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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)

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

OMB No 1545-0047 Open to Public Inspection

A F	or the 2	012 calendar year, or tax year beginning $NOV \ 1$, $\ 2012$ and endin	g OCT 31, 201	.3
Вс	heck if	C Name of organization	D Employer iden	tification number
а	pplicable	DEVON HORSE SHOW AND COUNTRY FAIR	, -	
	Address change	FOUNDATION		
	Name change	Doing Business As	23-	-2796777
\vdash	Initial return	Number and street (or P O box if mail is not delivered to street address) Room,		
\neg	Termin-	LANCASTER AVENUE, P.O. BOX 865		964-0550
\Box	Amended return	City, town, or post office, state, and ZIP code	G Gross receipts \$	614,086.
F	Applica-	DEVON, PA 19333-0865	H(a) Is this a group	
	pending	F Name and address of principal officer:SARAH COXE LANGE	for affiliates?	Yes X No
		PO BOX 865, DEVON, PA 19333	H(b) Are all affiliates	
II	ax-exem	pt status X 501(c)(3) 501(c) ()	1 ' '	n a list. (see instructions)
		▶ N/A	H(c) Group exemp	
				M State of legal domicile PA
		ummary		
		efly describe the organization's mission or most significant activities: CHARITA	BLE & EDUCATI	ONAL
Activities & Governance		UNCTIONS		
Ē	_	eck this box I if the organization discontinued its operations or disposed of	more than 25% of its net	assets
Š		imber of voting members of the governing body (Part VI, line 1a)	1	3 52
ğ		imber of independent voting members of the governing body (Part VI, line 1b)	F	4 52
୯ ୪		tal number of individuals employed in calendar year 2012 (Part V, line 2a)	 	5 0
iţie		tal number of volunteers (estimate if necessary)	-	6 0
çį		tal unrelated business revenue from Part VIII, column (C), line 12	F-	7a 0.
ď	1	et unrelated business taxable income from Form 9907 The 4 pg 85	F	7b 0.
	3 110	REVEUO	Prior Year	Current Year
4	8 Cc	ontributions and grants (Part VIII, line 1h)	379,135	
Revenue		ogram service revenue (Part VIII, line 2g)		0.
Š	1	vestment income (Part VIII, column (A), lines (A) and 7d)	1,344	
, æ	1	her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c and 10)	253,752	305,566.
,		tal revenue · add lines 8 through 11 (must equal Part VIII-column (A)-line 12)	634,231	
		ants and similar amounts paid (Part IX, column (A), lines 1-3)	-	0.
	1	enefits paid to or for members (Part IX, column (A), line 4)	C	
s		laries, other compensation, employee benefits (Part IX, column (A), lines 5·10)	C	
Se	l	ofessional fundraising fees (Part IX, column (A), line 11e)		0.
Expenses		otal fundraising expenses (Part IX, column (D), line 25)		
Щ		her expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	400,884	498,213.
	1	etal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	400,884	
	1	evenue less expenses. Subtract line 18 from line 12	233,347	
es es	10 110	volue loss expenses. Subtract line to from line 12	Beginning of Current Ye	
Net Assets or Fund Balances	20 To	otal assets (Part X, line 16)	10,093,796	
Ass J Ba	21 To	otal liabilities (Part X, line 26)	2,565,507	
Ę <u>Ę</u>	22 Ne	et assets or fund balances. Subtract line 21 from line 20	7,528,289	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Signature Block)		·
		es of perjury, I declare that I have examined this return, including accompanying schedules and s	tatements, and to the best o	f my knowledge and belief, it is
		and complete. Baclaration of prepared other than officer) is based on all information of which pri		,
		July / X Jours /	8-1	10-14
Sig	n J	Signature of officer	Date	
Her	١.	RICHARD M. O'DONNELL, TREASURER		
	` 	Type or print name and title		
	P	rint/Type preparer's name Preparer's signature	Date Check	X PTIN
Paid		LAN C. WECHT	7 08/05/14 selfer	P00148887
	<u> </u>	irm's name GABLE PERITZ MISHKIN, LLP	Firm's EIN	
		irm's address P.O. BOX 917		
	· ['	SPRING HOUSE, PA 19477	Phone no	(215) 628-0500
May	the IRS	discuss this return with the preparer shown above? (see instructions)	,	X Yes No
	- · · · · · · · · ·	1 HA For Panenwork Reduction Act Notice see the senarate instructions		Form 990 (2012)

				
				
		······································		
				
				- <u></u>
4d	Other program services (Describe in Sc	hedule O.)		
	(Expenses \$	Including grants of \$) (Revenue \$)
4e	Total program service expenses	498,213.		

232002 12-10-12 Form 990 (2012)

Form	990 (2012) FOUNDATION 23-2796	777	р	age 3
	t IV Checklist of Required Schedules	<i>, , ,</i>	<u> </u>	age o
-	4		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		163	140
•	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	<u> </u>		
•	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did 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 II	4		x
5	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 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	Ť		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	, ,,,		
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If "Yes," complete Schedule D,			1
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	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	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		١	İ
_	Schedule D, Parts XI and XII	12a	X	<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			v
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	-	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	446		Х
45		14b	<u> </u>	A
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	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15	 	
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	-10		1
• •	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	'''	 	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	

Form **990** (2012)

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20a

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

complete Schedule G, Part III

FOUNDATION

Page 4 Part IV Checklist of Required Schedules (continued) No Yes 21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the X United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, Х 22 column (A), line 2? If "Yes," complete Schedule I, Parts I and III 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 Х 23 Schedule J 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 X Schedule K. If "No", go to line 25 24a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a Х disqualified person during the year? If "Yes," complete Schedule L, Part I 25a 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 X Schedule L, Part I 25b 26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified X person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member Х 27 of any of these persons? If "Yes," complete Schedule L, Part III 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 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X contributions? If "Yes," complete Schedule M 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 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 X 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х 33 sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V. line 1 34 X Х 35a 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity 35ь 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? Х If "Yes," complete Schedule R, Part V, line 2 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization X 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

> Х Form 990 (2012)

Note. All Form 990 filers are required to complete Schedule O

Form 990 (2012) FOUNDATION

Part V Statements Regarding Other IRS Filings and Tax Compliance

 '	Check if Schedule O contains a response to any question in this Part V				
				Yes	No
12	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 0			
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0			į
	Did the organization comply with backup withholding rules for reportable payments to vendors and re				l
·	(gambling) winnings to prize winners?	,	1c]	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1			
	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 return		2b		
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	,	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a		4a		X
Ь	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 A	Accounts.			ĺ
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e organization solicit			
	any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribute	ions or gifts			
	were not tax deductible?		6b_		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).				1
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	vices provided to the payor?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	X	—
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required	_ :		v
	to file Form 8282?	l I	7c	ļ	X
d	If "Yes," Indicate the number of Forms 8282 filed during the year	7d	-		v
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri		7f_		<u> </u>
9	If the organization received a contribution of qualified intellectual property, did the organization file Followship of the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7g 7h		_
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D				
8	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at		8	İ	
9	Sponsoring organizations maintaining donor advised funds.	any timo daring the year	 		
	Did the organization make any taxable distributions under section 4966?		9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
а		10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b]		
11	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholders	11a	1		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			1]
	amounts due or received from them.)	11b	1		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a	ļ	ļ
Ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			ļ	
а	Is the organization licensed to issue qualified health plans in more than one state?		13a	ļ <u> </u>	ļ
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the	ا بمدا			
	organization is licensed to issue qualified health plans	13b	-		
	Enter the amount of reserves on hand	13c	44-		X
	Did the organization receive any payments for indoor tanning services during the tax year?	(n O	14a	 	+^-
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e U		200	(2012)
			1 0111		15015)

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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.

	to line da, ob, or rob below, describe the disamistances, processes, or charges in estimated	. 000 .				X	
	Check if Schedule O contains a response to any question in this Part VI		 ;			<u> </u>	
Sec	tion A. Governing Body and Management	-			¥ [
		1.	= 5		Yes	No	
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	52				
	If there are material differences in voting rights among members of the governing body, or if the governing						
_	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		52				
ь	Enter the number of voting members included in line 1a, above, who are independent	1b	· 				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with	any otner	2	Х		
_	officer, director, trustee, or key employee?			-			
3	Did the organization delegate control over management duties customarily performed by or under the	ne aire	ct supervision	3		x	
	of officers, directors, or trustees, or key employees to a management company or other person?	000	on filed?	4		X	
4	Did the organization make any significant changes to its governing documents since the prior Form		as med r	5		X	
5	Did the organization become aware during the year of a significant diversion of the organization's as	seisr		6		X	
6	Did the organization have members or stockholders?	nnoint	one or				
/a	Did the organization have members, stockholders, or other persons who had the power to elect or a	thhour	one or	7a		Х	
	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members,	etackh	olders or	10			
ь		SIOCKII	olders, or	7b		Х	
	persons other than the governing body?	ar hv ti	ia followina				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year.	ai uy u	ie ioliowing	8a	х		
a	The governing body? Each compittee with outbority to get an healt of the governing body?			8b	X		
b	Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-	ached	at the	- 55			
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	acried	at tile	9		Х	
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	Revenu	e Code)				
<u> </u>	tion B. 1 onoies (This decilor B requests information about policies not requires by the internal	1010/10	0 0000 /		Yes	No	
10a	Did the organization have local chapters, branches, or affiliates?			10a		X	
	If "Yes," did the organization have written policies and procedures governing the activities of such of	chapte	s. affiliates.	100			
_	and branches to ensure their operations are consistent with the organization's exempt purposes?		-,	10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	dv befo	ore filing the form?	11a		Х	
b		,					
	12a Did the organization have a written conflict of interest policy? If "No," go to line 13						
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to cor	ıflıcts?	12a 12b	X		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "						
_	In Schedule O how this was done	•		12c	X		
13	Did the organization have a written whistleblower policy?			13	X		
14	Did the organization have a written document retention and destruction policy?			14	X		
15	Did the process for determining compensation of the following persons include a review and approx	al by ı	ndependent		"		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision'						
а	The organization's CEO, Executive Director, or top management official			15a		X_	
b	Other officers or key employees of the organization			15b		X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			i i			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement v	with a				
	taxable entity during the year?			16a		X	
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ate its	participation				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization	anızatı	on's				
	exempt status with respect to such arrangements?			16b			
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ▶PA	_					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Sec	tion 501(c)(3)s only)	avaılat	ole		
	for public inspection. Indicate how you made these available. Check all that apply.						
	Own website Another's website X Upon request Other (explain		•				
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, or	conflict	of interest policy, an	ıd finar	ncıal		
	statements available to the public during the tax year.						
20	State the name, physical address, and telephone number of the person who possesses the books	and red	cords of the organiza	ition:	-		
	PAUL SAYLOR - 610-964-0550						
-	DEVON SHOW GROUNDS, DEVON, PA, DEVON, PA 19333						
23200				Forn	n 990	(2012)	

Form 990 (2012) 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.

(A) Name and Title	(B) Average hours per week	(C) Position (do not check more than obox, unless person is bott officer and a director/trus				than	one h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustæ	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) WADE L. MCDEVITT	1.00	1								
PRESIDENT	1 00	_			<u> </u>			0.	0.	0.
(2) ROBERT W. LAMINA	1.00	┨						0.	0.	^
TREASURER (3) RICHARD M. O'DONNELL	1.00	\vdash						0.	· · · · ·	0.
VICE-PRESIDENT & SECRETARY	1.00	1						0.	0.	0.
THE PROPERTY OF THE PROPERTY O								•		
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Form 990 (2012)

	990 (2012) FOUNDATI									23-27	96	<u> 177</u>	Pa	age 8	
Par	VII Section A. Officers, Directors, Tru	stees, Key Emp	oloy	ees	ane	d Hi	ghe	st C	ompensated Employe	es (continued)			(F)		
	(A) Name and title	(B) Average hours per week	(do box offic	not c	Pos heck ss pe	C) Ition more rson		one h an	(D) Reportable compensation from	(E) Reportable compensation from related	Reportable E compensation a from related				
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		tion e ion ed ons			
								ļ							
					_			_							
	Sub-total Total from continuation sheets to Part	VII, Section A					>		0.		0.			0.	
<u>d</u> 2	Total (add lines 1b and 1c) Total number of individuals (including but	not limited to th	ose	liste	ed a	bov	e) w	ho r	0 .	0.000 of reportable	0. e			0.	
	compensation from the organization												Yes	0 No	
3	Did the organization list any former office		ıste	e, ke	ey eı	mplo	oyee	, or	highest compensated e	mployee on		3		х	
4	line 1a? If "Yes," complete Schedule J for For any individual listed on line 1a, is the	sum of reportable								the organization		4		X	
5	and related organizations greater than \$1 Did any person listed on line 1a receive o	r accrue comper	nsat	tion	from	an	y un			idual for services				X	
Sec	rendered to the organization? If "Yes," contion B. Independent Contractors	mpiete Schedui	e J i	ror s	ucn	per	son			· · · · · · · · · · · · · · · · · · ·	J	5_			
1	Complete this table for your five highest of the organization. Report compensation for										pens	ation f	rom		
	(A) Name and busines			ON:					(B) Description of		С	(Compe	c) nsatio	n	
							-								
2	Total number of independent contractors \$100,000 of compensation from the orga		ot l	ımıte	ed to		ose I	ste	d above) who received r	nore than					
									.			Form	990	(2012)	

FOUNDATION

,	1	***	Check if Schedule O cont		to any question i	n this Part VIII			
	 -		Check if Confedence of Confe	ains a response	to any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1 :	a I	Federated campaigns	1a					
ara our	1	Ы	Membership dues	1b					
s, C Am		c I	Fundraising events	1c					
Gift lar		d l	Related organizations	1d					
Contributions, Gifts, Grants and Other Similar Amounts		e (Government grants (contribut	ions) 1e					
tio S I	1	f /	All other contributions, gifts, gran	its, and					
ğğ		9	similar amounts not included abo	ve 1f	243,388.				
dat	,	g :	Noncash contributions included in lines	: 1a-1f \$					
<u>ರ ೯</u>	ı	h '	Total. Add lines 1a-1f		>	243,388.			
					Business Code				,
9	2	a _	_						
و چ	!	b .							
en S		c _							
e a		d							
Program Service Revenue		e _							
<u> </u>	1	f /	All other program service reve	enue					
		g '	Total. Add lines 2a-2f		>				
	3	1	Investment income (including	dividends, inter-	est, and	,			
		(other similar amounts)		▶	2,591.			2,591.
	4	1	Income from investment of ta	x-exempt bond p	oroceeds 🕨				
	5	١	Royalties			·····			
				(ı) Real	(ii) Personal				
	6	a (Gross rents	97,512.					
		b l	Less: rental expenses	0.					
		c l	Rental income or (loss)	97,512.					
		d l	Net rental income or (loss)		<u> </u>	97,512.		***************************************	97,512.
	7	a (Gross amount from sales of	(i) Securities	(ii) Other				
		i	assets other than inventory						
	1	b I	Less: cost or other basis						
		6	and sales expenses						
		C	Gain or (loss)		<u> </u>				
	,	d i	Net gain or (loss)						
anne	8		Gross income from fundraisin including \$	-					
ě		(contributions reported on line	1c). See					
Other Reven		-	Part IV, line 18	а	270,595.				
Ě		b I	Less: direct expenses	b	62,541.				
J		c I	Net income or (loss) from fund	draising events		208,054.			208,054.
	9	a	Gross income from gaming a	ctivities. See					
		١	Part IV, line 19	а					
		b	Less: direct expenses	b					
		c I	Net income or (loss) from gan	ning activities	<u> </u>				
	10	а	Gross sales of inventory, less	returns					
		;	and allowances	a					
		b I	Less: cost of goods sold	b					
		Ç	Net income or (loss) from sale	s of inventory	•				
			Miscellaneous Revenu	ie	Business Code				
	11	a .							
		b .							
		c .							
			All other revenue						
			Total. Add lines 11a-11d		>				1 202
20000	12		Total revenue. See instructions			551,545.	0.	0	
23200	19								Form 990 (2012)

rait in Statement of Functional Expenses	Part IX	Statement of Functional Expenses
--	---------	----------------------------------

Section	on 501(c)(3) and 501(c)(4) organizations must comp			mplete column (A).	
	Check if Schedule O contains a respons	se to any question in this (A)	B Part IX (B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the	İ			
	United States. See Part IV, lines 15 and 16			444	
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	·			
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				-
11	Fees for services (non-employees):				
a	Management				
b	Legal				
ر د	Accounting				
d	Lobbying Professional fundamental convices. See Part IV. line 17		-,	··	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees Other. (If line 11g amount exceeds 10% of line 25,				
g	column (A) amount, list line 11g expenses on Sch 0)				
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	139,893.	139,893.		
21	Payments to affiliates	•	•		
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	DEPRECIATION & AMORTIZA	214,226.	214,226.		
ь	CONTRIBUTION TO DEVON H	107,682.	107,682.		
С	GENERAL & ADMINISTRATIV	36,412.	36,412.		
d					
е	All other expenses		· · · · · · · · · · · · · · · · · · ·		
25	Total functional expenses. Add lines 1 through 24e	498,213.	498,213.	0.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
_	Check here if following SOP 98-2 (ASC 958-720)			<u>, </u>	1
					Form 990 (2012)

Par	tΧ	Balance Sheet	·····		
	,	Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	817,874.	1	966,004.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	<u> </u>
	5	Loans and other receivables from current and former officers, directors,			
1		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L	·····	5	
	6	Loans and other 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			
		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	<u> </u>
Assets	7	Notes and loans receivable, net		7	
Ass	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D Less: accumulated depreciation 10a 9,673,906. 10b 620,804.			
	b	Less: accumulated depreciation 10b 620,804.	9,074,758.	10c	9,053,102
	11	Investments - publicly traded securities	<u> </u>	11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	150 500
	15	Other assets. See Part IV, line 11	201,164.	15	179,639
	16	Total assets. Add lines 1 through 15 (must equal line 34)	10,093,796.	16_	179,639 10,198,745 13,785
l	17	Accounts payable and accrued expenses	13,052.	17	13,785
	18	Grants payable		18	
	19	Deferred revenue		19	
-	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees,			
Liabilities		key employees, highest compensated employees, and disqualified persons.			
		Complete Part II of Schedule L	0.540.004	22	2 514 000
	23	Secured mortgages and notes payable to unrelated third parties	2,543,304.	23	2,514,089
	24	Unsecured notes and loans payable to unrelated third parties		24_	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of	0 151		00 250
		Schedule D	9,151.		89,250
	26	Total liabilities. Add lines 17 through 25	2,565,507.	26	2,617,124
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
ses		complete lines 27 through 29, and lines 33 and 34.	7 202 467		7 462 712
and	27	Unrestricted net assets	7,392,467.		7,463,712
Bal	28	Temporanly restricted net assets	35,822.	28_	17,909
5	29	Permanently restricted net assets	100,000.	29	100,000
교		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐			
Net Assets or Fund Balances		and complete lines 30 through 34.			
sets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ĕ	32	Retained earnings, endowment, accumulated income, or other funds	7 500 000	32	7 501 601
~	33	Total net assets or fund balances .	7,528,289.		7,581,621
	34	Total liabilities and net assets/fund balances	10,093,796.	34	10,198,745 Form 990 (2012

Form **990** (2012)

-om	990 (2012) FOUNDATION	<u> 23-21</u>	<u> </u>	ray	<u> </u>
	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,5	
2	Total expenses (must equal Part IX, column (A), line 25)	2		8,2	
3	Revenue less expenses Subtract line 2 from line 1	3			32.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,52	8 <u>,2</u>	<u>89.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	7 , 58	1,6	<u>21.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				<u>Ш</u>
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	if "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				ĺ
b	Were the organization's financial statements audited by an independent accountant?		2b	X	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	redule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ngle Audit			
	Act and OMB Circular A-133?		3a		X
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ured audit			
	or sudito, explain why in Schedule O and describe any steps taken to undergo such audits		3h		I

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

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

DEVON HORSE SHOW AND COUNTRY FAIR

OMB No 1545-0047

Inspection

Yes

11g(i)

11g(ii)

11g(iii)

Employer identification number

23-2796777 FOUNDATION Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: I An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 X An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h **b** X Type II c ____ Type III - Functionally integrated d ____ Type III - Non-functionally integrated e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than

foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g

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

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

h	Provide the	following	Information	about	the supported	organization(s).

(i) Name of supported organization	(li) EIN	(described on lines 1-9 above or IRC section	(iv) is the organization (v) Did you notify the in col (i) listed in your governing document? (i) of your support?		described on lines 1-9 in col (i) listed in your organization in col (i) organization in col (i) organization in col (i) organization in col (i) organization in col (i) organization in col (i) organization in col (i) organization in col (ii) organization in col (ii) organization in col (ii) organization in col (ii) organization in col (iii) organization		(i) organization in col		(vii) Amount of monetary support
		(see instructions))	Yes	No	Yes	No	Yes	No	
DEVON HORSE									
SHOW & COUNT2	3-1575217	LINE 9		Х	Х		X		150,063.
				<u> </u>	ļ				
							1		
				1				<u> </u>	<u> </u>
				-				-	
Total 1						<u>.</u>			150,063.

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

Schedule A (Form 990 or 990-EZ) 2012

232021 12-04-12

Schedule A (Form 990 or 990-EZ) 2012

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

	(Complete only if you checked fails to qualify under the tests			-	n failed to qualify	under Part III. If the	e organization
Sec	tion A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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			<u> </u> _			
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)	·····	,-,,-				
	Public support. Subtract line 5 from line 4			<u> </u>	<u> </u>		
	ction B. Total Support	T				T	1
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4						
8	Gross income from interest,					İ	
	dividends, payments received on						
	securities loans, rents, royalties			İ			
	and income from similar sources					ļ	
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carned on						
10							
	or loss from the sale of capital						
44	assets (Explain in Part IV.)		<u> </u>	 			
11			<u> </u>	<u> </u>	<u> </u>	12	1
	Gross receipts from related activities,			rd fourth or fifth t	av vaar oo a caatu		
13	First five years. If the Form 990 is for organization, check this box and stop	_	5 m5t, 5econd, tm	ia, iourai, or mai c	ax year as a section	JII 30 I (C)(3)	
Sec	ction C. Computation of Publ		rcentage				
	Public support percentage for 2012 (column (fl)		14	%
	Public support percentage from 2011	• • • • • • • • • • • • • • • • • • • •	•			15	%
	33 1/3% support test - 2012. If the			on line 13, and line	14 is 33 1/3% or	more, check this b	ox and
	stop here. The organization qualifies	as a publicly supp	orted organization	n			. ▶□
t	33 1/3% support test - 2011. If the	organization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/39	% or more, check t	his box
	and stop here. The organization qual	lifies as a publicly	supported organiz	zation			▶ □
17a	10% -facts-and-circumstances tes	t - 2012. If the org	ganization did not	check a box on lin	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac	cts-and-circumstar	ices" test, check t	his box and stop I	here. Explain in Pa	art IV how the orga	nization
	meets the "facts-and-circumstances"	test. The organiza	ation qualifies as a	publicly supporte	d organization		▶
t	10% -facts-and-circumstances tes	t - 2011. If the org	ganization did not	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets t	he "facts-and-circi	umstances" test, c	heck this box and	stop here. Explai	n in Part IV how th	e
	organization meets the "facts-and-cire						▶ 🔲
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box	and see instruction	ns 🕨 🗌
					Sch	edule A (Form 99	or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012						Page 3
Part III Support Schedule for O	rganizations	Described in	Section 509(a)	(2)		
` · (Complete only if you checked t	he box on line 9	of Part I or if the o	rganızatıon failed t	o qualify under Pa	rt II. If the organiza	ition fails to
qualify under the tests listed be	low, please comp	olete Part II.)	<u>.</u>			<u> </u>
Section A. Public Support	<u>-</u>	 		T .		
Calendar year (or fiscal year beginning in) ▶ L	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ızatıon's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						_
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)	1 111		,			
Section B. Total Support	·					
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						

9 10a b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on 12 Other income. Do not include gain or loss from the sale of capital

assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12)

4 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization,					
check this box and stop here		▶□_			
Section C. Computation of Public Support Percentage					
15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	%			
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	%			
Section D. Computation of Investment Income Percentage					
17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	%			
40 Landa Alamana and Alama 6044 Octobrilla A. Davidi bar 47	40	04			

18	Investment income percentage from 2011 Schedule A, Part III, line 17	18		
19a	33 1/3% support tests - 2012. If the organization did not check the box on line 14, and line 15 is more than 3	3 1/3	3%, and line 17 is not	
	more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	ation		ightharpoons
	and a feet the state of the sta	44.	00 4 000	

b 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

2012 Open to Public Inspection

Name of the organization

DEVON HORSE SHOW AND COUNTRY FAIR

Employer identification number 23-2796777

	FOUNDATION		23-2/96///
Par	Organizations Maintaining Donor Advised	d Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
	L	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	rriting that the assets held in donor adv	sed funds
	are the organization's property, subject to the organization's e		└── Yes No
6	Did the organization inform all grantees, donors, and donor ad		
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose	
	Impermissible private benefit?		Yes No
Par			Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or ed	ducation) Preservation of an h	istorically important land area
	Protection of natural habitat	Preservation of a ce	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualific	ed conservation contribution in the forn	n of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	' '	2c
đ	Number of conservation easements included in (c) acquired a	fter 8/17/06, and not on a historic struc	
	listed in the National Register		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the peri		
_	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 17	(n)(4)(b)(i)
_	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation include, if applicable, the text of the footnote to the organization.		
		ion s imanciai statements that describe	s the organization's accounting to
Da	conservation easements. rt III Organizations Maintaining Collections of	Art. Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered 'Yes' to Form 9		
12	If the organization elected, as permitted under SFAS 116 (AS		ement and balance sheet works of art.
	historical treasures, or other similar assets held for public exh		
	the text of the footnote to its financial statements that describ		
h	If the organization elected, as permitted under SFAS 116 (AS		nt and balance sheet works of art. historical
Ü	treasures, or other similar assets held for public exhibition, ed		
	relating to these items:	2004.0/1, 0/ (0004.0/1 // C. (1004.100 0/ p	, p
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical trea	asures, or other similar assets for financ	
2	the following amounts required to be reported under SFAS 1:		3
_	D I ded a Ferra 000 Dest VIII lose 4	. V v . C C C C C V . C C C C C C C C C C C C	> \$
a h	Assets included in Form 990, Part X		> \$
D	Assets included in Form 550, Fart A	•	· · ·

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 12-10-12

Schedule D (Form 990) 2012

DEVON HORSE SHOW AND COUNTRY FAIR FOUNDATION 23-2796777 Page 2 Schedule D (Form 990) 2012 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets(continued) Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): □ Public exhibition Loan or exchange programs Scholarly research Other C Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes Part W Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included ☐ Yes No on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance 1c Additions during the year 1d Distributions during the year 1e Ending balance 1f 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No b if "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (c) Two years back (d) Three years back (e) Four years back (b) Prior year 100,000 100,000 106,286 1a Beginning of year balance 115,782 Contributions 114,397. 170 c Net investment earnings, gains, and losses 213 645 304 1,385. d Grants or scholarships e Other expenditures for facilities and programs 170 213 6,931. 9,800 f Administrative expenses 115,782. g End of year balance 100,000. 100,000. 100,000. 106,286 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment **b** Permanent endowment ▶ Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds.

	Yes	No
3a(i)		X
3a(ii)		X
3b		

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	7,419,359.			7,419,359
b Buildings				
c Leasehold improvements	2,254,547.		620,804.	<u>1,633,743.</u>
d Equipment		·		
e Other				
Total, Add lines 1a through 1e. (Column (d) mus	st equal Form 990, Part X, colum	an (B) line 10(c))		9,053,102.

Schedule D (Form 990) 2012

DEVON HORSE Schedule D (Form 990) 2012 FOUNDATION	SHOW AND CO	UNTRY FAIR	23-	-2796777 Page 3
Part VII Investments - Other Securities. See	Form 990, Part X. line 1	2.		
(a) Description of security or category (including name of security)	(b) Book value		ation: Cost or end-	of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other			·	
(A)	· _ ·			
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				 _
(H)				
(1)			·	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	. F 200 P V Iv.	<u>l. </u>		
Part VIII Investments - Program Related. Ser (a) Description of investment type	(b) Book value	(c) Method of valu	uation: Cost or end-	of-year market value
(1)	A-A man sama	,-,		
(1)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(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 1			·	
	Description			(b) Book value
(1)		· -	-	
(2)				
(3)				
(4)				
(5)				
(6)				<u> </u>
(7) (8)				-
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col (B) line	15.)		▶	
Part X Other Liabilities. See Form 990, Part X, II	ne 25.			
1. (a) Description of liability		(b) Book value	-m-n	
(1) Federal income taxes				
(2) DUE TO AFFILIATES		89,250.		
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)	05)	89,250.		
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)	07,230.		

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2012

DEVON HORSE SHOW AND COUNTRY FAIR

Sche	edule D (Form 990) 2012 FOUNDATION	IKI TAIK	23-279	96777 Page 4
	Reconciliation of Revenue per Audited Financial State	ments With Reve		
1	Total revenue, gains, and other support per audited financial statements		1	551,545.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		 	
a	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 XIII.)	2d		
e	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	551,545.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	40	4c	0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	551,545.
	rt XII Reconciliation of Expenses per Audited Financial State	ements With Exp		
1	Total expenses and losses per audited financial statements	· · · · · · · · · · · · · · · · · · ·	1	498,213.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other iosses	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	498,213.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
ь	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	498,213.
Pa	rt XIII Supplemental Information			
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Pare 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this pare			Part V, line 4; Part

SCHEDULE G

(Form 990 or 990-EZ)

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.

OMB No 1545-0047

2012

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

DEVON HORSE SHOW AND COUNTRY FAIR

Employer identification number

FOUNDAT	ION				23-2796	<u>777 </u>
	Complete if the organization answ	ered "Y	es" to	Form 990, Part IV, II	ne 17. Form 990-EZ	filers are not
 1 Indicate whether the organization rais a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, Pab If "Yes," list the ten highest paid indicompensated at least \$5,000 by the 	e Solicità f Solicità g Specia r oral agreement with any individua art VII) or entity in connection with viduals or entities (fundraisers) pur	ation of ation of al fundra al (includ profess	non-ge govern ising e ling of onal f	overnment grants nment grants events fficers, directors, trus undraising services?	stees orYes	
(i) Name and address of Individual or entity (fundraiser)	(ii) Activity	(iii) fundr have or or con contribu	trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
		ļ <u>.</u>				
Total			•			
List all states in which the organization or licensing.	n is registered or licensed to solici	t contrib	oution:	s or has been notifie	a it is exempt from r	egistration
·					-	
						

Schedule G (Form 990 or 990-EZ) 2012

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

DEVON HORSE SHOW AND COUNTRY FAIR 23-2796777 Page 2 Schedule G.(Form 990 or 990-EZ) 2012 FOUNDATION Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col. (a) through ART SHOW SPONSORSHIPS 11 col. (c)) (event type) (event type) (total number) 156,585. 270,595. 43,010. 71,000. Gross receipts Less: Contributions 71,000. 156,585. 270,595. 43,010. Gross income (line 1 minus line 2) Cash prizes Noncash prizes Direct Expenses Rent/facility costs Food and beverages 8 Entertainment 0. 37,074. 62,541. 25,467. Other direct expenses 62,541, 10 Direct expense summary. Add lines 4 through 9 in column (d) 208,054. 11 Net income summary. Combine line 3, column (d), and line 10 Part III Garning. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (d) Total gaming (add (b) Pull tabs/instant Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes % Yes No No Volunteer labor Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Combine line 1, column d, and line 7 Enter the state(s) in which the organization operates gaming activities: Yes a is the organization licensed to operate gaming activities in each of these states? b if "No," explain: Yes 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain:

Schedule G (Form 990 or 990-EZ) 2012

232082 01-07-13

DEVON HORSE SHOW AND COUNTRY FAIR

Schedule G.(Form 990 or 990-EZ) 2012	FOUNDATION		23-21	<u>9677</u>	Page 3
11 Does the organization operate gam	ng activities with nonmembers?			Yes	No No
12 Is the organization a grantor, benef	_		ormed		
to administer charitable gaming?	•		[Yes	☐ No
13 Indicate the percentage of gaming	activity operated in:			- 1	
a The organization's facility			į,	13a	%
b An outside facility			1	13ь	%
14 Enter the name and address of the	person who prepares the organ	ization's gaming/special events books	_		
Name			-		
Address			······		
15a Does the organization have a contr	act with a third party from whom	n the organization receives gaming reve	nue?	Yes	☐ No
b If "Yes," enter the amount of gamin	g revenue received by the organ	nization ▶ \$ and	I the amount		
of gaming revenue retained by the					
c if "Yes," enter name and address o					
Name			· <u>·</u> ···		
Address					
16 Gaming manager information:					
Name ►					
Gaming manager compensation	\$				
Description of services provided	·				
				-	
					_
Director/officer	Employee	Independent contractor			
17 Mandatory distributions:					
a Is the organization required under	state law to make charitable dist	nbutions from the gaming proceeds to	г		—
retain the state gaming license?			Ĺ	Yes	∟ No
		stributed to other exempt organizations	or spent in the		
organization's own exempt activities Part IV Supplemental Information		the explanations required by Part I, lin	a 2h columna (III) a	nd (v) and	1 Dort III
		o complete this part to provide any add			
	To, and Tro, as applicable. Alls	o demplote time part to provide any acc	Montal Internation (200 11101701	<u> </u>
FORM 990, SCHEDULE G	, PART III				
DETAIL INFORMATION F	OR ADDITIONAL FU	UNDRAISING EVENTS			
	REVENUE	EXPENSES	INCOME		
CHRISTMAS TREE SALE	10,250	00	10,250		
COOKBOOKS	904	0	904		
HOSPITALITY ROOM	27,831	0	27,831		
					<u> </u>
TROPHIES	37,631	0	37,631		
SADDLEBRED	2,750	0	2,750		
ONLINE AUCTION	7,990	0	7,990		
232083 01-07-13		;	Schedule G (Form 9	}90 or 99()-EZ) 2012

DEVON HORSE SHOW AND COUNTRY FAIR

Schedule G (Form 990 or 990-EZ) 2012 FOU	JNDATION	SHOW AND COUNTRY FAIR	23-2796777 Page 4
Part IV Supplemental Information	on (continued)		
JUNIOR WEEKEND TABLES	12,457	3,024	9,433
GRAND PRIX TABLES	26,172	16,843	9,329
COMMITTEE STAND TABLES	16,135	8,939	7,196
HISTORICAL COMMITTEE	14,465	8,268	6,197
TOTAL	156,585	37,074	119,511
	<u> </u>		

Employer identification number 23-2796777 ISE OF GROUND FOR HORSE Open to Public OMB No 1545-0047 2012 Inspection (h) Purpose of grant or assistance ě K 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 MOHS 1 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 (g) Description of non-cash assistance 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. COMPARABLE 512 RENTALS Governments, and Individuals in the United States Grants and Other Assistance to Organizations, (e) Amount of assistance non-cash 97 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of cash grant 10,170. DEVON HORSE SHOW AND COUNTRY FAIR (c) IRC section if applicable 501(C)(4) 23-1575217 Part 1 General Information on Grants and Assistance (P) EIN criteria used to award the grants or assistance? 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 !** (Form 990) Part 19333

% ×

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2012)

DEVON HORSE SHOW AND COUNTRY FAIR FOUNDATION

Schedule I (Form 990) (2012) 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

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

Schedule I (Form 990) (2012)

232102 12-18-12

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.

2012
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

TOUNDATION 25-2750777
FORM 990, PART I, ITEM K, OTHER ORGANIZATION TYPE:
FOUNDATION
FORM 990, PART VI, SECTION A, LINE 2: THE PRESIDENT WADE MCDEVITT IS
MARRIED TO WENDY MCDEVITT 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.

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Related Organizations and Unrelated Partnerships ► See separate instructions. DEVON HORSE SHOW AND COUNTRY FAIR ► Attach to Form 990. FOUNDATION Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

2012 Open to Public Inspection OMB No 1545-0047

Employer identification number 23-2796777

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

Part

€	Direct controlling entity								ed tax-exempt
(9)	End-of-year assets		 						e it had one or more relat
ত্তি	Total income								t IV, line 34 becaus
(2)	Legal domicile (state or	(A 11000 1500)							swered "Yes" to Form 990, Par
(q)	Primary activity								ons (Complete if the organization an
(e)	Name, address, and EIN (if applicable)	Cinco população po							Identification of Related Tax-Exempt Organizations (Complete if 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.)
									Part II

) 12(b)(13) siled y?	No			×					
(g) Section 512(b)(13) controlled entity?	Yes								
(f) Direct controlling entity									
(e) Public charity status (if section	501(c)(3))								
(d) Exempt Code section				501(C)(4)					
(c) Legal domicile (state or foreign country)	•			PENNSYLVANIA					
(b) Primary activity		FUNDRAISING FOR THE	BENEFIT OF THE BRYN MAWR	HOSPITAL THROUGH HORSE					
(a) Name, address, and EIN of related organization		DEVON HORSE SHOW & COUNTRY PAIR, INC -	23-1575217, P.O. BOX 865, DEVON, PA	19333-0865					

For Paperwork Reduction Act Notice, see the Instructions for Form 990. SEE PART VII FOR CONTINUATIONS

232161 12-10-12 LHA

Schedule R (Form 990) 2012

DEVON HORSE SHOW AND COUNTRY FAIR FOUNDATION

Schedule R (Form 990) 2012 FOUNDATION

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

(e)	9	(2)	Ð		(e)	()	(6)		Ξ	€	9	¥ €
Name, address, and EIN of related organization	Primary activity	Legal domicite (state or	trolling y	Predomina (related, 1	Predominant income (related, unrelated,	Share of total income	Share of end-of-year		Disproportion- ate allocations?	Code V-UBI amount in box	General or P managing partner?	General or Percentage managing ownership
		foreign country)		sections	512-514)		asse	Yes	Š	1 (Form 1065)	Yes No	
							_					
				_				-				
						j						
	·		,									
											-	
					_							
								-				
		•			-							
			_	_								
Part ty organization 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 comporation or trust during the tax year.)	ganizations Taxable	as a Corpo	oration or Trust (Co	omplete if th	ne organization	answered "Ye	s" to Form	990, Part IV, I	line 34 be	cause it had or	ne or more	e related
(e)			(q)	(0)	9	(e)	_	€	_	(6)	3	€
Name, address, and EIN	N.	Prim	ctivity	Legal domicile	Direct controlling	ling Type of entity		Share of total		Share of Per	Percentage	Section 512(b)(13) controlled
of related organization	<u> </u>			foreign								entity?
								j	-			ON CONTRACT
		ļ										
							_			_	_	_
							+		+			
			_	-								
							_		.			_
							-					
					ļ	<u>j</u>						-
							•					
												-
											ا ا	
232162 12-10-12				32						Schedule	E (FOLE	Schedule K (Form 990) 2012

Page 3

23-2796777

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	ž
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?	ions with one or more re	lated organizations listed	ın Parts II-IV?		1	
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	Ą			-P		×
b Gift, grant, or capital contribution to related organization(s)				1 b	×	
c Gift, grant, or capital contribution from related organization(s)				10		×
d Loans or loan guarantees to or for related organization(s)				P		×
e Loans or loan guarantees by related organization(s)				1e		×
f Dividends from related organization(s)				11	_	×
g Sale of assets to related organization(s)				19		X
				ŧ		×
i Exchange of assets with related organization(s)				1:		×
j Lease of facilities, equipment, or other assets to related organization(s)				į	×	
k Lease of facilities, equipment, or other assets from related organization(s)				*	*****	×
l Performance of services or membership or fundraising solicitations for related organization(s)	rganization(s)			F		×
m Performance of services or membership or fundraising solicitations by related organization(s)	ganization(s)			13	-	×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ation(s)	•		1n		×
 Sharing of paid employees with related organization(s) 				10		×
				•		>
				٩ .		د >
 Reimbursement paid by related organization(s) for expenses 				5	ľ	<
r Other transfer of cash or property to related organization(s)				-		×
(s)				1s		×
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	n who must complete the	ils line, including covered	relationships and transaction thresholds.			
(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	/olved		
(1) DEVON HORSE SHOW & COUNTRY FAIR, INC.	J.	97,512.	FMV	;		
(2)				ļ	,	
(6)					}	
(4)						
(5)					ľ	
(9)						
232163 12-10-12	33		Schedule R (Form 990) 2012	R (Form	(066	2012

· Page 4 23-2796777

DEVON HORSE SHOW AND COUNTRY FAIR

FOUNDATION

Schedule R (Form 990) 2012

Part Vi 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.

(a) (b) (b) (b) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	(b) Primary activity	c) lomicile r foreign ntry)	Predominant income partiers sec (related, unrelated, excluded from tax under section 512-514) Yes No	(f) Share of total Total No Income	(g) Share of end-of-year assets	Disproportionate allocations?	Code V-UBI General or Percentage amount in box 20 partner/ partner/ (Form 1065) Yes No	General or managing partner?	(k) Percentage ownership
							· ·		
							Schedule	R (Forr	Schedule R (Form 990) 2012

34

Form 88	68 (Rev 1-2013)					Page 2
	are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this	box		▶ X
	nly complete Part II if you have already been granted an a				3868	
If you	are filing for an Automatic 3-Month Extension, complete	te only Pa	art I (on page 1)			
Part I	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no co	opies need	led)
			Enter filer's	identifyin	g number, s	ee instructions
Type or	Name of exempt organization or other filer, see instru-	ctions		Employer	identification	number (EIN) or
print	DEVON HORSE SHOW AND COUNTRY	Y FAI	R			
File by the	FOUNDATION				<u>23-279</u>	96777
due date fo filing your	Number, street, and room of suite no. if a r .O. box, s		tions	Social se	curity numbe	r (SSN)
return See		<u> 365 </u>				
instructions	City, town or post office, state, and ZIP code. For a for DEVON, PA 19333-0865	oreign add	iress, see instructions.			
Enter the	e Return code for the return that this application is for (file	e a separa	te application for each return)			0 1
Applica ^a	tion	Return	Application			Return
is For	11011	Code	Is For			Code
	0 or Form 990-EZ	01	13 7 01			0000
Form 99		02	Form 1041-A			08
	'20 (individual)	03	Form 4720			09
Form 99		04	Form 5227			10
	0-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	00-T (trust other than above)	06	Form 8870			12
STOP!	Do not complete Part II if you were not already granted	l an autor	natic 3-month extension on a prev	iously file	d Form 8868	3.
	PAUL SAYLOR					
• The b	books are in the care of DEVON SHOW GROU	JNDS,	DEVON, PA - DEVON	, PA	19333	
Telep	phone No ► <u>610-964-0550</u>		FAX No 🕨			
If the	organization does not have an office or place of business	s in the Ur	nited States, check this box			▶ □
If this	s is for a Group Return, enter the organization's four digit		· · · · · · · · · · · · · · · · · · ·		_	
box 🕨	. If it is for part of the group, check this box			all memb	ers the exten	sion is for
	equest an additional 3-month extension of time until S		-			
	or calendar year, or other tax year beginning!)13
6 If	the tax year entered in line 5 is for less than 12 months, c	heck reas	on Initial return	Final r	eturn	
L	Change in accounting period					
	tate in detail why you need the extension	IIIDD '	DARWING IN ORDER M	0 DDE	ת מתגת	
_	AITING ON INFORMATION FROM THE	HIKD .	PARTIES IN ORDER TO	J PRE	PARE A	
<u>C</u>	OMPLETE AND ACCURATE RETURN.					
8a If	this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069. e	enter the tentative tax, less any			
	onrefundable credits. See instructions.	,		8a	\$	0.
_	this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated			
	x payments made. Include any prior year overpayment all	-				
р	reviously with Form 8868			8b	\$	0.
c B	alance due. Subtract line 8b from line 8a Include your pa	yment wr	th this form, if required, by using			
E	FTPS (Electronic Federal Tax Payment System). See instru	uctions		8c	\$	0.
	Signature and Verificat	ion mu	st be completed for Part II o	nly.		
Under pe it is true,	enalties of perjury, I declare that I have examined this form, includ correct, and complete, and that I am authorized to prepare this fo	ling accomp orm.	panying schedules and statements, and to	the best o	f my knowledg	e and belief,
Signatur	e ▶ Title ▶ 1	PRESI	DENT	Date	_	
						368 (Rev. 1,2013)

Form **8868**

(Rev. January 2013)

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. 1-2013)

• If you a	re filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box			\triangleright \boxed{X}
If you a	re filing for an Additional (Not Automatic) 3-Month Ex	tension,	complete only Part II (on page 2 of	this form).		
	omplete Part II unless you have already been granted		•	•		
	c filing (e-file). You can electronically file Form 8868 if y	-				-
	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 ex	ception of	Form 8870, Information Return for	Transfers .	Associated With	Certain
Personal	Benefit Contracts, which must be sent to the IRS in par	er format	(see instructions). For more details	on the elec	ctronic filing of the	nis form,
	irs gov/efile and click on e-file for Chanties & Nonprofits	_	bik aviainal (na aaniaa na	- d a d\		
Part I	Automatic 3-Month Extension of Time					
-	tion required to file Form 990-T and requesting an autor	matic 6-mo	onth 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 7004 to reques	st an exten	ision of time	
		-4		Familia		
Type or	Name of exempt organization or other filer, see instru DEVON HORSE SHOW AND COUNT!		тр	Employe	r identification n	Jiliber (Eliv) Or
print	FOUNDATION	KI IA	II.		23-2796	777
File by the	Number, street, and room or suite no. If a P.O. box, s	oo inetrue	tions	Social se	curity number (S	
due date for filing your	LANCASTER AVENUE, P.O. BOX		tions.	OUCIAI SE	conty normber (c	ON
return See Instructions	City, town or post office, state, and ZIP code For a fo		fress, see instructions.	L		
	DEVON, PA 19333-0865	.	,			
					-	
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 1
Application	on	Return	Application			Return
s For		Code	Is For			Code
Form 990	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990	BL	02	Form 1041-A			08
Form 4720) (individual)	03	Form 4720		 	09
Form 990-		04	Form 5227			10
	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	MIDC	DEMON DA DEMON	T) A	10222	
	oks are in the care of DEVON SHOW GROU	JADS,		, PA	19333	
•	one No. ► 610-964-0550		FAX No. ▶			_
	rganization does not have an office or place of business			16 Alono no 8	414 1.	-
	for a Group Return, enter the organization's four digit					
	. If it is for part of the group, check this box uest an automatic 3-month (6 months for a corporation				ers the extension	1 IS 10r.
· Hec	TINITE 15 0014		tion return for the organization name		The extension	
is fo	r the organization's return for:	t Organiza	non return for the organization ham	eu above.	THE EXTERNSION	
▶ [calendar year or					
· ;	X tax year beginning NOV 1, 2012	an	dending OCT 31, 2013			
	taryour objaining	,	d dilding		<u> </u>	
2 If the	e tax year entered in line 1 is for less than 12 months, c	heck reas	on: Initial return	Final retur	'n	
	Change in accounting period					
3a If thi	s application is for Form 990-BL, 990-PF, 990-T, 4720, 6	or 6069, e	nter the tentative tax, less any			
	efundable credits. See instructions.	, -		3a	\$	0.
	s application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and			
	nated tax payments made. Include any prior year overp			3ь	\$	0.
	nce due. Subtract line 3b from line 3a. Include your pa					
	sing EFTPS (Electronic Federal Tax Payment System).	•	·	3c	\$	0.
Caution. I	you are going to make an electronic fund withdrawal v	vith this Fo	orm 8868, see Form 8453-EO and Fo	orm 8879-	EO for payment i	nstructions.

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

2014 Devon Horse Show & Country Fair, Inc. Board of Directors

Mrs. Deirdre G. Blain (Dee Dee)

Mr. R. Kent Cadwalader

Mrs. Alfred M. Campbell, III (Pamela)

Mrs. Eugene Capaldi (Carolyn)

Ms. Alix Coleman

Mr. Henry L. Collins, III

Mrs. Eric Corkhill (Buttons)

Mr. Rudy C. D'Alessandro

Ms. Eileen Devine

Ms. Darlene DiGorio

Mrs. Jeffrey Estabrook (Lisa)

Ms. Marlene Brenner Ferguson

Mrs. Alexandra S. Floyd (Sandy

Mrs. Andrea Gilbert

Mr. Harry R. Gill

Mrs. Joannah H. Glass

Mrs. Samuel W.M. Griffin (Holly)

Mrs. John M. Guinan (Candy)

Norma K. Hamm

Fair

Mrs. Mimi Killian

Mr. Leonard A. King

Fair

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Mrs. Albert F. Martin (Debbie)

Mr. Timothy Maxwell

Mrs. Karin Maynard

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Mrs. Wade L. McDevitt (Wendy)

Mr. Collin F. McNeil

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Mrs. J. Maxwell Moran (Betty)

Mr. John J. Nesbitt, III

Mrs. John J. Nesbitt, III (Sandy)

Mr. Alfred D. Norris, Jr.

Vice President, Devon Horse Show & Country Fair Chairman, Carriage Marathon Committee

Vice President, Devon Horse Show & Country Fair

Co-Chairman, Devon Country Fair

Vice President, Devon Horse Show & Country Fair

Vice-Chairman, Grounds Committee

President, Bryn Mawr Hospital

Co-Chairman, Trophy & Presentation Committee

Vice President, Devon Horse Show & Country Fair

Chairman, Program Book Committee

Vice President, Devon Horse Show & Country Fair

Chairman, Devon Country Fair

Assistant Treasurer, Devon Horse Show & Country

Treasurer, Devon Country Fair

Chairman Emeritus, Devon Horse Show & Country

President, CEO, Devon Horse Show & Country Fair

Honorary Chairman, Devon Horse Show & Country Fair

Vice President, Devon Horse Show & Country Fair

Co-Chairman, Devon Country Fair

Chairman, Devon Horse Show & Country Fair

Co-Chairman, Sponsorship Committee

Vice President, Devon Horse Show & Country Fair Chairman, Finance Committee, Chairman, Hospitality Committee Chairman, Ladies' Committee, Devon Horse Show Vice President, Devon Horse Show & Country Fair Mr. Richard M. O'Donnell

Mr. James F. O'Rourke

Mr. Richard D. Sanford

Mrs. Robert R. Schwartz (Kathy)

Mrs. Richard Seidel (Ann)

Mr. Glen T. Senk

Mrs. Richard P. Shinners, II (Sandy)

Mrs. Robert M. Somers (Dolly)

Mrs. Judson P. Vosburg (Ginni)

Mrs. Mary Stokes Waller

Mr. Richard G. Webster

Mrs. David A. Werner (Susan)

Mr. Cortright Wetherill, Jr.

Mr. George Weymouth

Mrs. John R. Wright, Jr. (Beth)

Chairman, Grounds & Grandstand Committee
Vice President, Devon Horse Show & Country Fair
Treasurer & Interim Secretary, Devon Horse Show & Country Fair
Vice President, Devon Horse Show & Country Fair
Co-Chairman, Coaching Committee

Assistant Treasurer, Devon Country Fair

Assistant Treasurer, Devon Country Fair

Treasurer, Devon Country Fair

Vice President, Devon Horse Show & Country Fair Chairman, Publicity & Marketing Co-Chairman, Trophy & Presentation Committee

Chairman, Coaching Committee

DEVON HORSE SHOW AND COUNTRY FAIR FOUNDATION OCTOBER 31, 2013

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Statements of financial position	3
Statements of activities	4-5
Statements of cash flows	6-7
Notes to financial statements	8-14
Additional information:	
Independent auditors' report on additional information	15
Schedules of sponsorships and events	16



Certified Public Accountants and Business Consultants

INDEPENDENT AUDITORS' REPORT

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

1

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

We have audited the accompanying financial statements of Devon Horse Show and Country Fair Foundation (a nonprofit organization), which comprise the statements of financial position as of October 31, 2013 and 2012, and the related statements of activities, and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

Our responsibility is to express an opinion on these 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 from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

323 Norristown Road

11000 Lincoln Drive West

P. O. Box 917

Suite 15

Spring House, PA 19477 Marlton, NJ 08053

215 628 0500

856 596.2400

215 628.8756 Fax

856.596 6121 Fax

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, 2013 and 2012, and the results of its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Gable, Peritz Mishkin, LLP

December 5, 2013

STATEMENTS OF FINANCIAL POSITION

OCTOBER 31, 2013 AND 2012

ASSETS

	2013	2012
Cash and cash equivalents Unconditional promises to give Land Property improvements, net Intangible assets, net Total assets	\$ 966,004 168,356 7,419,359 1,633,743 11,283 \$ 10,198,745	\$ 817,874 187,000 7,419,359 1,655,399 14,164 \$ 10,093,796
LIABILITIES AND NET	ASSETS	
Liabilities Mortgage payable Second mortgage payable Due to affiliate Accrued expenses Total liabilities	\$ 1,609,451 904,638 89,250 13,785 2,617,124	\$ 1,699,653 843,651 9,151 13,052 2,565,507
Net assets Unrestricted Designated by the Board for debt repayment Undesignated	150,000 7,313,712 7,463,712	100,000 7,292,467 7,392,467
Temporarily restricted Permanently restricted	17,909 100,000	35,822 100,000
Total net assets	7,581,621	7,528,289
Total liabilities and net assets	\$ 10,198,745	\$ 10,093,796

STATEMENTS OF ACTIVITIES

•	2013	2012
Unrestricted net assets Unrestricted revenues		
Sponsorships and events	\$ 208,055	\$ 156,240
Rental income	97,512	97,512
Contributions	241,775	351,728
Investment income	2,421	1,131
Total unrestricted revenues and gains	549,763	606,611
Net assets released from restrictions		
Restrictions satisfied by payments	19,695	51,447
Total unrestricted revenues, gains and		
support	569,458	658,058
Expenses		
General and administrative expenses In-kind contribution to Devon Horse Show	36,412	16,458
and Country Fair, Inc.	97,512	97,512
Reimbursements to Devon Horse Show		
and Country Fair, Inc.	10,170	10,213
Interest expense	139,893	110,728
Depreciation and amortization	214,226	165,973
Total expenses	498,213	400,884
Increase in unrestricted net assets	71,245	257,174
Temporarily restricted net assets		
Contributions - barn and other improvements	, 1,612	27,407
Investment income	<i>√</i> 170	213
Restrictions satisfied by payments	(19,695)	(51,447)
Decrease in temporarily restricted		
net assets	(17,913)	(23,827)
Increase in net assets	\$ 53,332	\$ 233,347

DEVON HORSE SHOW AND COUNTRY FAIR FOUNDATION STATEMENTS OF ACTIVITIES (CONT'D.)

	2013	2012
Changes in net assets Unrestricted net assets Increase in unrestricted net assets	\$ 71,245	\$ 257,174
Unrestricted net assets, beginning of year	7,392,467	7,135,293
Unrestricted net assets, end of year	\$ 7,463,712	\$ 7,392,467
Temporarily restricted net assets Increase (decrease) in temporarily restricted net assets	\$ (17,913)	\$ (23,827)
Temporarily restricted net assets, beginning of year	35,822	59,649
Temporarily restricted net assets, end of year	\$ 17,909	\$ 35,822
Permanently restricted net assets Change in permanently restricted net assets	\$ -	\$ -
Permanently restricted net assets, beginning of year	100,000	100,000
Permanently restricted net assets, end of year	\$ 100,000	\$ 100,000

STATEMENTS OF CASH FLOWS

	2013	2012	
Cash flows from operating activities Increase in net assets	\$ 53,332	\$ 233,347	
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	(1,612)	(27,407)	
Depreciation and amortization	214,226	165,973	
Imputed interest expense	60,987	56,876	
In-kind contribution to Devon Horse Show			
and Country Fair, Inc.	97,512	97,512	
(Increase) decrease in assets			
Unconditional promises to give	18,644	15,000	
Due from affiliate	-	9,700	
Increase (decrease) in liabilities	00.000	0.454	
Due to affiliate	80,099	9,151	
Accrued expenses	733	3,630	
Net cash provided by operating			
activities	426,409	466,270	
dontinos			
Cash flows used in investing activities			
Purchase of land	•	(986,940)	
Purchase of property improvements	(189,689)	(672,021)	
Net cash used by investing			
activities	(189,689)	(1,658,961)	
Cash flows from financing activities			
Proceeds from contributions restricted for			
investment in capital improvements	1,612	27,407	
New borrowings	•	1,734,154	
Repayment of debt	(90,202)	(887,211)	
Financing costs incurred	* '*	(14,404)	
J			
Net cash provided (used) by financing			
activities	(88,590)	859,946	

STATEMENTS OF CASH FLOWS

YEARS ENDED OCTOBER 31, 2013 AND 2012

	2013	2012
Net increase (decrease) in cash and cash equivalents	\$ 148,130	\$ (332,745)
Cash and cash equivalents, November 1	817,874	1,150,619
Cash and cash equivalents, October 31	\$ 966,004	\$ 817,874

Supplementary schedule of non-cash investing and financing activities:

Interest expense of \$60,987 and \$56,876 was imputed and added to the value of the second mortgage for the years ended October 31, 2013 and 2012, respectively.

Supplementary disclosures of cash flow information:

Cash paid during the year for:

	 2013	 2012	
Interest	\$ 79,274	\$ 52,317	

NOTES TO FINANCIAL STATEMENTS

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. The Organization is primarily supported by contributions from donors.

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 5, 2013, the date on which the financial statements were available to be 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. Based on management's determination, no allowance is necessary at October 31, 2013 and 2012.

Contributions

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

NOTES TO FINANCIAL STATEMENTS

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 in excess of \$250,000 in any one bank exceed the insurable limit as allowed by FDIC. Total cash balances in excess of insurable limits were \$333,771 at October 31, 2013.

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.

NOTES TO FINANCIAL STATEMENTS

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. Intangible assets of \$11,283 and \$14,164 as of October 31, 2013 and 2012 are net of accumulated amortization of \$3,121 and \$240, respectively. Amortization expense, including the write-off of fees in the year ended October 31, 2012 related to the refinanced loan, was \$2,881 and \$14,933 for the years ended October 31, 2013 and 2012, respectively. Amortization expense is expected to be \$2,881 in each of the years ending through October 31, 2016 and \$2,640 in the year ending October 31, 2017.

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 Organization's Forms 990, *Return of Organization Exempt from Income Tax*, for the years ended October 31, 2013, 2012 and 2011 are subject to examination by the Internal Revenue Service, generally for three years after they were filed.

2. Restricted Cash

Included in cash and cash equivalents as of October 31, 2013 and 2012 are monies restricted for the following purposes:

	2013	2012
Permanent endowment Investment in improvements and	\$ 100,000	\$ 100,000
maintenance	<u>17,909</u>	35,822
	<u>\$ 117,909</u>	<u>\$ 135,822</u>

DEVON HORSE SHOW AND COUNTRY FAIR FOUNDATION NOTES TO FINANCIAL STATEMENTS

3. Promises to Give

Unconditional promises to give consist of the following:

	2013	2012
The Devon Horse Show and Country Fair, Inc. Unrestricted promises Restricted to trophy maintenance	\$ 100,000 63,356 5,000	\$ 50,000 122,000
Gross unconditional promises to give	<u>\$ 168,356</u>	<u>\$ 187,000</u>
Amounts due in: Less than one year One to five years	\$ 168,356 	\$ 133,000
	<u>\$ 168,356</u>	<u>\$ 187,000</u>

Unconditional promises to give due in one year approximate fair value.

4. Property Improvements

The summary of property improvements is as follows as of October 31, 2013 and 2012:

	2013	2012
Property improvements Accumulated depreciation	\$ 2,254,547 <u>620,804</u>	\$ 2,064,857 409,458
Net property improvements	<u>\$ 1,633,743</u>	\$ 1,655,399

Depreciation expense was \$211,345 and \$151,040 for the years ended October 31, 2013 and 2012, 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.

NOTES TO FINANCIAL STATEMENTS

6. Mortgage Payable

In August 2012, the Company refinanced a mortgage payable in conjunction with the acquisition of a new land parcel. The note is payable in monthly installments of \$9,956, including interest at 4 75% of the outstanding principal balance and is secured by the Organization's properties. The note is scheduled to mature September 1, 2017 with a balloon payment of approximately \$1,425,000. The amount outstanding at October 31, 2013 and 2012 was \$1,609,451 and \$1,699,653, respectively.

Following are maturities of mortgage payable:

\$ 43,757	Year ending October 31, 2014
46,103	2015
48,339	2016
1,471,254	2017
\$ 1.609.45 ²	

The note is subject to certain financial covenants.

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 \$60,987 and \$56,876 has been imputed and recorded for the fiscal years ended October 31, 2013 and 2012, respectively, and has been added to the loan balance. The loan balance at October 31, 2013 and 2012 is \$904,638 and \$843,651, respectively.

8 Due to Affiliate

The Organization owed the Devon Horse Show and Country Fair, Inc. \$89,250 and \$9,151 as of October 31, 2013 and 2012, respectively.

NOTES TO FINANCIAL STATEMENTS

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 years ended October 31, 2013 and 2012, the Organization received \$100,000 in promises to give from the Devon Horse Show and Country Fair, Inc. It received \$50,000 in cash during the fiscal year ended October 31, 2013. The amount due at October 31, 2013 is \$150,000 and is to be used for debt reduction. 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:

	2013	2012
Trophy maintenance Barn and capital improvements	\$ 5,000 12,909	\$ 15,000
	<u>\$ 17,909</u>	\$ 35,822

11. Endowment Fund

Permanently restricted net assets at October 31, 2013 and 2012 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.

NOTES TO FINANCIAL STATEMENTS

11 Endowment Fund (Cont'd)

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

The composition of endowment net assets for this fund and the changes in endowment net assets as of October 31, 2013 and 2012 are as follows:

	Included in Temporarily Restricted		Included Permanen Restricte	tly
Endowment net assets, November 1, 2011 Assets expended in accordance with	\$	-	\$ 100,000	\$ 100,000
the endowment objective Investment income	•	213) <u>213</u>	<u>-</u>	(213) 213
Endowment net assets, October 31, 2012 Assets expended in accordance with		-	100,00	100,000
the endowment objective Investment income	(170) <u>170</u>		(170) 170
Endowment net assets, October 31, 2013	<u>\$</u>		\$ 100,00	<u>\$ 100,000</u>

12. Related Party Transactions

The Organization reimbursed Devon Horse Show and Country Fair, Inc. \$170 and \$213 during the years ended October 31, 2013 and 2012, respectively as reimbursement of the prize monies in the three-gaited saddle horse class. The Devon Horse Show and Country Fair, Inc reimbursed an additional \$10,000 for trophy maintenance in each of the years ended October 31, 2013 and 2012. The Organization and Devon Horse Show share a common Board of Directors.

The Devon Horse Show and Country Fair, Inc. use 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 the years ended October 31, 2013 and 2012.

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, 2013 and 2012. An additional \$70,000 was contributed for capital improvements in the year ended October 31, 2013. Included in unconditional promises to give (See Note 3) are \$100,000 and \$50,000 at October 31, 2013 and 2012, respectively.



Certified Public Accountants and Business Consultants

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

INDEPENDENT AUDITORS' REPORT ON ADDITIONAL INFORMATION

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

We have audited the financial statements of the Devon Horse Show and Country Fair Foundation as of and for the years ended October 31, 2013 and 2012, and have issued our report thereon dated December 5, 2013, which contained an unmodified opinion on those financial statements, appears on pages 1 and 2. Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The schedules of sponsorships and events are presented for purposes of additional analysis and are 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, or 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 5, 2013

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SCHEDULES OF SPONSORSHIPS AND EVENTS

	2013	2012
Art show Black Tie & Boots Ball Book signing Christmas tree sale Committee stand table rentals Cookbooks Grand prix table rentals Handbags Historical committee Hospitality room Junior weekend table rentals Online auction Saddlebred Sponsorships	\$ 17,543 - 10,250 7,196 904 9,329 - 6,197 27,831 9,434 7,990 2,750 108,631	\$ 22,545 34,719 4,704 10,667 - (20) - (1,083) - 24,530 532 - 2,600 57,046
	\$ 208,055	\$ 156,240