					line 2, and any other					,				
(c) Amount of cash grant					in required in Part I,									
(b) Number of recipients					le the informatio									
(a) Type of grant or assistance					Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.									

032102 01-13-11

SCHEDULE O (Form 990 or 990-EZ)

,•,

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization DEVON HORSE SHOW AND COUNTRY FAIR FOUNDATION

Employer identification number 23-2796777

FORM 990, PART VI, SECTION A, LINE 2: THE PRESIDENT WADE MCDEVITT IS
MARRIED TO WENDY BROWN WHO IS ON THE BOARD OF DIRECTORS. ALSO, JOHN AND
SANDY NESBITT ARE ON THE BOARD OF DIRECTORS.
FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS REVIEWED BY THE
TREASURER AND THE HEAD OF FINANCE COMMITTEE WITH THE ACCOUNTING FIRM BEFORE
IT IS FILED.
FORM 990, PART VI, SECTION B, LINE 12C: MUST BE COMPLETED ANNUALLY TO
SERVE ON BOARD.
FORM 990, PART VI, SECTION C, LINE 19: NO DOCUMENTS ARE AVAILABLE TO THE
PUBLIC UNLESS REQUESTED.

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

Name of the organization

Part

Related Organizations and Unrelated Partnerships

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

FOUNDATION

2010 Open to Public Inspection

OMB No 1545-0047

Employer identification number 23-2796777

 Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ► Attach to Form 990. DEVON HORSE SHOW AND COUNTRY FAIR

Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete of the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) End-of-year assets <u>e</u> Total income ত্ত Legal domicile (state or foreign country) Primary activity Name, address, and EIN of disregarded entity Part II

(e)	(9	①	ত্ত	(e)	€	(6)	
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 512(b)	(EL)(a)2
of related organization		foreign country)	section	status (if section	entity	entity?	0
				501(c)(3))		Yes	N _o
DEVON HORSE SHOW & COUNTRY FAIR, INC -	FUNDRAISING FOR THE						
23-1575217, P.O. BOX 865, DEVON, PA	BENEFIT OF THE BRYN MAWR						
19333-0865	HOSPITAL THROUGH HORSE	PENNSYLVANIA	501(C)(4)				×
				-			
	1						
	;						
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ns for Form 990.	•			Schedule R (Form 990) 2010	Form 990) 2010

DEVON HORSE SHOW AND COUNTRY FAIR

FOUNDATION

Schedule R (Form 990) 2010

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Part III

Page 2

23-2796777

	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)		(f) Share of total income	(g) Share of Diend-of-year are assets	(h) Disproportionate allocations?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	General or Percentage managing ownership
								!			
											:
											:
Related Orga	Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	s a Corpo y the tax y	oration or Trust (Cor /ear.)	mplete if the or	ganization	answered "Yes"	to Form 990, Part	IV, line 34	because it had o	ne or mor	e related
(a) Name, address, and EIN of related organization	; Z_		(b) Primary activity		(c) Legal domicile Cistate or foreign	(d) Direct controlling entity	(e) Type of entity (C corp., S corp, or trust)	(f) Share of total income		(g) Share of il end-of-year assets	(h) Percentage ownership
				3	(Ann)						
				33					Schedul	e R (Form	Schedule R (Form 990) 2010

DEVON HORSE SHOW AND COUNTRY FAIR FOUNDATION

Schedule R (Form 990) 2010 FOUNDATION

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36)

Page 3

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					ŀ	
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	ş
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?	s with one or more re	elated organizations listed	ın Parts II·IV?			
a Receipt of (i) interest (ii) annuties (iii) royalties or (iv) rent from a controlled entity				1a	┪	×
 Gift, grant, or capital contribution to other organization(s) 				1	×	
c Gift, grant, or capital contribution from other organization(s)				ဗ		×
d Loans or loan guarantees to or for other organization(s)				14		×
e Loans or loan guarantees by other organization(s)				1 e		×
f Sale of assets to other organization(s)				=		×
g Purchase of assets from other organization(s)				19		×
h Exchange of assets				ŧ		×
i Lease of facilities, equipment, or other assets to other organization(s)				;=	×	
(x)====================================					1	>
Lease of facilities, equipment, of other assets from other organization(•			=	+	∢ :
 R Performance of services of membership of fundraising solicitations for other organization(s) I Performance of services or membership of fundraising solicitations by other organization(s) 	nization(s)			¥ =	+	< ×
m Shanno of facilities, equipment, mailing lists, or other assets	(6)			<u> </u>	-	: ×
					1	: >
n Sharing of paid employees				=	1	4
					1]:
				9	1	×
p Reimbursement paid by other organization for expenses				2		×
					''''	
 q Other transfer of cash or property to other organization(s) 				Į,		×
				11		×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete to	is line, including covered	relationships and transaction thresholds			
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved			
(1) DEVON HORSE SHOW & COUNTRY FAIR, INC.	I	97,512.FMV	FMV			
(2)		:				
(5)						
(4)						Ė
(5)				:		
(9)						'
32163 12-21-10	34		Schedule R (Form 990) 2010	Rorm	990) 2	2010

23-2796777

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DEVON HORSE SHOW AND COUNTRY FAIR

Schedule R (Form 990) 2010 FOUNDATION

Part Vf Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

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

(6)	(a)	(၁)	<u> </u>	e)	ε	6	Ξ
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Are all partners section 501(c)(3)	Share of end-of- year assets	Dispropor- tionate	Code V-UBI amount in box 20	General or managing
		country)	Yes No	,	Yes No	Form 1065)	
					-		
						-	
						_	
							_
	_						
							_

Schedule R (Form 990) 2010

2011 DEVON HORSE SHOW FOUNDATION BOARD OF DIRECTORS

٠,

NAMIE.	TITTLE(S)		
Mrs. Deirdre G. Blain	Director		Σ
Mrs. Elizabeth Busch Burke	Director		Σ
Mr. R. Kent Cadwalader	Director		Σ
Mrs. Alfred M. Campbell, III	Director	<u> </u>	Σ
Mrs. Eugene Capaldi	Director	•	Σ
Ms. Alix Coleman	Director	•	Σ
Mr. Henry L. Collins, III	Vice President	•	Σ
Mrs. Eric Corkhill	Director	•	Σ
Mrs. James J. Cowley	Director		Σ
Mr. Rudy C. D'Alessandro	Vice President		Σ
Ms. Darlene DiGorio	Director		Σ
Mrs. Jeffery Estabrook	Director		Σ
Ms. Marlene Brenner Ferguson	Director	•	Σ
Mrs. Alexandra S. Floyd	Director		Σ
Mrs. Andrea Gilbert	Director		Σ

NAMOR	
Mrs. Karin Maynard Mrs. Cornelius McCarthy	Director
Mr. Wade L McDevitt	President Chief Executive Officer
Mrs. Wade L. McDevitt	Director
Mr. Collin F. McNeil	Director
Mr. Arno M. Meyer	Director
Mrs. Jerrold M. Meyers	Director
Mrs. Elizabeth R. Moran	Director
Mr. John J. Nesbitt, III	Vice President
Mrs. John J. Nesbitt, III	Director
Mr. Alfred D. Norris, Jr.	Vice President
Mr. Richard M. O'Donnell	Secretary Vice President
Mr. James F. O'Rourke, III	Vice President
Mr. Richard D. Sanford	Director
Mrs. Robert R. Schwartz	Director

2011 DEVON HORSE SHOW FOUNDATION BOARD OF DIRECTORS

4,,

SANMIE	T.UIJ.E(S)		i J
Mr. Harry R. Gill	Director		Mrs. Ri
Mrs. Joannah H. Glass	Director	l	Mr. Gle
Mrs. Samuel W.M. Griffin	Vice President	<u> </u>	Mrs. Ri
Mrs. John M. Guinan	Director		Mrs. Ro
Ms. Norma K. Hamm	Director	<u>L</u>	Mrs. M
Mrs. Mimi Killian	Vice President	L , , , , , , , , , , , , , , , , , , ,	Mrs. Ju
Mr. Leonard A. King	Chairman	l	Mrs. M
Mr. Robert W. Lamina	Treasurer	l	Mr. Ric
Mrs. J. Thomas Liggett, Jr.	Director		Mrs. Su
Mrs. Lawrence E. MacElree	Honorary Chairman	l	Mr. Co
Mrs. Albert F. Martin	Vice President Director		Mr. Ge
Mr. Timothy Maxwell	Director		Mrs. Jo

NAME	THITLEGS
Mrs. Richard Seidel	Director
Mr. Glen T. Senk	Director
Mrs. Richard P. Shinners, II	Vice President
Mrs. Robert M. Somers	Director
Mrs. Mary von Czoering	Director
Mrs. Judson P. Vosberg	Director
Mrs. Mary Stokes Waller	Director
Mr. Richard G. Webster	Vice President
Mrs. Susan Werner	Director
Mr. Cortright Wetherill, Jr.	Director
Mr. George Weymouth	Director
Mrs. John R. Wright, Jr.	Director

DEVON HORSE SHOW AND COUNTRY FAIR FOUNDATION OCTOBER 31, 2011

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Statements of financial position	2
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Notes to financial statements	7-13
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Independent auditors' report on supplementary information	14
Schedules of sponsorships and events	15



Certified Public Accountants and Business Consultants

INDEPENDENT AUDITORS' REPORT

Nelson C Mishkin Alan C. Wecht Thomas W Masoero Kenneth S. Frebowitz Regina C O'Keefe Frank E. O'Brien Herbert Gable Stanton L. Peritz

To the Board of Directors Devon Horse Show and Country Fair Foundation Devon, Pennsylvania

We have audited the accompanying statements of financial position of Devon Horse Show and Country Fair Foundation (a Pennsylvania Nonprofit Organization) as of October 31, 2011 and 2010, and the related statements of activities and cash flows for the years then ended. These financial statements are the responsibility of the Organization's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Organization's internal control over financial reporting. According, we express no such opinion. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Devon Horse Show and Country Fair Foundation as of October 31, 2011 and 2010, and the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Gable Peritz Mishkin, LLP

December 8, 2011

323 Norristown Road

11000 Lincoln Drive West

P. O. Box 917

Suite 15

Spring House, PA 19477 Marlton, NJ 08053

856.596.2400

215.628.0500 215.628.8756 Fax

856.596.6121 Fax

www.gpmllp.net

DEVON HORSE SHOW AND COUNTRY FAIR FOUNDATION

STATEMENTS OF FINANCIAL POSITION

OCTOBER 31, 2011 AND 2010

ASSETS

	2011	2010
Cash and cash equivalents	\$ 1,150,619	\$ 1,341,289
Due from affiliate	9,700	-
Unconditional promises to give	202,000	327,200
Land	6,432,419	6,432,419
Property improvements, net	1,134,418	726,447
Intangible assets, net	14,693	18,994
Total assets	\$ 8,943,849	\$ 8,846,349
<u>LIABILITIES AND NE</u>	T ASSETS	
Liabilities		
Mortgage payable	\$ 852,710	\$ 993,948
Second mortgage payable	786,775	733,733
Due to affiliate	· -	9,900
Accrued expenses	9,422	10,367
Total liabilities	1,648,907	1,747,948
Net assets		
Unrestricted		
Designated by the Board for debt		
repayment	100,000	100,000
Undesignated	7,035,293	6,792,115
	7,135,293	6,892,115
Temporarily restricted	59,649	106,286
Permanently restricted	100,000	100,000
Total net assets	7,294,942_	7,098,401
Total liabilities and net assets	\$ 8,943,849	\$ 8,846,349

STATEMENTS OF ACTIVITIES

	2011	2010
Unrestricted net assets		
Unrestricted revenues		_
Sponsorships and events	\$ 132,809	\$ 113,009
Rental income	97,512	97,512
Contributions	244,247	774,670
Investment income	3,840	4,947_
Total unrestricted revenues and gains	478,408	990,138
Net assets released from restrictions		
Restrictions satisfied by payments	97,681	34,800
Total unrestricted revenues, gains and		
support	576,089	1,024,938
Expenses		
General and administrative expenses	14,574	16,870
In-kind contribution to Devon Horse Show		
and Country Fair, Inc.	97,512	97,512
Reimbursements to Devon Horse Show		
and Country Fair, Inc.	6,931	9,800
Interest expense	104,412	124,253
Depreciation and amortization	109,482	79,075
Total expenses	332,911	327,510
Increase in unrestricted net assets	243,178	697,428
Temporarily restricted net assets		
Contributions	50.400	05.000
Barn and other improvements Investment income	50,400 644	85,000
		304
Restrictions satisfied by payments	(97,681)	(34,800)
Increase (decrease) in temporarily restricted		
net assets	(46,637)	50,504
Increase in net assets	\$ 196,541	\$ 747,932
		

STATEMENTS OF ACTIVITIES (CONT'D.)

	2011	2010
Changes in net assets		
Unrestricted net assets		
Increase in unrestricted net assets	\$ 243,178	\$ 697,428
Unrestricted net assets, beginning		
of year	6,892,115	6,194,687
Unrestricted net assets, end of year	\$ 7,135,293	\$ 6,892,115
Temporarily restricted net assets		
Increase (decrease) in temporarily	A (40.007)	
restricted net assets	\$ (46,637)	\$ 50,504
Temporarily restricted net assets,		
beginning of year	106,286	55,782
Temporarily restricted net assets,		
end of year	\$ 59,649	\$ 106,286
Permanently restricted net assets Change in permanently restricted		
net assets	\$ -	\$ -
Permanently restricted not exects		
Permanently restricted net assets, beginning of year	100,000	100,000
	<u></u>	
Permanently restricted net assets, end of year	\$ 100,000	\$ 100,000
		+ 100,000

STATEMENTS OF CASH FLOWS

	2011	2010
Cash flows from operating activities		
Increase in net assets	\$ 196,541	\$ 747,932
Adjustments to reconcile increase in		
net assets to net cash provided by		
operating activities		
Rental income	(97,512)	(97,512)
Contributions restricted for future purposes	(50,400)	(85,000)
Depreciation and amortization	109,482	79,075
Imputed interest expense	53,042	49,466
In-kind contribution to Devon Horse Show		
and Country Fair, Inc.	97,512	97,512
(Increase) decrease in assets		
Unconditional promises to give	125,200	(172,200)
Due from affiliate	(9,700)	-
Increase (decrease) in liabilities		
Due to affiliate	(9,900)	4,100
Accrued expenses	(945)	5,617
Net cash provided by operating		
activities	413,320	628,990
Cash flows used in investing activities		
Purchase of property improvements	(513,152)	(268,874)
Cash flows from financing activities		
Proceeds from contributions restricted for		
investment in capital improvements	50,400	85,000
Repayment of debt	(141,238)	(131,710)
Net cash used by financing		
activities	(90,838)	(46,710)

STATEMENTS OF CASH FLOWS

YEARS ENDED OCTOBER 31, 2011 AND 2010

	2011	2010
Net increase (decrease) in cash and cash equivalents	\$ (190,670)	\$ 313,406
Cash and cash equivalents, November 1	1,341,289_	1,027,883
Cash and cash equivalents, October 31	\$ 1,150,619	\$ 1,341,289

Supplementary schedule of non-cash investing and financing activities:

Interest expense of \$53,042 and \$49,466 was imputed and added to the value of the second mortgage for the years ended October 31, 2011 and 2010, respectively.

Supplementary disclosures of cash flow information:

Cash paid during the year for:

	2011		 2010	
Interest	\$	52,401	\$ 69,370	

1. Summary of Significant Accounting Policies

This summary of significant accounting policies of Devon Horse Show and Country Fair Foundation (the Organization) is presented to assist in understanding the Organization's financial statements. The financial statements and accompanying notes are representations of the Organization's management, who are also responsible for their integrity and objectivity. These accounting policies conform to accounting principles generally accepted in the United States of America (GAAP) and have been applied in the preparation of the financial statements.

Nature of Activities

The Organization is a nonprofit Pennsylvania corporation organized to maintain and improve the Devon Show Grounds located in Devon, Pennsylvania.

Basis of Accounting

The financial statements have been prepared on the accrual basis of accounting in accordance with GAAP.

Date of Management Evaluation of Subsequent Events

Management has evaluated subsequent events through December 8, 2011, the date on which the financial statements were issued.

Promises to Give

Contributions are recognized when the donor makes a promise to give to the Organization that is, in substance, unconditional. Contributions that are restricted by the donor are reported as increases in unrestricted net assets if the restrictions expire in the fiscal year in which the contributions are recognized. All other donor-restricted contributions are reported as increases in temporarily or permanently restricted net assets depending on the nature of the restrictions. When a restriction expires, temporarily restricted net assets are reclassified to the unrestricted net assets.

The Organization uses the allowance method to determine uncollectible unconditional promises receivable. The allowance is based on prior years' experience and management's analysis of specific promises made.

Contributions

Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support depending on the existence and/or nature of any donor restrictions.

1. Summary of Significant Accounting Policies (Cont'd.)

Financial Statement Presentation

The Organization is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

Concentration of Credit Risk

The Organization maintains its accounts with two banks. Cash balances with each bank in excess of \$250,000 in interest bearing transaction accounts exceed the insurable limit as allowed by FDIC. Total cash balances in excess of the insurable limit were \$480,887 at October 31, 2011.

Estimates

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Cash and Cash Equivalents

For the purpose of financial reporting, cash and cash equivalents consist of cash on deposit and certificates of deposit with maturity dates within three months of the date of acquisition.

Investment Income

Unrealized gains and losses are included in the change in net assets. Interest income and gains restricted by a donor are reported as increases in unrestricted net assets if the restrictions are met (either by passage of time or by use) in the reporting period in which the interest income is recognized.

Land

Land consists of land parcels and improvements located in Chester County, Pennsylvania which are used by the Devon Horse Show and Devon Country Fair for their annual event and known as the Devon Horse Show grounds. The total purchase price was allocated to land and is recorded at cost.

1. Summary of Significant Accounting Policies (Cont'd.)

Property Improvements

Property improvements are capitalized at cost. Depreciation is provided under the straight-line method over the shorter of the estimated useful lives of the related property improvements or the estimated useful life of the asset.

Maintenance and repairs are expensed as incurred. Additions, betterments, and renewals, unless of minor amounts, are capitalized and depreciated. When property improvements are sold or otherwise disposed of, the cost and related accumulated depreciation accounts are relieved, and the resulting gain or loss is included in operations.

Intangible Assets

Intangible assets consist of loan placement fees and related costs which are amortized over the life of the applicable loan. Amortization is expected to be \$4,300 through 2014 and \$1,792 in the fiscal year ended October 31, 2015.

Income Taxes

The Devon Horse Show and Country Fair Foundation is a nonprofit corporation organized under '501(c)(3) of the Internal Revenue Code and, therefore, has made no provision for federal income taxes in the accompanying financial statements.

The Devon Horse Show and Country Fair Inc.'s Forms 990, Return of Organization Exempt From Income Tax, for the years ending 2011, 2010 and 2009 are subject to examination by the Internal Revenue Service, generally for three years after they are filed.

2. Restricted Cash

Included in cash and cash equivalents as of October 31, 2011 and 2010 are monies restricted for the following purposes:

	2011	2010
Permanent endowment	\$ 100,000	\$ 100,000
Term endowment	•	6,286
Investment in capital improvements	<u>59,649</u>	100,000
	<u>\$ 159,649</u>	\$ 206,286

3. Promises to Give

Unconditional promises to give consist of the following:

	2011	2010
The Devon Horse Show and Country Fair, Inc. Unrestricted promises Restricted to barn improvements	\$ 50,000 137,000 <u>15,000</u>	\$ 100,000 204,700 <u>22,500</u>
Gross unconditional promises to give	<u>\$ 202,000</u>	\$ 327,200
Amounts due in: Less than one year One to five years	\$ 117,000 85,000	\$ 207,350 119,850
	<u>\$ 202,000</u>	<u>\$ 327,200</u>

4. Property Improvements

The summary of property improvements is as follows as of October 31, 2011 and 2010:

	<u>2011</u>	2010
Property improvements Accumulated depreciation	\$ 1,392,837 258,419	\$ 879,684 153,237
Net property improvements	<u>\$ 1,134,418</u>	<u>\$ 726,447</u>

Depreciation expense was \$105,182 and \$74,774 for the years ended October 31, 2011 and 2010, respectively.

5. Contributed Services

No amounts have been reflected in the financial statements for donated services. The Organization generally pays for services requiring specific expertise. However, many individuals volunteer their time and perform a variety of tasks that assist the Organization, but these services do not meet the criteria for recognition as contributed services.

6. Mortgage Payable

The Organization has a mortgage payable in monthly installments of \$7,817 including interest at 5.75% of the outstanding principal balance and is secured by the Horse Show grounds and the guarantee of the Devon Horse Show and Devon Country Fair, Inc. The loan is due March 1, 2030. The amount outstanding at October 31, 2011 and 2010 was \$852,710 and \$993,948, respectively.

Following are maturities of mortgage payable:

Year ending October 31, 2012	\$ 45,971
2013	48,685
2014	51,559
2015	54,603
2016	57,827
Thereafter	594,065

7. Second Mortgage Payable

In April 2005, an individual lent the Organization \$1,000,000 on an interest-free basis to be repaid in April 2015. The loan is secured by a second mortgage on its grounds and was recorded at fair value based upon the market interest rate (7%) at the loan's inception, and the difference was recorded as contribution revenue. The fair market value of the loan at 7% was determined to be \$497,633. The difference of \$502,367 was recorded as contribution revenue in the year received. Interest expense on the note of \$53,042 and \$49,466 has been imputed and recorded for the fiscal years ended October 31, 2011 and 2010, respectively, and has been added to the loan balance. The loan balance at October 31, 2011 and 2010 is \$786,775 and \$733,733, respectively.

8. Due to/from Affiliate

The Devon Horse Show and Country Fair, Inc. owed the Organization \$9,700 as of October 31, 2011. The Organization owed the Devon Horse Show and Country Fair, Inc. \$9,900 as of October 31, 2010.

9. Net Assets - Designated

The Board has approved setting aside \$100,000 annually to be used toward the satisfaction of the mortgage obligations. During the fiscal years ended October 31, 2011 and 2010, the Organization received \$100,000 in cash or promises to give from the Devon Horse Show and Country Fair, Inc. The mortgage is paid down in the year the promise is received.

10. Temporarily Restricted Net Assets

Temporarily restricted net assets are available for the following purposes:

	2011	2010
Barn and capital improvements Prizes in three-gaited saddle horse class	\$ 59,649 	\$ 100,000 <u>6,286</u>
	\$ 59,649	<u>\$ 106,286</u>

11. Endowment Fund

Permanently restricted net assets at October 31, 2011 and 2010 consist of an endowment fund established from a bequest under the will of Walter J. Mooney. The sum of \$100,000 is to be maintained as long as the Organization includes a three-gaited saddle class in its show or until the Organization dissolves. In the event the above happens, the principal balance plus accrued income will be paid to Bryn Mawr Hospital. The income is to be used annually to provide a suitable trophy and/or cash prize in a three-gaited saddle horse class at The Devon Horse Show. As required by generally accepted accounting principles, net assets associated with endowment funds are classified and reported based on the existence or absence of donor-imposed restrictions.

The Organization has adopted investment and spending policies based on the requirements of the State Uniform Management of Institutional Funds Act (SUMIFA). As a result of the Organization's interpretation of SUMIFA, and in accordance with donor restrictions, contributions to the endowment fund are classified as permanently restricted net assets. The historic dollar value of those contributions must be maintained inviolate. Income from the fund is classified with temporarily restricted net assets until the purpose restriction is satisfied. When the purpose restriction is met, the net assets are reclassified to unrestricted net assets.

The donor-restricted endowment fund is invested in a certificate of deposit pursuant to the Organization's investment and spending objectives of subjecting the fund to low investment risk and providing its three-gaited program with current income. The Organization generally expends the endowment fund's investment income for the donor-designated purpose in the fiscal year following receipt.

11. Endowment Fund (Cont'd.)

The composition of endowment net assets for this fund and the changes in endowment net assets as of October 31, 2011 and 2010 are as follows:

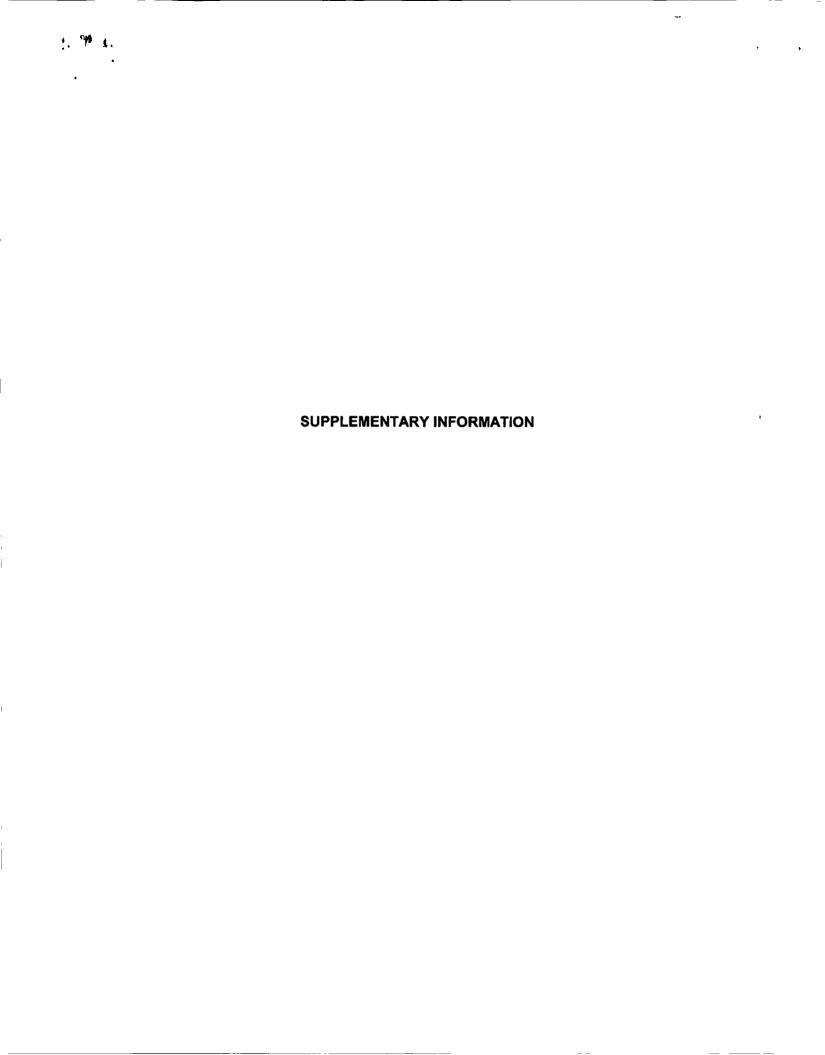
	Included in Temporarily	Included in Permanently	
	Restricted	Restricted	Total
Endowment net assets, November 1, 2009 Assets expended in accordance with	\$ 15,782	\$100,000	\$115,782
the endowment objective Investment income	(9,800) 304	<u>-</u>	(9,800) <u>304</u>
Endowment net assets, October 31, 2010 Assets expended in accordance with	6,286	100,000	106,286
the endowment objective Investment income	(6,931) <u>645</u>	-	(6,931) <u>645</u>
Endowment net assets, October 31, 2011	<u>\$</u>	<u>\$100,000</u>	<u>\$100,000</u>

12. Related Party Transactions

The Organization reimbursed Devon Horse Show and Country Fair, Inc. \$6,931 and \$9,800 during the years ended October 31, 2011 and 2010, respectively as reimbursement of the prize monies in the three-gaited saddle horse class. The Organization and Devon Horse Show share a common Board of Directors.

The Devon Horse Show and Country Fair, Inc. uses the grounds owned by the Organization to maintain its operations. The parties have entered into a ten-year lease which expires February 2015 with annual lease payments of \$97,512. The Organization has waived the collection of this rent. As a result, the Organization has recorded rental income and a related in-kind contribution expense of \$97,512 for the use of the property for both years ended October 31, 2011 and 2010.

The Devon Horse Show and Country Fair, Inc. contributed \$100,000 each year to be used for the satisfaction of the mortgage obligations (See Note 6) for the years ended October 31, 2011 and 2010. The Devon Horse Show and Country Fair, Inc. contributed an additional \$13,944 for gallery renovations in the year ended October 31, 2010.





Certified Public Accountants and Business Consultants

Nelson C. Mishkin Alan C. Wecht Thomas W. Masoero Kenneth S. Frebowitz Regina C. O'Keefe Frank E. O'Brien Herbert Gable Stanton L. Peritz

INDEPENDENT AUDITORS' REPORT ON SUPPLEMENTARY INFORMATION

To the Board of Directors Devon Horse Show and Country Fair Foundation Devon, Pennsylvania

We have audited the financial statements of the Devon Horse Show and Country Fair Foundation as of and for the years ended October 31, 2011 and 2010, and have issued our report thereon dated December 8, 2011, which contained an unqualified opinion on those financial statements. Our audit was performed for the purpose of forming an opinion on the financial statements as a whole. The schedules of sponsorships and events is presented for the purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Gable Peritz Mishkin, LLP

December 8, 2011

323 Norristown Road P. O. Box 917

Suite 15

Spring House, PA 19477

215.628.0500 215.628.8756 Fax Marlton, NJ 08053 856.596.2400 856.596.6121 Fax

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1. 16.

DEVON HORSE SHOW AND COUNTRY FAIR FOUNDATION

SCHEDULES OF SPONSORSHIPS AND EVENTS

	2011			2010	
Art show	\$	19,882	\$	15,480	
Black Tie & Boots Ball		39,538		37,166	
Christmas tree sale		7,601		7,655	
Cookbooks		1,138		4,413	
Hospitality room		28,750 .		26,855	
Saddlebred		-		3,400	
Sponsorships		35,900		18,040	
	\$	132,809	<u>\$</u>	113,009	

Form **8868**

(Rev. January 2011)

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

Form 8868 (Rev. 1-2011)

• If you a	If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box						
If you a	re filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of this	form).	•		
Do not c	omplete Part II unless you have already been granted a	an automa	itic 3-month extension on a previously fi	led Fo	rm 8868.		
	c filing (e-file). You can electronically file Form 8868 if	•		•	•		
	o file Form 990-T), or an additional (not automatic) 3-mo						
of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain							
Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form,							
	irs.gov/efile and click on e-file for Charities & Nonprofits						
Part I	Automatic 3-Month Extension of Time						
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete							
Part I only					•		
	orporations (including 1120-C filers), partnerships, REM ome tax returns.	IICs, and t	rusts must use Form /004 to request ar	exter	nsion of time		
Type or	De or Name of exempt organization				loyer identification	number	
print	DEVON HORSE SHOW AND COUNTRY FAIR				1		
	FOUNDATION				23-2796777		
file by the due date for iling your	ate for Number, street, and room or suite no. If a P.O. box, see instructions.						
eturn See	n See						
	DEVON, PA 19333-0865						
_						(ATT)	
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)			0 1	
Application		Return	Application			Return	
s For		Code	Is For			Code	
Form 990			Form 990-T (corporation)			07	
Form 990-BL			Form 1041-A			08	
Form 990-EZ		01	Form 4720	n 4720			
Form 990-PF		04	Form 5227			10	
Form 990-T (sec. 401(a) or 408(a) trust)		05	Form 6069			11	
Form 990-T (trust other than above)		06	Form 8870			12	
	PAUL SAYLOR						
The books are in the care of ▶ DEVON SHOW GROUNDS, DEVON, PA - DEVON, PA 19333							
Telephone No. ► 610-964-0550 FAX No. ►							
If the organization does not have an office or place of business in the United States, check this box							
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this							
Dox Lift is for part of the group, check this box Light and attach a list with the names and EINs of all members the extension is for.							
1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until							
	JUNE 15, 2012 , to file the exempt organization return for the organization named above. The extension						
IS TO	is for the organization's return for:						
	calendar year or OCF 21 2011						
► X tax year beginning NOV 1, 2010 , and ending OCT 31, 2011 .							
2 If th	If the tax year entered in line 1 is for less than 12 months, check reason:						
- "	If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period						
Change in accounting period							
3a If th	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.				\$	0.	
b If this application is for Form 990-PF, 990-T, 4720, or 6069, e		enter anv	any refundable credits and				
	mated tax payments made. Include any prior year overp			3ь	\$	0.	
	ance due. Subtract line 3b from line 3a. Include your pa						
	Ising EFTPS (Electronic Federal Tax Payment System).	-		3с	\$	0.	
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.							

For Paperwork Reduction Act Notice, see Instructions.