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DLN: 93493128011965

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2013

OMB No 1545-0047

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Department of the Treasury Internal Revenue Service Do not enter Social Security numbers on this form as it may be made public. By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u> A For the 2013 calendar year, or tax year beginning 07-01-2013 , 2013, and ending 06-30-2014 **C** Name of organization The Devereux Foundation D Employer identification number B Check if applicable Address change 23-1390618 Doing Business As Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number 2012 Renaissance Boulevard Terminated (610)542-3065 City or town, state or province, country, and ZIP or foreign postal code King of Prussia, PA 19406 Amended return Application pending G Gross receipts \$ 389,315,565 Name and address of principal officer **H(a)** Is this a group return for Robert Q Kreider Yes 🔽 No subordinates? 444 Devereux Drive Villanova, PA 19085 **H(b)** Are all subordinates included? Tax-exempt status **▽** 501(c)(3) **▽** 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 If "No," attach a list (see instructions) Website: ► www.devereux.ord H(c) Group exemption number ► K Form of organization ✓ Corporation ✓ Trust ✓ Association ✓ Other ► L Year of formation 1938 M State of legal domicile PA Part I Summary 1 Briefly describe the organization's mission or most significant activities Devereux is a leading nonprofit behavioral health organization that healthcare organization that supports many of the most underserved and vulnerable members of our communities Activities & Governance 2 Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . . . 20 4 19 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 7,824 Total number of volunteers (estimate if necessary) . . . 6 1,000 **7a** Total unrelated business revenue from Part VIII, column (C), line 12 . 0 ${f b}$ Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 12,166,753 14,089,687 Contributions and grants (Part VIII, line 1h) . 359,727,286 371,921,284 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 3,747,350 624,472 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2,207,596 1,660,988 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 377,848,985 388,296,431 13 0 0 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . . Salaries, other compensation, employee benefits (Part IX, column (A), lines **15** 274,964,428 278,019,930 Expenses 5-10) 0 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) ▶ 2,306,665 **17** 99,102,508 104,189,480 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 374,066,936 382,209,410 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 3.782.049 6,087,021 19 Revenue less expenses Subtract line 18 from line 12 Assets or d Balances **Beginning of Current End of Year** Year 192,695,000 20 Total assets (Part X, line 16) . 184,202,000 21 Total liabilities (Part X, line 26) 146,419,000 151,417,000 22 Net assets or fund balances Subtract line 21 from line 20 37,783,000 41,278,000 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2015-05-08 Signature of officer Sign Here ROBERT C DUNNE CFO Type or print name and title Print/Type preparer's name Preparer's signature Date Check / ıf self-employed Paid Firm's EIN 🕨 Firm's name Preparer Fırm's address 🟲 Use Only

May the IRS discuss this return with the preparer shown above? (see instructions) .

□Yes □No

Par		t ot Program Serv edule O contains a res		ousnments to any line in this Part I	II	٦
1	Briefly describe the	organization's mission	n			
UND COM SERV HELF TO L RESC	ERSERVED AND VU PREHENSIVE NATI /ICES THAT POSIT: PEMPOWER CHILDR EAD FULFILLING AI DURCES IN SAFE AN	LNERABLE MEMBERS O NAL NETWORK OF (IVELY IMPACT THE L REN AND ADULTS WIT ND REWARDING LIVE	OF OUR COM CLINICAL, TH IVES OF TENS TH INTELLECT S DEVEREUX IRONMENTS	MUNITIES FOUNDED ERAPEUTIC, EDUCAT 5 OF THOUSANDS OF UAL, EMOTIONAL, DI PROVIDES CONSIST THAT ENRICH AND EN		/EREUX, WE OPERATE A IT PROGRAMS AND LIES EVERY YEAR WE HAVIORAL CHALLENGES .OGRAMS, SERVICES, AND
2	the prior Form 990	or990-EZ?		ervices during the year	which were not listed on	
	If "Yes," describe th	nese new services on S	Schedule O			
3	services?	cease conducting, or nese changes on Sche		nt changes in how it coi	nducts, any program · · · · · · ·	
4	expenses Section 5		4) organization	s are required to report	ree largest program service the amount of grants and a	
4a	(Code) (Expenses \$	194,107,021	ıncludıng grants of \$) (Revenue \$	211,442,127)
	the autistic spectrum o age-appropriate educa disorders, learning disa resources in a safe and	f disorders, substance abuse tional services for students bilities and intellectual and e	e treatment, and II In Its residential pr developmental dis he average numbe	ncluding such challenging sei ograms These students may orders The focus of these p er of clients served by these	vices as treatment for adolescent be in treatment for mental/emo- rograms is to ensure the provision	
4b	(Code) (Expenses \$	81,451,345	ıncludıng grants of \$) (Revenue \$	87,861,204)
	and vocational training Devereux staff provide	programs for adolescents a 24/7 supervision and treat	ind adults with inte ment of individual:	ellectual and developmental	ents served by these programs is	munity-based residential programs,
4-	(Code) (Expenses \$	23,394,077	ıncludıng grants of \$) (Revenue \$	27,418,135)
4 c	Foster Care The Deve Jersey, Texas and Pen	reux Foundation offers fost nsylvania The average nun	er care in group fo nber of clients sen	ster homes and in therapeut yed by these programs is ap) (Revenue \$ iic foster homes in Arizona, Florida proximately 950 for year ending I enses do not include managemen	a, Georgia, Massachusetts, New June 30, 2014 Expenses do not
	(Code) (Expenses \$	6,015,804	ıncludıng grants of \$) (Revenue \$	6,817,124)
	Acute Care	, (====================================	-,,		, (4	-,,,
	(Code) (Expenses \$	22,001,391	ıncludıng grants of \$) (Revenue \$	23,434,324)
	Outpatient/Other Service		22,001,331	including grants or \$) (Revenue \$	23,434,324)
	(Code Case Management) (Expenses \$	14,227,581	including grants of \$) (Revenue \$	14,948,370)
4d	Other program ser (Expenses \$	vices (Describe in Sch 42,244,776 ind	edule O)	of \$) (Revenue \$	45,199,818)

341,197,219

Total program service expenses ►

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	110
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
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	Yes	
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		No
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		Νo
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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	Yes	
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 $\sqrt{2}$	10	Yes	
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, Part VI	11a	Yes	
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		No
c	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		No
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		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> " <i>Yes," complete Schedule F, Parts III and IV</i>	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
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	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	Yes	
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	Yes	

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1° If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
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? <i>If "Yes," complete Schedule J.</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
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 Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
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 of any of these persons? If "Yes," complete Schedule L, Part III	27		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

(•	Statements Regarding Other 1RS Fillings and Tax Compliance			-
	Check if Schedule O contains a response or note to any line in this Part V	• •	Yes	.∫✓ No
.a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 1,264		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
_	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered			
b	by this return			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
)	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
а	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		No
)	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	—		
-	11 163, to fine 3a of 3b, the digenization metorification occuping a line in the second occuping and the organization metorification occuping	5c		L
а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
•	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
1	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
)	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
:	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		N (
1	If "Yes," indicate the number of Forms 8282 filed during the year			
9	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
		<u> </u>		INC
J	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
1	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Yes	
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
		8		
	Sponsoring organizations maintaining donor advised funds.			
	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		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
)	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
)	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
2	Enter the amount of reserves on hand			
a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		110

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

56	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
_	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
5		6		
6 7-	Did the organization have members or stockholders?	-		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 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 body before filing the form?	11a	Yes	
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	-		
	ın Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	<u></u>
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
Ь	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶AZ, CA, CO, CT, DE, FL, GA, MA, N	1I , NJ	, PA , R	RI, WA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply			

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

interest policy, and financial statements available to the public during the tax year

Form 990	(2013)	
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours per week (list any hours	Average Position (do not check more than one box, unless week (list person is both an officer any hours and a director/trustee) Reportable compensation compensation from the organization (W-organization) (W-organization) (W-organization) (W-organization)								compensation from related organizations (W	/-	(F) Estima amount o compens from t	ted f other ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)) 0	rganızatı relate organıza	ed
			Shirir	Trustee		Ф	pensated							
												_		
												\perp		
												_		
												_		
												-		
												-		
												+		
												+		
												+		
1b	Sub-Total			<u> </u>	<u> </u>	<u> </u>		 				+		
c	Total from continuation sheet	s to Part VII, S	ection A	١.				•				+		
d	Total (add lines 1b and 1c) .							►		5,745,656		0		668,267
2	Total number of individuals (in \$100,000 of reportable compe	_					d abov	e) wl	ho receive	d more th	an			
											ı		Yes	No
3	Did the organization list any fo on line 1a? <i>If "Yes," complete S</i>								or highes,	t compen • •	sated employee	3		No
4	For any individual listed on line organization and related organ individual											4	Yes	
5	Did any person listed on line 1 services rendered to the organ									anızatıon • • •	or individual for	5		No
Se	ection B. Independent Co	ntractors												
1	Complete this table for your five compensation from the organizers	e highest comp											tay year	
	compensation from the organiz	(A)	mpelis	acion	101	ine C	arenda	агуе	ar enumg	WILLI OF WI	(B)	T	tax year (C	

(A) Name and business address	(B) Description of services	(C) Compensation
RESTORE OT PT SLPPC, 81 MOWHAWK STREET COHOES NY 12047	ANCILLARY THERAPIES	790,427
ERNST YOUNG LLP, 2005 Market Street Suite 700 PHILADELPHIA PA 19103	AUDITING	459,000
SAMUEL MCCLURE MD PA, 828 E WASHINGTON ST ORLANDO FL 32801	PSYCHIATRIC SERVICES	358,218
MICHAEL BERNO ND, 16922 COTTONWOOD WAY HOUSTON TX 77059	PSYCHIATRIC SERVICES	316,761
ROBERT SHUCH DO, 1111 W ASTER DR PHOENIX AZ 85029	PSYCHIATRIC SERVICES	285,203

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►54

Part V	100	Statement of	of Revenue ule O contains a respor	sca ar nota to any lir	o in this Dort VIII			_
	12			229,930	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
rts nts	1a	Federated cam						
ran our	b	Membership du	ies 1b					
, G Am	С	Fundraising ev	ents 1c	688,059				
iifts ar.	d	Related organiz	zations 1d	2,324,893				
s, G mil	е	Government grant	s (contributions) 1e	557,431				
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contribution	ons, gifts, grants, and 1f ot included above	10,289,374				
itrib Ott	g	Noncash contributi 1a-1f \$	ons included in lines	1,333,745				
Con and	h	Total. Add line	s 1 a - 1 f	🗼	14,089,687			
				Business Code				
ını	2a	CAMPUS BASED	CATION		211,442,127	211,442,127		
Pe ve	ь	RESIDENTIAL/EDU COMMUNITY-BASE			87,861,204	87,861,204		
Se F	С	FOSTER CARE	_		27,418,135	27,418,135		
er vi	d	ACUTE CARE			6,817,124	6,817,124		
ા છ	е	CASE MANAGEMEN	IT		14,948,370	14,948,370		
Program Serwde Revenue	f	All other progra	am service revenue		23,434,324	23,434,324		
Ş.	_	T-4-1 A dd l	- 2- 25	_				
	g 3		s 2a-2f	-	371,921,284			
			ar amounts)		207,266	207,266		
	4	Income from inves	stment of tax-exempt bond	proceeds -	0			
	5	Royalties .		· · · •	0			
	6a	Gross rents	(ı) Real 142,936	(II) Personal				
	ь	Less rental	52,018					
	c	expenses Rental income	90,918	0				
	_	or (loss)			90,918			90,918
	d	Net rental inco	me or (loss) (i) Securities	(II) O ther	30,310			30,510
	7a	Gross amount from sales of assets other than inventory	284,128	435,239				
	b	Less cost or other basis and sales expenses	265,922	36,239				
	С	Gain or (loss)	18,206	399,000				
	d		ss)		417,206	417,206		
Other Revenue	8a	events (not inc \$688	s,059 s reported on line 1c)	1,258,754				
jer	b	Less direct ex	penses b	664,955				
₽	С		(loss) from fundraising		593,799			
	9a		from gaming activities ne 19					
	b c		penses b (loss) from gaming activ	uties	0			
		Gross sales of returns and allo	inventory, less owances .					
	b		oods sold b	antory :	0			
	С	Miscellaneou	(loss) from sales of inve s Revenue	Business Code				
	11a	ICPTR INTELL PROPERTY		611420	420,867			420,867
	b	MISCELLANE	DUS	900099	555,404			555,404
	С							
	d	All other reven	ue					
	e	Total. Add line:	s 11a-11d	· · · •	976,271			
	12	Total revenue.	See Instructions	🛌	388,296,431	372,545,756		1,067,189

	Statement of Functional Expenses	l - Ll L		1-kl /A \	
section	on 501(c)(3) and 501(c)(4) organizations must complete all columns. All				
D	Check if Schedule O contains a response or note to any line in this			(c)	<u> </u> (D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	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	0			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	4,383,361	1,881,010	2,140,147	362,204
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	212,067,552	189,503,236	21,437,723	1,126,593
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	7,691,604	6,425,725	1,198,996	66,883
9	Other employee benefits	38,295,922	34,762,412	3,376,115	157,395
10	Payroll taxes	15,581,491	13,904,761	1,580,456	96,274
11	Fees for services (non-employees)				
а	Management	0			
ь	Legal	185,204	58,536	125,650	1,018
С	Accounting	475,086	252,266	222,820	
d	Lobbying	71,477		71,477	
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	30,540,783	29,897,299	567,258	76,226
12	Advertising and promotion	329,057	319,845	307,230	9,212
13	Office expenses	21,360,665	19,461,768	1,630,645	268,252
14	Information technology	1,379,269	1,217,391	152,633	9,245
15		1,379,269	1,217,391	152,633	9,243
	Royalties		24 220 426	2 222 042	05.333
16 17	Occupancy	24,667,672	21,238,436	3,333,913	95,323
17 18	Payments of travel or entertainment expenses for any federal, state, or local public officials	2,408,871	1,752,377	630,876	25,618
19	Conferences, conventions, and meetings	126,295	28,497	97,671	127
20	Interest	2,726,945	2,726,945		
21	Payments to affiliates	0	· ,		
22	Depreciation, depletion, and amortization	11,908,011	10,053,657	1,843,708	10,646
23	Insurance	3,505,308	3,258,782	244,877	1,649
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	BAD DEBT	2,953,155	2,953,155		
b	GIFTS IN KIND OFFSET	1,085,201	1,085,201		
С	CONTINUING CARE	50,561		50,561	
d	EXTINGUISHMENT OF DEBT	120,796	120,796		
е	All other expenses	295,124	295,124		
25	Total functional expenses. Add lines 1 through 24e	382,209,410	341,197,219	38,705,526	2,306,665
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)				

Part X Balance Sheet

Par	't X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	0	1	0
	2	Savings and temporary cash investments	3,476,000	2	12,863,000
	3	Pledges and grants receivable, net	6,448,000	3	6,461,000
	4	Accounts receivable, net	47,459,000	4	43,906,000
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	-	0
s	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 instructions) Complete Part II of Schedule L		5	
ě			0		0
Assets	7	Notes and loans receivable, net	0	7	0
	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	7,859,000	9	10,855,000
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 300,248,000			
	b	Less accumulated depreciation 10b 192,843,000	105,815,000	10c	107,405,000
	11	Investments—publicly traded securities	9,604,000	11	7,365,000
	12	Investments—other securities See Part IV, line 11	2,082,000	12	2,428,000
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	1,459,000	15	1,412,000
	16	Total assets. Add lines 1 through 15 (must equal line 34)	184,202,000	16	192,695,000
	17	Accounts payable and accrued expenses	57,730,000	17	59,869,000
	18	Grants payable	0	18	0
	19	Deferred revenue	7,819,000	19	7,233,000
	20	Tax-exempt bond liabilities	47,388,000	20	40,262,000
Ø	21	Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	1,716,000	21	1,827,000
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
<u>ge</u>		persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	8,414,000	23	16,855,000
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	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 Schedule			
		D	23,352,000	25	25,371,000
	26	Total liabilities. Add lines 17 through 25	146,419,000	26	151,417,000
φ		Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete lines 27 through 29, and lines 33 and 34.			
Ĕ	27	Unrestricted net assets	23,828,000	27	27,538,000
<u>평</u>	28	Temporarily restricted net assets	13,955,000	28	13,740,000
=	29	Permanently restricted net assets	0	29	0
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
ŏ	30	Capital stock or trust principal, or current funds		30	
G S	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
¥	33	Total net assets or fund balances	37,783,000	33	41,278,000
Net	34	Total liabilities and net assets/fund balances	184,202,000	34	192,695,000
	34	rotar napinties and het assets/fullu paldifices	104,202,000	54	192,090,000

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				F
1	Total revenue (must equal Part VIII, column (A), line 12)	, l		200	006 421
2	Total expenses (must equal Part IX, column (A), line 25)				296,431
3	Revenue less expenses Subtract line 2 from line 1	2			209,410
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3			087,021
_	Not unuselized some (leases) on investments	4		37,7	783,000
5	Net unrealized gains (losses) on investments	5		1	.33,435
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		-2,7	25,456
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		41,2	278,000
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed or	ור		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b	Yes	

Software ID: Software Version:

EIN: 23-1390618

Name: The Devereux Foundation

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related	er more than one box, unless st person is both an officer irs and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1033-11130/	2/1033-14136)	related organizations
Samuel G Coppersmith	5 0	х		х				0		0
Chair, Trustee	2 0							, , ,		
Francis Genuardi	5 0	х		х				0		0
Vice Chair, Trustee Thomas Hays	2 0 5 0									
Trustee	2 0	Х						0		0
Clarence D Armbrister	2 0	×						0		0
Trustee	2 0							Ů		
Tamı Benton MD	2 0	х						0		0
Trustee Edwin Boynton	2 0									
Trustee	2 0	Х						0		0
Christopher D Butler	5 0			, , , , , , , , , , , , , , , , , , ,						
Vice Chair, Trustee	2 0	Х		Х				0		0
Robert D Ellis	2 0	X						0		0
Trustee Elva Ferrari-Graham	2 0									
Trustee		х						0		0
Robert Gottlieb	5 0 2 0									
Trustee	2 0	Х						0		0
John R Gunn	2 0	х						0		0
Trustee John Gustafsson	2 0							,		
	2 0	х						0		0
Trustee Peter R Haje	2 0									
Trustee	2 0	X						0		0
Howard Hassman DO	2 0	×						0		0
Trustee	2 0							Ů		
John Lowery	2 0	Х						0		0
Trustee Alba E Martinez	2 0									
Trustee	2 0	Х						0		0
James H Schwab	2 0	x						0		0
Trustee	2 0							0		0
I Steven Udvarhelyı MD	2 0	X						0		0
Trustee K Lisa Yang	2 0									
Trustee	2 0	х						0		0
Robert Q Kreider	58 0	<u> </u>		\						100.075
President and CEO, Trustee	5 0	Х		Х				617,057		109,876
Margaret M McGill	55 0			×				339,566		62,249
Sr VP and COO Robert C Dunne	5 0							,		,
	55 0			х				288,200		54,416
Sr VP and CFO Manlyn Benoit MD	5 0 55 0	-								
Sr VP and CCO	5 0			Х				333,859		36,833
Dolores McLaughlin	55 0			Х				269,956		50,997
Sr VP Genl Counsel and Secy	5 0			<u> </u>				209,930		30,537
Sarah E Lenahan	55 0			х				237,414		41,545
VP of Ops and Org Development	0 0						<u> </u>			

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors (A) (B) (D) (E) (F) (C) Name and Title Estimated amount Position (do not check Average Reportable Reportable of other hours per more than one box, unless compensation compensation week (list person is both an officer from the from related compensation any hours and a director/trustee) organization (Worganizations (Wfrom the 2/1099-MISC) 2/1099-MISC) for related organization and Former Highest compensated employee Individual trustee or director Institutional Trustee organizations related below employee organizations dotted line) L Gail Atkinson 55 0 Х 247,973 21,719 VP of Operations 3 0 Timothy Dillon 55 0 Χ 202,055 18,568 VP of HR 0 0 Martha Lindsay 55 0 Χ 206,403 15,272 VP Product Development 0 0 Lawrence W Williams 55 0 Х 198,456 18,238 VP Compliance and Admin 2 0 Leah Yaw 55 0 Χ 224,298 18,930 Sr VP of External Affairs 2 0 Carol Oliver 55 0 Х 224,231 31,531 VP Operations 0 0 Thomas Shurer 55 0 Х 146,045 15,868 VP Information Systems 0 0 David A Griffith 55.0 Χ 587 133,449 Controller 0 0 Roberta M Lewis 25 0 Χ 49,432 6,374 Assistant Secretary 0 0 Lorraine Barrett 55 0 Х 59,459 10,268 Assistant Secretary 0 0 Steven Murphy 55 0 Χ 201,143 32,322 Executive Director FL 3 0 John O'Keefe 55 0 Х 201,847 19,723 **Executive Director NY** 0 0 Tilden Reeder 60 0 Х 438,686 25,605 Psychiatrist 0 0 Imran Posner 55 0 Х 326,310 23,437 Psychiatrist 0 0 Jacqueline Zavodnick 55 0 Х 256,339 0 22,922 Medical Services Director 0 0 Ranjeeb Shrestha 55 0 Χ 289,937 6,554 Psychiatrist 0 0 Robert Handler 55 0 Х 253,541 24,433 Medical Services Director 0 0

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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.

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

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization
The Devereux Foundation

SCHEDULE A

(Form 990 or 990EZ)

Internal Revenue Service

Department of the

Treasury

Employer identification number

23-1390618

The o	rganı	zatıon ıs	not a privat	e foundation becaus	eitis (Forl	ines 1 thro	ugh 11, checl	k only one b	oox)				
1	\sqcap	A chur	ch, conventi	on of churches, or a	ssociation of	fchurches d	lescribed in s	ection 170((b)(1)(A)(i).				
2	\sqcap	A scho	ol described	in section 170(b)(1	L)(A)(ii). (At	tach Sched	ule E)						
3	Γ	A hosp	ıtal or a coo	perative hospital se	rvice organiz	zatıon desci	ıbed ın sectio	on 170(b)(1	.)(A)(iii).				
4	Γ			n organization operat ty, and state	ted in conjun	ction with a	hospital des	cribed in se	ection 170(b)(1)(A)(i	iii). Ente	er the	
5	Г			erated for the benefi	t of a college	or universi	ity owned or o	perated by	a government	tal unit	describ	ed ın	_
	·	_	•	A)(iv). (Complete P	_		•						
6	\Box			local government or		tal unit desc	cribed in sect i	ion 170(b)(1)(A)(v).				
7	Γ	_		at normally receives		•	support from	a governm	ental unit or f	rom the	genera	l public	:
8	Г		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)										
9	ī		•	at normally receives			•	•	butions, mem	bership	fees.a	nd aros	s
	·	_		ities related to its ex	-				•	-	•	_	
		ıts sup	port from gr	oss investment inco	me and unre	lated busine	ess taxable ın	come (less	section 511	tax) fro	m busın	esses	
		acquire	ed by the org	janızatıon after June	30,1975 S	ee section	509(a)(2). (C	omplete Pa	art III)	•			
10	Γ	An org	anızatıon org	ganızed and operateo	d exclusively	to test for	public safety	See sect ic	on 509(a)(4).				
11		An org	anızatıon org	ganized and operated	d exclusively	for the ben	efit of, to peri	form the fur	nctions of, or t	o carry	out the	purpos	ses of
			one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h										
	_	a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated											
е	1	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											
			n 509(a)(2)	on managers and oc	ner than one	or more pur	blicly support	eu organiza	icions describ	eu iii se	ection 5	0 3 (a)(1) 01
f		If the c	rganization	received a written de	etermination	from the IR	RS that it is a	Type I, Typ	pe II, or Type	III sup	porting	organı	zation,
g			this box August 17-2	2006, has the organi	ization accer	oted any dif	t or contributi	on from any	v of the				J
9			ng persons?	e o o o , mao amo o i gam	izacion accep	occu um, gm		on nom any	, 0, 1, 0				
		(i) A p	erson who d	irectly or indirectly o	ontrols, eith	er alone or	together with	persons de	escribed in (ii)			Yes	No
		and (111) below, the	governing body of th	ie supported	organızatıo	n?				11g(i)		No
		(ii) A f	amıly memb	er of a person descr	ıbed ın (ı) ab	ove?					11g(ii)		Νo
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı)	above?				11g(iii))	No
h		Provide	the followi	ng information about	the support	ed organizat	tion(s)						
) Nam	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did you	ı notify	(vi) Is	tha	1,	vii) An	nount of
-	uppoi		(11) [11]	organization	organizati		the organi	•	organizat		'	-	etary
		ation		(described on	col (i) lis		ın col (i) d		col (i) org				port
				lınes 1- 9 above	your gove	_	suppor	t?	ın the U	S?			
				or IRC section	docume	nt?							
				(see instructions))		T							
				macractions)	Yes	No	Yes	No	Yes	No			
Total													

Sch	edule A (Form 990 or 990-EZ) 2013						Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201:	3 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
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)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is t	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and stop here. The organization qua 33 1/3% support test—2012. If the				and line 15 is 33	8 1/3% or more	
	box and stop here. The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	-2013. If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	-2012 . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	▶ 厂
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		▶ □
18	Private foundation. If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	16,652,524	10,965,472	12,757,497	12,166,753	13,575,158	66,117,404
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	359,419,747	364,255,600	363,886,142	359,727,286	371,921,284	1,819,210,059
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0
6	Total. Add lines 1 through 5	376,072,271	375,221,072	376,643,639	371,894,039	385,496,442	1,885,327,463
7a	A mounts included on lines 1, 2, and 3 received from disqualified persons						0
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						0
c	Add lines 7a and 7b						0
8	Public support (Subtract line 7c from line 6)						1,885,327,463
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	A mounts from line 6	376,072,271	375,221,072	376,643,639	371,894,039	385,496,442	1,885,327,463
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties and income from similar sources	998,290	4,462,254	2,747,858	3,747,350	715,390	12,671,142
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
С	Add lines 10a and 10b	998,290	4,462,254	2,747,858	3,747,350	715,390	12,671,142
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	1,170,189	1,775,122	1,627,439	2,207,596	2,077,808	8,858,154
13	Total support. (Add lines 9, 10c, 11, and 12)	378,240,750	381,458,448	381,018,936	377,848,985	388,289,640	1,906,856,759
14	First five years. If the Form 990 is check this box and stop here ction C. Computation of Pul		·	I, third, fourth, or	fifth tax year as a	a 501(c)(3) orga	nization, ▶┌
<u>5e</u> 15	Public support percentage for 201			13. column (f))		15	98 871 %
16	Public support percentage from 20			_ 5 , 5 5 idilili (i))		16	98 871 %
Se	ction D. Computation of Inv	estment Inco	ome Percenta	ge		1	
17	Investment income percentage for	2013 (line 10c, d	column (f) dıvıded	by line 13, colun	nn (f))	17	0 664 %
18	Investment income percentage fro	m 2012 Schedule	A, Part III, line 1	. 7		18	0 692 %
19a	33 1/3% support tests—2013. If th	e organization did	d not check the bo	x on line 14, and	line 15 is more t	han 33 1/3%, and	l line 17 is not

^{33 1/3%} support tests—2012. 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

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

Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).								
Facts And Circumstances Test								
Retu	ırn Reference	Explanation						
		Schodulo A / Form 0	000 er 000 E7) 201					

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493128011965

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-FZ, Part V, line 35c (Proxy Tax), then

	me of the organization Devereux Foundation			Emplo	yer ider	ntification number
THE	Develeux Foundation			23-1	390618	
Par	t I-A Complete if the or	ganization is exempt under	section 501(c) or is a secti	on 527	7 organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect polit	ıcal campaıgn act	ıvıtıes ın Part IV		
2	Political expenditures				>	\$
3	Volunteer hours					
Par	Complete if the or	ganization is exempt under	section 501(c)(3).		
1		e tax incurred by the organization ui				\$
2	Enter the amount of any excise	tax incurred by organization mana	gers under sectio	n 4955	.	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 47	20 for this year?			☐ Yes ☐ No
4a	Was a correction made?					┌ Yes ┌ No
b	If "Yes," describe in Part IV					
Par	t I-C Complete if the or	ganization is exempt under	section 501(c), except sec	ion 50)1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for s	ection 527 exemp	ot function activitie	s 🕨	\$
2	Enter the amount of the filing o exempt function activities	rganization's funds contributed to c	ther organizations	s for section 527	.	\$
3	·	tures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17b	F	\$
4	Did the filing organization file F	Form 1120-POL for this year?				↑ Yes No
5	organization made payments F amount of political contribution	nd employer identification number (I For each organization listed, enter t ns received that were promptly and political action committee (PAC) I	he amount paid fro directly delivered	om the filing organi to a separate polit	zatıon's ıcal orga	funds Also enter the anization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount pa filing organiza funds If none, e	tıon's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

section 4911 tax for this year?

┌ Yes ┌ No

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check ► If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	71,477	
c	Total lobbying expenditures (add lines 1a and 1	71,477		
d	Other exempt purpose expenditures	330,446,864		
e	Total exempt purpose expenditures (add lines 1	330,518,341		
f	Lobbying nontaxable amount Enter the amount columns	rom the following table in both	1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
				1
g	Grassroots nontaxable amount (enter 25% of lir	ne 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -		
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -		
j	If there is an amount other than zero on either lii	ne 1h or line 1i, did the organization file Form 4720) reporting	□ Ves □ No

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expenditures During 4-Year Averaging Period										
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total					
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000					
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000					
c	Total lobbying expenditures	213,285	138,386	97,411	71,477	520,559					
_d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000					
е 	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000					
f	Grassroots lobbying expenditures										

	•	on under section 501(h)).	(a	1)		(b)	
For e activ	·	low, provide in Part IV a detailed description of the lobbying	Yes	No	Aı	noun	t
1	legislation, including any attempt to influ through the use of	n attempt to influence foreign, national, state or local ience public opinion on a legislative matter or referendum,					
a	Volunteers?				4		
b C	Media advertisements?	ensation in expenses reported on lines 1c through 1i)?			1		
d	Mailings to members, legislators, or the	public?					
е	Publications, or published or broadcast s	statements?					
f	Grants to other organizations for lobbyin	g purposes?					
g		ffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conv	entions, speeches, lectures, or any similar means?					
i	O ther activities?						
j	Total Add lines 1c through 1i						
2a		anization to be not described in section 501(c)(3)?			1		
b	If "Yes," enter the amount of any tax inc						
с		urred by organization managers under section 4912	ı				
		on 4912 tax, did it file Form 4720 for this year?	-01/-	\/=\		-4:-	
161	501(c)(6).	ation is exempt under section 501(c)(4), section 5	OT(C)(5),	or se	Ctio	n
	301(0)(0).				Τ.	Yes	No
1	Were substantially all (90% or more) du	es received nondeductible by members?		Γ	1		
2	Did the organization make only in-house	lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over	lobbying and political expenditures from the prior year?			3		
Pai		ation is exempt under section 501(c)(4), section 5 (a) BOTH Part III-A, lines 1 and 2, are answered " s."					
1	Dues, assessments and similar amounts	from members	1				
2	Section 162(e) nondeductible lobbying a expenses for which the section 527(f) to	and political expenditures (do not include amounts of political ax was paid).					
а	Current year		2a				
b	Carryover from last year		2b				
С	Total		2c				
3		033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4		ine 2c exceeds the amount on line 3, what portion of the excess to the reasonable estimate of nondeductible lobbying and					
	political expenditure next year?	to the reasonable estimate of hondeductible lobbying and	4				
5	Taxable amount of lobbying and political	expenditures (see instructions)	5				
P	art IV Supplemental Informat	ion					
	ovide the descriptions required for Part I-A rt II-B, line 1 Also, complete this part for a	., line 1, Part l-B, line 4, Part l-C, line 5, Part II-A (affiliated grou	ıp lıst),	Part II	-A, lın	e 2,	and
	Return Reference	Explanation					
L Part	II-A Devere	eux's lobbying activities relate to garnering greater support for inc	dıvıdual	s with	behavı	oral,	
		ctual and developmental disabilities and educating legislators abo					

Belledale e (Form 330 of	-		rage -r
Part IV Suppler	nental Information <i>(continu</i>	ed)	
Return Referer	ce	Explanation	
-			
-			

Schedule D (Form 990) 2013

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DLN: 93493128011965

OMB No 1545-0047

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. ▶ Information about Schedule D (Form 990) and its instructions is at $\underline{www.irs.gov/form990}$.

Open to Public

Name of the The Devereux F	organization Foundation		Employer identification number					
				1390618				
	Organizations Maintaining Donor Adv rganization answered "Yes" to Form 990		unds	or Accoun	i ts. Comple	te if the		
		(a) Donor advised funds		(b) Funds ar	nd other acco	unts		
L Total nur	mber at end of year							
A ggregat	te contributions to (during year)							
Aggregat	te grants from (during year)							
Aggregat	te value at end of year							
	organization inform all donors and donor advis- e the organization's property, subject to the oi	-	nor advı	ised	☐ Yes	┌ No		
used onl	organization inform all grantees, donors, and d ly for charitable purposes and not for the bene ng impermissible private benefit?				┌ Yes	┌ No		
art II C	onservation Easements. Complete If	the organization answered "Yes" t	o Forn	n 990, Part	IV, line 7.			
☐ Pres ☐ Prote ☐ Pres	(s) of conservation easements held by the org ervation of land for public use (e g , recreation ection of natural habitat ervation of open space te lines 2a through 2d if the organization held a	or education) Preservation of ar Preservation of a	certifie	d historic sti	ructure			
easemer	nt on the last day of the tax year							
a Total nu	mber of conservation easements		22	Held at t	he End of the	e Year		
	reage restricted by conservation easements		2a 2b					
	of conservation easements on a certified histo	oric structure included in (a)	2C					
Number	of conservation easements included in (c) accostructure listed in the National Register	• •	2d					
	of conservation easements modified, transferi	red, released, extinguished, or terminate	ed by th	ne organizati	on durina			
Number the tax y		, · · · · · · · · · · · · · · · · · ·	,	J				
·								
	of states where property subject to conservat							
	e organization have a written policy regarding a nent of the conservation easements it holds?	the periodic monitoring, inspection, han	dling of	·violations, a	Yes	┌ No		
Staff and ►	d volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easer	ments c	luring the ye	ar			
	of expenses incurred in monitoring, inspecting	g, and enforcing conservation easement	s durınç	g the year				
Does ea	ch conservation easement reported on line 2(cion 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	ction 17	70(h)(4)(B)(ı) ┌ Yes	┌ No		
balance	KIII, describe how the organization reports co sheet, and include, if applicable, the text of th nization's accounting for conservation easeme	e footnote to the organization's financia						
	Organizations Maintaining Collection of the organization answered "Y		or Otl	her Simila	ır Assets.			
works of	ganization elected, as permitted under SFAS 1 art, historical treasures, or other similar asse provide, in Part XIII, the text of the footnote t	ts held for public exhibition, education,	or rese	arch in furth				
works of	ganization elected, as permitted under SFAS 1 art, historical treasures, or other similar asse provide the following amounts relating to thes	ts held for public exhibition, education,				olic		
(i) Reve	nues included in Form 990, Part VIII, line 1			► \$				
(ii) _{Asse}	ets included in Form 990, Part X			> \$				
If the or	ganization received or held works of art, histor amounts required to be reported under SFAS							
a Revenue	es included in Form 990, Part VIII, line 1			► \$				
b Assets I	ncluded in Form 990, Part X			► \$				

Part	Organizations Maintaining Co	llections of Art	<u>, His</u>	storica	<u>al Tr</u>	easu	<u>ires, or O</u>	the	<u>r Similar As</u>	ssets (c	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, cl	heck an	y of tl	he foll	owing that a	are a	significant use	e of its	
а	Public exhibition		d	Гι	_oan c	or exc	hange progr	ams			
b	Scholarly research		e	Γ (Other						
С	Preservation for future generations										
4	Provide a description of the organization's c Part XIII	ollections and expla	ın hov	w they 1	furthe	r the c	organızatıon	's ex	empt purpose	ın	
5	During the year, did the organization solicit								ılar		–
Day	assets to be sold to raise funds rather than t IV Escrow and Custodial Arrang								oc" to Form (┌ Yes	☐ No
Fal	Part IV, line 9, or reported an ar						Tanswere	u i	es to roilli	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						or other ass	ets r	not	┌ Yes	✓ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	follov	wing tal	ole		_				
									1A	nount	
С	Beginning balance						<u> </u>	1c			
d	Additions during the year							1d			
е	Distributions during the year							1e			
f	Ending balance						L	1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	e 21?	•						✓ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II Check here if the	expl	anation	has b	been p	rovided in F	art :	XIII		ᅜ
Pa	rt V Endowment Funds. Complete	ıf the organızatıoı									
		(a)Current year	(b)	Prior yea	-	b (c) Tv	vo years back		Three years back		years back
1a	Beginning of year balance	92,722,000		83,169			104,531,000		93,604,000		76,559,000
Ь	Contributions	6,934,697		3,23	1,190						6,260,000
С	Net investment earnings, gains, and losses	14,904,265		11,12	8,356		-137,624		20,293,000		10,785,000
d	Grants or scholarships										
e	Other expenditures for facilities and programs	1,334,285		•	1,870		21,112,952		9,250,000		
f	Administrative expenses	119,677		114	1,676		111,424		116,000		
g	End of year balance	113,107,000		92,72	2,000		83,169,000	İ	104,531,000		93,604,000
2	Provide the estimated percentage of the cur	rent year end baland	ce (lır	ne 1g, c	olumr	n (a)) l	held as				
а	Board designated or quasi-endowment 🕨	87 000 %									
b	Permanent endowment ► 4 000 %										
c	Temporarily restricted endowment ► 9 C The percentages in lines 2a, 2b, and 2c sho	000 % uld equal 100%									
3a	Are there endowment funds not in the posse	ssion of the organiz	atıon	that ar	e held	and a	dministered	d for	the		
	organization by									Yes	+
	(i) unrelated organizations							•	3a 3a	• • • • • • • • • • • • • • • • • • • •	No
ь	If "Yes" to 3a(II), are the related organization							•	3		
4	Describe in Part XIII the intended uses of t	•						•		_	
Par	Land, Buildings, and Equipme 11a. See Form 990, Part X, line		the o	rganız	ation	ansv	wered 'Yes	' to	Form 990, Pa	art IV, I	ine
	Description of property				ost or o investn		(b)Cost or ot basis (other		(c) Accumulated depreciation	(d) B	ook value
1a	_and					0	5,798	,074			5,798,074
b	Buildings					0	173,573		99,231,66	4	74,342,091
c	_easehold improvements					0	6,801		2,128,55		4,673,268
d I	Equipment					0	36,677	,529	30,711,05	1	5,966,478
e	Other		<u>. </u>			0	77,396	,535	60,771,44	6	16,625,089
Tota	. Add lines 1a through 1e <i>(Column (d) must c</i>	equal Form 990, Part	X, colu	umn (B)	, line i	10(c).)			🛌	1	07,405,000
									Schedule I	D (Form	990) 2013

provided in Part XIII

Part VIII Investments—Other Securities. Col	mplete if the organization	answered 'Yes' to Form 990, P	art IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation	
(including name of security)		Cost or end-of-year market va	lue
(1)Financial derivatives (2)Closely-held equity interests			
Other			
		<u> </u>	
		1	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<u> </u>		
Part VIII Investments—Program Related. Consideration See Form 990, Part X, line 13.	omplete if the organization	on answered 'Yes' to Form 990,	Part IV, line 11c.
(a) Description of investment	(b) Book value	(c) Method of valuation	
		Cost or end-of-year market va	lue
		1	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization	n an away and IV and to Forms 00	0. Down IV. Ivon 11.4 Con Forms 000	Dawt V. Ivaa 1 F
(a) Descri			ook value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1			
Part X Other Liabilities. Complete if the organized Form 990, Part X, line 25.	anızatıon answered 'Yes'	to Form 990, Part IV, line 11e o	or 11f. See
1 (a) Description of liability	(b) Book value		
Federal income taxes	0		
ESTIMATED 3RD PARTY PAYOR SETT	13,048,000		
CONTINUING CARE OBLIGATION	6,604,000		
LOAN FROM HELENA DEV	3,955,000		
OTHER	1,764,000		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	25,371,000	no organizationis financial in i	sta that
2. Liability for uncertain tax positions In Part XIII, provid reports the organization's liability for uncertain tax positions.			

Part		Revenue per Audited Financial Statements With Revenue swered 'Yes' to Form 990, Part IV, line 12a.	per K	eturn Complete if
1		her support per audited financial statements	1	
2	Amounts included on line 1	but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on inve	stments		
b	Donated services and use o	f facilities 2b	1	
C	Recoveries of prior year gra	nts	1	
d	Other (Describe in Part XIII	i)	1	
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	1
4	Amounts included on Form 9	990, Part VIII, line 12, but not on line 1		
а	Investment expenses not in	cluded on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII	1)	1	
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 a	nd 4c. (This must equal Form 990, Part I, line 12)	5	
Part	XIII Reconciliation of	Expenses per Audited Financial Statements With Expense	s per	Return. Complete
		inswered 'Yes' to Form 990, Part IV, line 12a.		т
1	·	per audited financial statements	1	
2		but not on Form 990, Part IX, line 25		
а		f facilities	4	
b				
С	Other losses			
d	Other (Describe in Part XIII	()	_	
е	Add lines 2a through 2d .		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 9	90, Part IX, line 25, but not on line 1:		
а	•	cluded on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII	()	_	
C	Add lines 4a and 4b		4c	
5		and 4c. (This must equal Form 990, Part I, line 18)	5	
Part	XIII Supplemental I	nformation		
Part \		or Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2 (I, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to		de any additional
	Return Reference	Explanation		
Part V	Line 4	The endowment funds are held by a related non-profit organization, Hele (HDF) HDF invests funds transferred to it from the Devereux Foundation these investments to further Devereux's mission of changing lives and rithrough a wide range of services and supports for individuals and familie the HDF endowment is \$113,107,000 Endowment funds are used to su through the implementation of a spending rule, which currently calls for a 5% of the average endowment balance over the last 3 years	n and us urturin s The pport D	ses the earnings from ig human potential end of year balance for evereux's programs
Part I\	V Line 2b	Devereux maintains Social Security client trust funds held for current ne residents receiving treatment services. These funds are required to be reaccounts.		

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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DLN: 93493128011965

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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. Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Supplemental Information Regarding

Open to Public Inspection

	ne of the organization Devereux Foundation						Employer iden	tification number
116	Devereux i oundation						23-1390618	
Pa	rt I Fundraising Act Form 990-EZ filers				on answered "Yes" part.	to Form	n 990, Part IV	, line 17.
1	Indicate whether the organ	ızatıon raısed funds	through aı	ny of the f	following activities Ch	eck all th	hat apply	
а	Mail solicitations			е	Solicitation of nor	n-govern	ment grants	
b	Internet and email soli	cıtatıons		f	Solicitation of gov	/ernmen	t grants	
c	Phone solicitations			g	☐ Special fundraisin	g events	s	
d	In-person solicitations	;						
2a	Did the organization have a or key employees listed in							Г _{Yes} Г _N
b	If "Yes," list the ten highes to be compensated at least			fundraıseı	rs) pursuant to agreem	ents und	der which the fu	ndraiser is
	(i) Name and address of ındıvıdual or entity (fundraiser)	(ii) Activity	fundrais custo cont contrib	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(orı	mount paid to retained by) aiser listed in col (i)	(vi) A mount paid to (or retained by) organization
1			Yes	No				
1								
2								
3								
4								
·								
5								
_								
6								
7								
8								
9								
10								
ota	ıl			>				
3	List all states in which the registration or licensing	organization is regis	tered or li	censed to	solicit contributions o	r has be	en notified it is	exempt from

Sche	dule	G (Form 990 or 990-EZ) 2013				Page 2							
Pai	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts of	aising event contribut										
			(a) Event #1 PA Gala (event type)	(b) Event #2 PA Golf Outing (event type)	(c) O ther events 19 (total number)	(d) Total events (add col (a) through col (c))							
ξ	1	Gross receipts	419,735	224,690	1,302,388	1,946,813							
Revenue	2	Less Contributions	96,480	64,265	12,785	173,530							
ě	3	Gross income (line 1	222.255	160.435									
	_	minus line 2)	323,255										
	4	Cash prizes	C	-									
မှာ	5	Noncash prizes	4,999	0	48,361	53,360							
Expenses	6	Rent/facility costs	39,005	43,746	54,626	137,377							
	7	Food and beverages .	64,790	32,531	117,656	214,977							
Direct	8	Entertainment	13,650	0	32,443	46,093							
Δ	9	Other direct expenses .	107,768	9,461	95,480	212,709							
	10	Direct expense summary Add lir	nes 4 through 9 in column	n (d)		(664,956)							
	11												
Par	t II			"Yes" to Form 990, Pa	rt IV, line 19, or repo	1,108,327 rted more than							
Revenue		\$15,000 on Form 990-EZ, li	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))							
<u>~</u>	1	Gross revenue											
Ses	2	Cash prizes											
Expenses	3	Non-cash prizes											
Direct E	4	Rent/facility costs											
Ē	5	Other direct expenses											
	6	Volunteer labor	│ Yes	┌ Yes % No	┌ Yes %								
	7	Direct expense summary Add line	es 2 through 5 ın column ((d)	•								
	8	Net gaming income summary Sub	tract line 7 from line 1, co	olumn (d)									
9	Ent	ter the state(s) in which the organiz	ation operates gaming ac	tivities									
a b		the organization licensed to operate 'No," explain				. Fyes FNo							
10a b		re any of the organization's gaming 'Yes," explain	licenses revoked, susper	nded or terminated during	the tax year?								

						1:
Does	s the organization operate gaming activi	ties with nonmember	rs?		T Yes T No	
12	Is the organization a grantor, beneficia					
	formed to administer charitable gaming	g [,]			· Fyes [– No
13	Indicate the percentage of gaming act	ıvıty operated ın				
а	The organization's facility					%
b	An outside facility			13b		%
14	Enter the name and address of the per	son who prepares the	e organization's gaming/special e	vents books and reco	ords	
	Name ▶					
	Address 🟲					
15a b	Does the organization have a contract revenue?	evenue received by t	the organization 🟲 \$		· · 「Yes「	– No
	amount of gaming revenue retained by	the third party 🟲 \$ _				
C	If "Yes," enter name and address of th	e thırd party				
	Name ▶					
	Address ►					
16	Gaming manager information					
	Name ▶					
	Gaming manager compensation ► \$					
	Description of services provided					
	Director/officer	T Employee	☐ Independent cor	ntractor		
17	Mandatory distributions					
а	Is the organization required under stat	e law to make charit	able distributions from the gaming	g proceeds to		
	retain the state gaming license?				┌ Yes 「	— No
b	Enter the amount of distributions requi	red under state law (distributed to other exempt organi	ızatıons or spent		
	ın the organızatıon's own exempt actıv	ities during the tax y	∕ear ⊳ \$			
Pai		5b, 15c, 16, and 1	xplanations required by Part I 7b, as applicable. Also compl			and
	Return Reference		Explanat	ıon		
		<u> </u>	<u> </u>		rm 990 or 990-	7) 2012

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DLN: 93493128011965

OMB No 1545-0047

Inspection

SCHEDULE H (Form 990)

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes" to Form 990, Part IV, question 20. ► Attach to Form 990. ► See separate instructions.

Hospitals

▶ Information about Schedule H (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization The Devereux Foundation

Employer identification number

23-1390618

Pa	rt I Financial Ass	istance and	d Certain (Other Community I	Benefits at Cost						
				•				Yes	No		
1a	Did the organization have	e a financial as	ssistance pol	licy during the tax year?	If "No," skip to questi	on 6a	1a	Yes			
b	If "Yes," was it a written	policy?					1b	Yes			
2	If the organization had m financial assistance polic					oplication of the					
	A pplied uniformly to a Generally tailored to				nly to most hospital fac	cilities					
3	Answer the following bas organization's patients d			nce eligibility criteria th	at applied to the larges	t number of the					
а	Did the organization use If "Yes," indicate which o					providing <i>fre</i> e care?	3a	Yes			
	┌ 100%	200%	ther								
b Did the organization use FPG as a factor in determining eligibility for providing <i>discounted</i> care? If "Yes," indicate which of the following was the family income limit for eligibility for discounted care											
c If the organization used factors other than FPG in determining eligibility, describe in Part VI the income based criteria for determining eligibility for free or discounted care. Include in the description whether the organization used an asset test or other threshold, regardless of income, as a factor in determining eligibility for free or discounted care.											
4 Did the organization's financial assistance policy that applied to the largest number of its patients during the tax year provide for free or discounted care to the "medically indigent"?											
provide for free or discounted care to the "medically indigent"?											
b	·			expenses exceed the b	udgeted amount?		<u>5a</u> 5b	Yes			
b If "Yes," did the organization's financial assistance expenses exceed the budgeted amount?											
_	care to a patient who was	_				ŀ	5c		No		
	Did the organization prep		•	-	·?		6a		No		
b	If "Yes," did the organiza			·			6b				
	Complete the following to worksheets with the Scho	-	worksneets p	provided in the Schedule	H INSTRUCTIONS DO NOT	submit these					
7			Other Com	munity Benefits at Co	st						
	ancial Assistance and Means-Tested overnment Programs	(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community benefit expense	(d) Direct offsetting revenue	(e) Net community ben- expense		(f) Perce otal exp			
а	Financial Assistance at cost (from Worksheet 1)						\top				
b	Medicaid (from Worksheet 3, column a)			5,209,984	4,626,947	583,0	037				
С	Costs of other means-tested government programs (from Worksheet 3, column b)										
d	Total Financial Assistance and Means-Tested Government Programs			5,209,984	4,626,947	583,	137				
е	Other Benefits Community health improvement services and community benefit operations			5,255,750	1,020,511	333,					
f	(from Worksheet 4) Health professions education (from Worksheet 5)						+				
g	Subsidized health services (from Worksheet 6)										
h	Research (from Worksheet 7)						ightharpoons				
1	Cash and in-kind contributions for community benefit (from Worksheet 8)										
) k	Total. Other Benefits Total. Add lines 7d and 7i .			5.209.984	4.626.947	583.0	137				

Pa	rt II Community Buildi activities during the of the communities	tax year, an								uıldın	
	or the communities	(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community building expense	1 ' '	rect offs revenue	-	(e) Net communit building expense		(f) Perc total ex	
1	Physical improvements and housing										
2	Economic development										
3	Community support										
4	Environmental improvements										
5	Leadership development and training										
6	for community members Coalition building								_		
	Community health improvement advocacy										
8	Workforce development										
9	Other										
10	Total	0 C-11	tion Buotin								
	t IIII Bad Debt, Medicar ion A. Bad Debt Expense	e, & Collec	tion Practic	es						Yes	No
1	Did the organization report ba	d debt expense	e ın accordance	e with Heathcare Fi	nancıal M	anagei	ment As	ssociation		103	110
	Statement No 15?								1	Yes	
2	Enter the amount of the organ methodology used by the orga					2		27,600			
3	Enter the estimated amount o patients eligible under the org the methodology used by the any, for including this portion	anızatıon's fina organızatıon to	ancial assistan estimate this	ce policy Explain i amount and the rat	n Part VI Ionale, If	3		48,000			
4	Provide in Part VI the text of or the page number on which t						ribes ba	nd debt expense			
Sect	ion B. Medicare										
5	Enter total revenue received f		-	•		—					
6	Enter Medicare allowable cost		,			6					
7 8	Subtract line 6 from line 5 Th Describe in Part VI the extend Also describe in Part VI the c Check the box that describes	t to which any osting method	shortfall report ology or source	ed in line 7 should	be treated						
	Cost accounting system	Γc。	st to charge ra	tio Г	Other						
Sect	ion C. Collection Practices										
9a	Did the organization have a wi								9a		
b	If "Yes," did the organization's contain provisions on the coll assistance? Describe in Part	ection practice	s to be followe	d for patients who a	re known	to qua	lify for	financial	9b		
Pa	rt IV Management Comp	anies and	Joint Ventur	es (owned 10% or more b	y officers, dire	ectors, tru	ıstees, key	employees, and physici	ans—se	e instruct	ions)
	(a) Name of entity	(t	Description of pi activity of entit		(c) Organiz profit % o ownersh	r stock	e) Officers, directors, trustees, or key mployees' profit % stock ownership %	pro	e) Physic fit % or wnershi	stock
1 NA											
2											
3											
4		+		+			-		+		
									-		
5											
6											
7											
8											
9											
10											
11											
12											
13									+		

Part V Facility Information										
Section A. Hospital Facilities	Licensed	General	Children's	Teachi	Ortical	Resea	ER-24 houre	ER-other		
(list in order of size from largest to smallest—see instructions) How many hospital facilities did the organization operate during the tax year?	ed hospital	ત્રો medical & ક્યા gical	n's hospital	Teaching hospital	l access hospital	Research facility	houre	ner		
and state license number		2							Other (Describe)	Facility reporting group
See Additional Data Table										

Schedule H (Form 990) 2013

Part V Facility Information (continued)

Section B. Facility Policies and Practices

(Complete a separate Section B for each of the hospital facilities or facility reporting groups listed in Part V, Section A)

	Childrens Benavioral Health Center
Name of hospital facility or facility reporting group	

hos	oital facility (from Schedule H, Part V, Section A)	_		г
^	marinity Haalth Manda Acceptant (Lines 1 through 9 c are entional far tay years hagining on ar hafara March 22, 2012)		Yes	N
1	munity Health Needs Assessment (Lines 1 through 8c are optional for tax years begining on or before March 23, 2012) During the tax year or either of the two immediately preceding tax years, did the hospital facility conduct a community			
_	health needs assessment (CHNA)? If "No," skip to line 9	1		N
	If "Yes," indicate what the CHNA report describes (check all that apply)			Π
а	A definition of the community served by the hospital facility			
b	Demographics of the community			
C	Existing health care facilities and resources within the community that are available to respond to the health needs of the community			
d	How data was obtained			
e	The health needs of the community			
f	Primary and chronic disease needs and other health issues of uninsured persons, low-income persons, and minority groups			
g	The process for identifying and prioritizing community health needs and services to meet the community health needs			Ì
h	The process for consulting with persons representing the community's interests			ĺ
i	Information gaps that limit the hospital facility's ability to assess the community's health needs			
j	Other (describe in Part VI)			Ì
<u> </u>	Indicate the tax year the hospital facility last conducted a CHNA 20			Ì
3	In conducting its most recent CHNA, did the hospital facility take into account input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge of or expertise in public health? If "Yes," describe in Part VI how the hospital facility took into account input from persons who represent the community, and identify the persons the hospital facility	3		
	Consulted			H
•	facilities in Part VI	4		
5	Did the hospital facility make its CHNA report widely available to the public?	5		
	If "Yes," indicate how the CHNA report was made widely available (check all that apply)			
а	Hospital facility's website (list url)			
b	Other website (list url)			
c	A vailable upon request from the hospital facility			
d	Other (describe in Part VI)			
	If the hospital facility addressed needs identified in its most recently conducted CHNA, indicate how (check all that apply as of the end of the tax year)			
	A doption of an implementation strategy that addresses each of the community health needs identified through the CHNA			
b	Execution of the implementation strategy			İ
C	Participation in the development of a community-wide plan			
d	Participation in the execution of a community-wide plan			
e	Inclusion of a community benefit section in operational plans			
f	Adoption of a budget for provision of services that address the needs identified in the CHNA			
g	Prioritization of health needs in its community			
h	Prioritization of services that the hospital facility will undertake to meet health needs in its community			
i	Other (describe in Part VI)			
7	Did the hospital facility address all of the needs identified in its most recently conducted CHNA? If "No," explain in Part VI which needs it has not addressed and the reasons why it has not addressed such needs	7		
3a	Did the organization incur an excise tax under section 4959 for the hospital facility's failure to conduct a CHNA as			
L	required by section 501(r)(3)?	8a		\vdash
	If "Yes" to line 8a, did the organization file Form 4720 to report the section 4959 excise tax?	8b		

Pa	art V Facility Information (continued)			
	ancial Assistance Policy		Yes	No
9	Did the hospital facility have in place during the tax year a written financial assistance policy that			
	Explained eligibility criteria for financial assistance, and whether such assistance includes free or discounted care?		Yes	
10	Used federal poverty guidelines (FPG) to determine eligibility for providing <i>fre</i> e care?	10	Yes	
	If "Yes," indicate the FPG family income limit for eligibility for free care% If "No," explain in Part VI the criteria the hospital facility used			
11	Used FPG to determine eligibility for providing <i>discounted</i> care?	11	Yes	
	If "Yes," indicate the FPG family income limit for eligibility for discounted care% If "No," explain in Part VI the criteria the hospital facility used			
12	Explained the basis for calculating amounts charged to patients?	12		Νo
	If "Yes," indicate the factors used in determining such amounts (check all that apply)			
а	Income level			
b	Asset level			
c	Medical indigency			
d	Insurance status			
е	Uninsured discount			
f	Medicaid/Medicare			
g	State regulation			
h	Residency			
i	Other (describe in Part VI)			
13	13 Explained the method for applying for financial assistance?		Yes	
14	Included measures to publicize the policy within the community served by the hospital facility?	14		Νo
	If "Yes," indicate how the hospital facility publicized the policy (check all that apply)			
а	The policy was posted on the hospital facility's website			
b	The policy was attached to billing invoices			
c	The policy was posted in the hospital facility's emergency rooms or waiting rooms			
d	The policy was posted in the hospital facility's admissions offices			
е	The policy was provided, in writing, to patients on admission to the hospital facility			
f	The policy was available upon request			
g	O ther (describe in Part VI)			
	ling and Collections			
15	Did the hospital facility have in place during the tax year a separate billing and collections policy, or a written financial assistance policy (FAP) that explained actions the hospital facility may take upon non-payment?	15		No
16	Check all of the following actions against an individual that were permitted under the hospital facility's policies during the tax year before making reasonable efforts to determine the individual's eligibility under the facility's FAP			
а	Reporting to credit agency			
b	Lawsuits			
c	Liens on residences			
d	Body attachments			
е	Other similar actions (describe in Section C)			
17	Did the hospital facility or an authorized third party perform any of the following actions during the tax year before making reasonable efforts to determine the individual's eligibility under the facility's FAP?	17		No
	If "Yes," check all actions in which the hospital facility or a third party engaged			
а				
b	Lawsuits			
c	Liens on residences			
d	Body attachments			
_	C Other cimilar actions (describe in Section C)		1	

If "Yes," explain in Part VI

Pá	art V Facility Information (continued)			
18	Indicate which efforts the hospital facility made before initiating any of the actions listed in line 17 (check all that apply)			
а	Notified individuals of the financial assistance policy on admission			
b	Notified individuals of the financial assistance policy prior to discharge			
C	Notified individuals of the financial assistance policy in communications with the individuals regarding the individuals' bil	lls		
d	Documented its determination of whether individuals were eligible for financial assistance under the hospital facility's financial assistance policy			
е	Other (describe in Section C)			
Ро	licy Relating to Emergency Medical Care			
			Yes	No
19	Did the hospital facility have in place during the tax year a written policy relating to emergency medical care that requires the hospital facility to provide, without discrimination, care for emergency medical conditions to individuals regardless of their eligibility under the hospital facility's financial assistance policy?	19		No
	If "No," indicate why			
а	The hospital facility did not provide care for any emergency medical conditions			
b	The hospital facility's policy was not in writing			
C	The hospital facility limited who was eligible to receive care for emergency medical conditions (describe in Part VI)			
d	Other (describe in Part VI)			
Cha	arges to Individuals Eligible for Assistance under the FAP (FAP-Eligible Individuals)	•		
	Indicate how the hospital facility determined, during the tax year, the maximum amounts that can be charged to FAP-eligible individuals for emergency or other medically necessary care			
а	The hospital facility used its lowest negotiated commercial insurance rate when calculating the maximum amounts that can be charged			
b	The hospital facility used the average of its three lowest negotiated commercial insurance rates when calculating the maximum amounts that can be charged			
C	The hospital facility used the Medicare rates when calculating the maximum amounts that can be charged			
d	Other (describe in Part VI)			
21	During the tax year, did the hospital facility charge any FAP-eligible individual to whom the hospital facility provided emergency or other medically necessary services more than the amounts generally billed to individuals who had insurance covering such care?	21		No
	If "Yes," explain in Part VI			
22	During the tax year, did the hospital facility charge any FAP-eligible individual an amount equal to the gross charge for any service provided to that individual?	22	Yes	

Schedule	Η	Form	990	2013
Schedule		(1 01111	,,,,,,	, 2013

Page 7 **2**

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1_J, 3, 4, 5d, 6_I, 7, 10, 11, 12_I, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation

Schedule H (Form 990) 2013

chedule H	Form 990	2013
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)	а	g	e	8	2

Part V	Facility	Information	(continued
FCHLEV.	racility	Tilloi illa tioli	TCOHUHUCC

Section D.	Other Health	Care Facilities	That Are No	t Licensed,	Registered,	or Similarly	Recognized a	asa
Hospital F	acility					_	_	

(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the orgai	nization operate during the tax year?
Name and address	Type of Facility (describe)
See Additional Dat	
2	
3	
4	
5	
5	
7	
В	
9	
10	

Schedule H (Form 990) 2013

Schedule H (Form 990) 2013

Part VI Supplemental Information

Provide the following information

- 1 Required descriptions. Provide the descriptions required for Part I, lines 3c, 6a, and 7, Part II and Part III, lines 2, 3, 4, 8 and 9b
- 2 Needs assessment. Describe how the organization assesses the health care needs of the communities it serves, in addition to any CHNAs reported in Part V, Section B
- 3 Patient education of eligibility for assistance. Describe how the organization informs and educates patients and persons who may be billed for patient care about their eligibility for assistance under federal, state, or local government programs or under the organization's financial assistance policy
- 4 Community information. Describe the community the organization serves, taking into account the geographic area and demographic constituents it serves
- **Promotion of community health.** Provide any other information important to describing how the organization's hospital facilities or other health care facilities further its exempt purpose by promoting the health of the community (e.g., open medical staff, community board, use of surplus funds, etc.)
- **Affiliated health care system.** If the organization is part of an affiliated health care system, describe the respective roles of the organization and its affiliates in promoting the health of the communities served
- 7 State filing of community benefit report. If applicable, identify all states with which the organization, or a related organization, files a community benefit report

Form and Line Reference	Explanation
Description of Facility	Devereux operates the Children's Behavioral Health Center in Malvern, PA, a 49-bed private psychiatric facility that provides care to children and adolescents ages 4 - 17

Form and Line Reference	Explanation
Charity Care and Certain Other Community Benefits	In advancement of its charitable mission, Devereux accepts clients with limited or no ability to pay for services. A client is classified as a charity client based on established written policies. Charity services are defined as those for which no payment is anticipated. In assessing a client's ability to pay, Devereux uses federal poverty income levels, but also includes cases where incurred charges are significant relative to income. Under certain governmental reimbursement programs, Devereux has been paid an amount less than actual costs due to agency budgeting constraints or other factors. The economic loss attributable to such programs is also reported as charity care. Charity care amounts are not included in net client revenue or accounts receivable. The amount of charges forgone, based on established rates, for services provided to clients that qualify for charity care and the economic shortfall attributable to unreimbursed costs of certain programs aggregated \$11,874,000 and \$15,909,000 in 2014 and 2013, respectively

Form and Line Reference	Explanation
Community benefits	Devereux also provides a variety of services and benefits within the communities in which it operates, for which no compensation is received. The cost of these services has not been quantified and, therefore, is not included in the charity care amounts listed above. Devereux has not provided a separate Community Health Needs Assessment since we are not a community-based hospital Rather, our hospital serves a specialized population and referrals come from wide geographic areas, including other states. Many of those admissions are from Devereux's own residential treatment programs in situations where a particular child in treatment decompensates and/or needs a more intensive environment for a specified period of time.

 \mathbf{c}

Form and Line Reference	Explanation
IDIIIII aliu Collections	When all efforts at collections fail, Devereux may refer the outstanding bill to a third party for collection However, this is done in fairly limited situations

Form and Line Reference	Explanation
Policy Relating to Emergency Med Care	Devereux facilities do not operate an emergency department Nearly all of Devereux's clients come by way of referral from a physician, insurance company, governmental agency, or other healthcare facility

Form and Line Reference	Explanation
Charges for Medical Care	Devereux provides an allowance for uncollectible accounts for estimated losses resulting from the unwillingness or inability of patients or payors to make payments for services. The allowance is determined by analyzing specific accounts and historical data and trends. Accounts receivable are charged off against the allowance for uncollectible accounts when management determines that recovery is unlikely and Devereux ceases collection efforts. Losses have been consistent with management's expectations.

Form and Line Reference	Explanation
Charges for Medical Care	Devereux has a relatively few private pay patients who pay the standard rate for care

Form and Line Reference	Explanation
Other Health Care Facilities	The organization also operated hundreds of community group homes that generally serve up to 6 individuals with mental health issues or developmental disabilities. These are not individually listed in Part V , Section D

Software ID: Software Version:

EIN: 23-1390618

Name: The Devereux Foundation

Form 990 Schedule H, Part V Section D. Other Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility

Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility

(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year?

e and address	Type of Facility (describe)
Devereux Florida Viera Campus 8000 Devereux Drive Melbourne,FL 32940	Residential and outpatient treatment Group homes Foscare
Devereux Adult Services 139 Leopard Road Berwyn,PA 19312	Residential and outpatient treatment Group homes Fos
Devereux New Jersey 198 Roadstown Road Bridgeton,NJ 08302	Residential and outpatient treatment Group homes Foscare
Devereux New York 40 Devereux Way Red Hook, NY 12571	Residential and outpatient treatment Group homes Foscare
Children's IDD Services 390 E Boot Rd West Chester, PA 19380	Residential and outpatient treatment Group homes Foscare
Childrens Behavioral Health Services Devereux Drive Glenmoore,PA 19343	Residential and outpatient treatment Group homes Foscare
Devereux Texas Treatment Network Houston Ctr 1150 Devereux Dr League City,TX 77573	Residential and outpatient treatment Group homes Foscare
Devereux MA Residential Treatment Ctr 60 Miles Rd PO Box 219 Rutland, MA 01543	Residential and outpatient treatment Group homes Foscare
Devereux AZ Raskın Treatment Network 6436 Sweetwater Raod Scottsdale, AZ 85254	Residential and outpatient treatment Group homes Foscare
Devereux Georgia 1291 Stanley Rd Kennesaw, GA 30144	Residential and outpatient treatment Group homes Foscare
Devereux Texas Victoria Center 120 David Wade Dr Victoria,TX 77905	Residential and outpatient treatment Group homes Foscare
Devereux Pocono Center 1547 Mill Creek Rd Newfoundland, PA 18445	Residential and outpatient treatment Group homes Fos
Devereux Glenholme School 81 Sabbaday La Washington, CT 06793	Residential and outpatient treatment Group homes Fos
Devereux Santa Barbara 6980 Falberg Way Goleta, CA 93117	Residential and outpatient treatment Group homes Fos
Devereux Mapleton 655 Sugartown Road Box 275 Malvern, PA 19355	Residential and outpatient treatment Group homes Fos

990 Schedule H, Part V Section D. Other Facilitie nized as a Hospital Facility	s That Are Not Licensed,	Registered, or Similarly

Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility (IIst in order of size, from largest to smallest)						
How many non-hospital health care facilities did the organization ope	erate during the tax year?					
Name and address	Type of Facility (describe)					
Devereux Stone and Gables 228 Highland Ave Devon, PA 19333	Residential and outpatient treatment Group homes Foster care					
Devereux Orlando Campus 6417 Christian Way Orlando,FL 32808	Residential and outpatient treatment Group homes Foster care					

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DLN: 93493128011965

OMB No 1545-0047

Compensation Information

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

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization The Devereux Foundation

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Employer identification number

23-1390618

Pai	rt I Questions Regarding Compensation					
					Yes	No
1a	Check the appropriate box(es) if the organization prov 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the org reimbursement or provision of all of the expenses des			1b		
2	Did the organization require substantiation prior to redirectors, trustees, officers, including the CEO/Executive control of the center of the			2		
3	Indicate which, if any, of the following the filing organ organization's CEO/Executive Director Check all the used by a related organization to establish compensation	at apply	y Do not check any boxes for methods			
	▼ Compensation committee	Γ	Written employment contract			
	✓ Independent compensation consultant	굣	Compensation survey or study			
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, P or a related organization	art VII	, Section A , line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control p	aymen	t?	4a		Νo
b	Participate in, or receive payment from, a supplement	tal non	qualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-ba	sed co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pro	vide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mus	st comp	olete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, compensation contingent on the revenues of					
a	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, compensation contingent on the net earnings of	lıne 1a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," de			7		No
8	Were any amounts reported in Form 990, Part VII, pa	aid or a	ccured pursuant to a contract that was			
-	subject to the initial contract exception described in					
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow the section 53 $4958-6(c)$?	rebutta	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation			
See Additional Data Table							

Schedule J (Form 990) 2013

Part III Supplemental Information

 $Provide \ the \ information, explanation, or \ descriptions \ required \ for \ Part \ I, \ lines \ 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and \ for \ Part \ II$

Also complete this part for any additional information

Return Reference	Explanation
	The organization has a supplemental executive retirement plan (SERP) in which participation in the plan is limited to the President/CEO and senior vice-presidents of the organization. Annually, the compensation committee of the board of trustees may approve an annual contribution to the participant's account in an amount up to 10% of plan compensation for the year (as defined in the plan document). The participant shall become one hundred percent (100%) vested in his or her benefit under the Plan if while employed by Devereux, he or she (a) attains Normal Retirement Age, (b) dies or (c) becomes Disabled.

Schedule J (Form 990) 2013

Software ID: Software Version:

EIN: 23-1390618

Name: The Devereux Foundation

(A) Name	,	(B) Breakdown of	of W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
Robert Q Kreider President and CEO, Trustee	(I) (II))	102,000	443	103,307	6,569	726,933	(
Margaret M McGill Sr VP and COO	(ı) (ıı)		61,000	7,869	55,697	6,552	401,815	(
Robert C Dunne Sr VP and CFO	(ı) (ıı)		53,500	3,369	47,877	6,539	342,616	(
Marilyn Benoit MD Sr VP and CCO	(ı) (ıı)		42,500	6,586	35,985	848	370,692	(
Dolores McLaughlin Sr VP Genl Counsel and Secy	(I) (II))	30,000	6,530	44,414	6,583	320,953	(
Sarah E Lenahan VP of Ops and Org Development	(I) (II))	22,000	3,083	34,995	6,550	278,959	
L Gail Atkinson VP of Operations	(ı) (ıı))	33,300	7,168	15,150	6,569	269,692	(
Timothy Dillon VP of HR	(ı) (ıı)		30,000	6,122	12,062	6,506	220,623	(
Martha Lindsay VP Product Development	(ı) (ıı)		30,700	1,397	8,715	6,557	221,675	(
Lawrence W Williams VP Compliance and Admin	(I) (II))	30,300	648	11,712	6,526	216,694	(
Leah Yaw Sr VP of External Affairs	(ı) (ıı)) 176,920)	45,000	2,378	12,384	6,546	243,228	(
Carol Oliver VP Operations	(ı) (ıı)		26,790	3,102	24,968	6,563	255,762	(
Thomas Shurer VP Information Systems	(ı) (ıı)		8,500	1,683	10,047	5,821	161,913	1
Steven Murphy Executive Director FL	(ı) (ıı)		14,814	1,494	31,427	895	233,465	ı
John O'Keefe Executive Director NY	(I) (II)		31,581	1,309	13,175	6,548	221,570	(
Tılden Reeder Psychiatrist	(ı) (ıı)	437,467		1,219	19,066	6,539	464,291	(
Imran Posner Psychiatrist	(ı) (ıı)	326,148		162	16,870	6,567	349,747	
Jacqueline Zavodnick Medical Services Director	(I) (II)) 255,120	0	1,219	16,634 0	6,288 0	279,261 0	
Ranjeeb Shrestha Psychiatrist	(ı) (ıı)			162	0	6,554	296,491	
Robert Handler Medical Services Director	(ı) (ıı)) 252,353)		1,188	17,850	6,583	277,974	

DLN: 93493128011965

OMB No 1545-0047

Schedule K (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990. ► See separate instructions. ▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection**

Name of the organization The Devereux Foundation

Employer identification number

23-1390618

Part I	Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	CUSIP # (d) Date issued (e) Issue price (f) Description of purpose		(g) Defeased		(h) On behalf of ıssuer		(i) Pool financing		
						Yes	No	Yes	No	Yes	No
Chester Co Health and Education Facility Authority	23-2265260	165579EL3	06-15-2006	79 740 000	Plant improvement/advance refund		Х		Х		Х
Chester Co Health and Education Facility Authority	23-2265260		12-15-2011	6,580,000	Refund of 1997 bond		Х		Х		Х
Chester Co Health and Education Facility Authority	23-2265260		11-01-2012	8,744,656	Refund of 2002 bond		X		X		Х
Colorado Health Facilities Authority	84-0752932		11-01-2012	7,053,654	Refund of 2002 bonds		X		X		Х

Part III Proceeds

		1	١		В	(С	1)
1	A mount of bonds retired		0		0		0		0
2	A mount of bonds legally defeased		0		0		0		0
3	Total proceeds of issue		29,240,000		6,580,000		8,744,656		3,197,421
4	Gross proceeds in reserve funds		2,072,525		0		0		0
5	Capitalized interest from proceeds		88,681		0		0		0
6	Proceeds in refunding escrows		0		0		0		0
7	Issuance costs from proceeds		402,126		123,160		95,146		43,312
8	Credit enhancement from proceeds		0		0		0		0
9	Working capital expenditures from proceeds		2,117,699		0		0		0
10	Capital expenditures from proceeds		13,998,684		0		0		0
11	O ther spent proceeds		0		0		0		0
12	O ther unspent proceeds		0		0		0		0
13	Year of substantial completion	20	10	20	11	20	12	20	12
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		Х	x		X		X	
15	Were the bonds issued as part of an advance refunding issue?	Х			Х		Х		Х
16	Has the final allocation of proceeds been made?	Х		Х		Х		Х	

allocation of proceeds? Part IIII Private Business Use

			1	I	3		C	[)
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		Х		×		×		Х
2	Are there any lease arrangements that may result in private business use of bond-financed property?		Х		X		X		Х

Χ

Does the organization maintain adequate books and records to support the final

Χ

Χ

Χ

Schedule K (Form 990) 2013

Part III Private Business Use (Continued)

		·	Α		В		С		D
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		×		х		х		х
ь	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
С	Are there any research agreements that may result in private business use of bond-financed property?		Х		Х		Х		х
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %		0 %		0 %		0 %
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government				0 %		0 %		0 %
6	Total of lines 4 and 5				0 %		0 %		0 %
7	Does the bond issue meet the private security or payment test?		X		Х		Х		Х
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		х		х		х		х
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		0 %		0 %		0 %		
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?		х		×		×		×
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?	Х		х		х		х	

Part IV Arbitrage

		Α		В		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?	Х		Х		Х		Х	
2	If "No" to line 1, did the following apply?								
а	Rebate not due yet?								
b	Exception to rebate?								
С	No rebate due?								
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?		X	X			X		X
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		Х		X		Х
b	Name of provider	0		0		0			
С	Term of hedge								
d	Was the hedge superintegrated?								
е	Was the hedge terminated?								
							Scl	nedule K (Forn	n 990) 2013

Part IV Arb	trage	(Continued)
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Return Reference

		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?	×			X		X		X
b	Name of provider	FIFTH THIRD	BANK	0		0		0	
С	Term of GIC		25 4						
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	х							
6	Were any gross proceeds invested beyond an available temporary period?		Х						
7	Has the organization established written procedures to monitor the requirements of section 148?	×		x		X		x	

Part V Procedures To Undertake Corrective Action

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?

	Α		В		С		D	
	Yes	No	Yes	No	Yes	No	Yes	No
	Χ		Х		Х		Х	
١								

The Colorado Health Facilities Authority Bonds supported projects at both Devereux and Devereux Cleo Wallace, a controlled entity of Devereux The Part I, Line d

portion of Devereux's proceeds of the issue is noted in Part II, Line 3 of Schedule K

Explanation

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DLN: 93493128011965

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the or The Devereux For								Employ	er ideni	tificatio	on numbe	er
									90618			
					3) and sectio						. 40h	
	ne of disqualifi				90, Part IV, line n disqualified	(c) Des					(d) Cor	rected
1 (4) (4)	ic or albquaini	eu person		on and organ	•	(6) 5 6 5	спрског	. 01 614	iis de cio	''	Yes	No
												-
												-
												-
												•
												_
												-
					disqualified pe		he yea	r unde	r sectio	n		
									F \$			
3 Enter the	annount of tax	, ii aiiy, oii iii	ie z, above,	reillibursea L	y the organizat		•		F \$			
	oans to and											
					990-EZ, Part \		Form 9	90, P	art IV, I	ıne 26,	or if the	
			ount on Form (d) Loan		line 5, 6, or 22		(g) In		(6)		(:)\A(*	
(a) Name of interested	(b) Relationshi	p Purpose	1 ` '		(e)Original principal	(f)Balance due	defaul		(h) Approv	ved	(i)Wr agreer	
person	with	loan	organizati		amount				by		"3	
	organizatio	n							board or			
									commi	ttee?		
			То	From			Yes	No	Yes	No	Yes	No
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otal		> \$. Tt	- d Da							
					e d Persons. n Form 990, P	art IV. line	27.					
(a) Name of i			ship betweer		unt of assistanc			sistano	e (e) Purpo	se of as:	sıstanc
perso		interested p	erson and the						`	,		
		organ	ızatıon									
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Part IV Business Transactions Involving Interested Persons
--

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reven	f zatıon's
				Yes	No
(1) Christopher Butler IBC	Trustee	1,894,226	Employee health benefits		No
(2) Steven Udvarhelyı MD IBC	Trustee	1,894,226	Employee health benefits		No
(3) Alba Martinez Vanguard	Trustee		Investment Management Services		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
Part IV	Trustee Christopher Butler, formerly a Vice President of Independence Blue Cross (IBC) until June 2010, is a member of their Board, as well as a trustee of Devereux. Steven Udvarhelyi, MD, a trustee of Devereux, is the Chief Medical Officer of IBC. IBC administers Devereux's self-insured medical plan and was paid total fees of \$1,894,226. Trustee Alba Martinez is an officer of Vanguard, a mutual fund company. At June 30, 2014, Devereux held investments of \$1,317,617 in various Vanguard funds. Vanguard's investment management fees are incorporated into the net returns of the funds and not paid separately by Devereux. As noted in Schedule O, there are trustees of the Board who have family members receiving services. These services are provided on month-to-month basis or through at-will arrangements and others involve contracts for services, but all arrangements to provide these services are at standard rates and negotiated in compliance with the Devereux conflict of interest policy.

Schedule L (Form 990 or 990-EZ) 2013

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DLN: 93493128011965

OMB No 1545-0047

SCHEDULE M (Form 990)

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990.

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Internal Revenue Service Name of the organization The Devereux Foundation

Department of the Treasury

Employer identification number

					23-1390618			
Pa	rt I Types of Property	_						
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII line 1g	n Method of noncash contr			ınts
1	Art—Works of art	Х	10	4,7	35 Market Price			
2	Art—Historical treasures .			,				
3	Art—Fractional interests							
4	Books and publications	Х		18,3	20 Market Price			
5	Clothing and household goods	Х		189,7	39 Market Price			
6	Cars and other vehicles	Х	2	3,6!	50 Market Price			
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	7	248,54	44 Market Price			
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial	Х	1	14,40	00 Market Price			
17	Real estate—Other							
18	Collectibles	X	36	25,9	55 Market Price			
19	Food inventory	X	101	53,9	42 Market Price			
20	Drugs and medical supplies .							
	Taxidermy							
22	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other ► (X	225	251,88	89 Market Price			
	onal Services)	- · · · ·	121	F2.6	274 1 5			
Eve	Other►(nt tickets)	X	121	·	27 Market Price			
Use	Other ► (of Property)	X	39		48 Market Price			
	Other► (day-related items)	X	101	123,84	48 Market Price			
Misc	Other►(cellaneous)	X	507	254,54	48 Market Price			
29	Number of Forms 8283 received by the for which the organization completed I				29			
	To thine the organization completed i	01111 0200,	Tare 1 v / Donad / Callio Mick	agement L			Yes	No
30a	During the year, did the organization	receive by	contribution any property r	eported in Part I. lines	1 through 28, that		1.05	
	ıt must hold for at least three years f	rom the dat	e of the initial contribution	, and which is not requi				
	for exempt purposes for the entire ho					30a		No
b	If "Yes," describe the arrangement in	n Part II						
31	Does the organization have a gift acc	eptance po	licy that requires the revie	w of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or use this contributions?	•	related organizations to s	olicit, process, or sell i	noncash • • •	32a		No
	If "Yes," describe in Part II							<u> </u>
33	If the organization did not report an a describe in Part II	mount in co	olumn (c) for a type of prop	erty for which column (a) is checked,			

Part II

Supplemental Information. Provide the information required by Part I, lines 30b,

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference Explanation

Schedule M (Form 990) (2013)

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DLN: 93493128011965

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization The Devereux Foundation	Employer identification number
	23-1390618

Return Reference	Explanation
Chekclist of Required Schedules - Related Organizations	The Devereux Foundation (Devereux) is a related organization to Devereux Community Based Care, Inc., a 501(c)(3) organization that provides the delivery of child protection service emergency shelter, in-home protective services, relative care placements, foster care, foster care supervision, intensive residential treatment, independent living, family reunification, and adoption and appropriate related services in Indian River, Martin, Okeechobee and St. Lucie counties in the State of Florida. The bylaws of Devereux Community Based Care, Inc. states the number of Directors shall be no less than five (5) and no more than fifteen (15). A simple majority (one half of the total number of Directors rounded up to the nearest whole number) shall be appointed by Devereux and the remainder of the Directors shall be elected from individuals nominated from the general public residing in the Florida Counties of Indian River, Martin, Okeechobee and St. Lucie. Although Devereux appoints a simple majority of the number of Directors on the board, Devereux does not control Devereux Community Based Care, Inc. since certain major actions require two-thirds consent of the Directors. Accordingly, Devereux community Based Care, Inc. onterolling entity. Devereux entered into an Administrative Services Agreement with Devereux Community Based Care, Inc., under which Devereux provides certain financial, information technology, human resources, benefit administration, legal, insurance and other services for Devereux Community Based Care, Inc. For these services, Devereux received \$369,533 from Devereux Community Based Care, Inc. for the year ended June 30, 2014

Return Reference	Explanation
Activities & Governance	The number of employees listed is the total number of employees who worked at Devereux during the year, including those who left employment during calendar year 2013, as reported on Form W-3

Return Reference	Explanation
Governing Body and Management	Article I, Section 1 of the Bylaws of Devereux provides that Devereux shall be governed by a Board of Trustees of fifteen (15) to twenty-two (22) members of the Board A minimum of five (5) members of the Board shall be parents, relatives, or guardians of clients or former clients of Devereux Schedule L provides further information on these care arrangements. The Executive Committee of the Board, which consists of six (6) members of the governing body, has the authority to act on behalf of the full Board of Trustees

Return Reference	Explanation
Policies	Form 990 is provided in hard-copy or electronically to all Board members approximately two months before the filing deadline Board members are requested to provide comments or questions to the CFO by a specific date, approximately three weeks from receiving the draft. The comments are reviewed by the CFO, who directs the response to all Board questions, and where appropriate, directs changes to be made to the Form 990. The Board is advised of the changes and given an opportunity for final review. Additionally, the CFO reviews any important issues regarding the Form 990 at a designated Board meeting, with follow up as necessary after the meeting, and solicits additional Board comments and questions. After this review process, the CFO signs the Form 990 and submits it to the IRS

Return Reference	Explanation
Policies - Conflict of Interest	Representatives of Devereux dealing with clients, parents, guardians, vendors, competitors or anyone who does or seeks to do business with Devereux are required to act in Devereux's best interests, disregarding any personal preference or advantage Representatives shall make prompt and full disclosure to his/her manager and to the Internal Audit Department (and, in the case of Trustees and senior managers, to the Board's Audit and Compliance Committee) via the Devereux Conflict of Interest form of any prospective or actual situation that involves, may involve, or might appear to involve a conflict of interest. Members of the same family or living within the same domicile may be employed by Devereux in the same center or department unless the center Director or department head determines such employment is not in Devereux's best interest. Relatives of senior management or trustees, as well as those working in Human Resources, Payroll, and Internal Audit, shall not be hired by Devereux in any capacity unless approved in advance by the President/CEO Each Devereux employee has the responsibility to report any actual or perceived conflicts of interest to management, Human Resources, the Vice President of Audit & Compliance or the Employee Helpline. The Helpline is an anonymous "whistleblower" service, where complaints are processed by an independent third party retained by Devereux for this purpose and subsequently referred to the Vice President of Compliance. Annually, a copy of Devereux's business ethics policy is mailed or e-mailed to trustees, officers, directors and key personnel along with the annual Conflict of Interest Disclosure Statement, which must be signed and returned to the Director of Internal Audit within 30 days. The annual disclosure requires an acknowledgement of understanding Devereux's business ethics policy, as well as disclosure of any conflict, or appearance of a conflict, between personal interests and the interests of Devereux Failure to comply or falsification of disclosure may result in d

Return Reference	Explanation
Policies - Determining Compensation	Devereux reviews officers' and Executive Directors' salaries against the market on an annual basis in connection with the July meeting of the Executive Committee of the Devereux Board of Trustees, which serves as the Board's Compensation Committee. However, reviews may occur at other times to respond to changes in the market. During this benchmarking process, the Vice President of Human Resources conducts a review of salaries for benchmark positions for which there is sufficient market survey data. Additionally, Form 990s of other comparable organizations are also reviewed. The results of these reviews are compared against all Executive Directors' and officers' salaries. The review is intended to make Devereux compensation both reasonable and competitive. The Vice President of Human Resources will make recommendations for adjustments, if necessary. Devereux's market for this salary review is primarily with the health care industry for organizations of our size (budget, number of employees, revenue) and structure (system vs. single entities). However, general industry data as provided by the U.S. Department of Labor or other sources as well as residential and educational surveys that become available or that Devereux may conduct may also be factored into the review. The results of the review conducted are typically validated by an outside compensation consultant at least every 2 years.

Return Reference	Explanation
Disclosure	The Devereux Foundation's Form 990 is available to the public through posting on Guidestar (www guidestar org). It is also available upon request. The Audited Financial Statements are available on our website or upon request, and summarized financial information is included in our Annual Report, which is distributed to constituents and posted on our website. The Devereux Foundation does not make its governing documents or conflict of interest policy available to the general public outside of this Form 990.

Return Reference	Explanation
Tax-Exempt Bond Liabilities	Devereux reported four bonds on Schedule K Chester County Health and Education Facilities Authority Revenue Bonds, Series of 2006 (for which \$23,670,000 was outstanding at June 30, 2014), the Chester County Health and Education Facilities Authority Revenue Bonds, Series 2011 (for which \$5,449,000 was outstanding at June 30,2014), the Chester County Health and Education Facility Authority Bonds, Series 2012 (for which \$8,245,000 was outstanding at June 30, 2014), and Colorado Health Facilities Authority Revenue Bonds, Series 2012 (for which \$6,392,000 was outstanding at June 30, 2014) The Series 2011 and both of the Series 2012 Bonds were acquired by financial institutions

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SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Orlando, FL 32822

Port St Lucie, FL 34952

46-0908479

(6) Devereux Community Based Care Inc

10570 S Federal Highway Suite 300

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
 Attach to Form 990.
 See separate instructions.
 Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

DLN: 93493128011965OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization The Devereux Foundation				Employer 23-13906	identification number		
Part I Identification of Disregarded Entities Complete	e if the organization	n answered "Yes" oi	n Form 990, Par	•	010		
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) (c) Primary activity Legal domicile (state or foreign country)		(d)	(e) End-of-year assets	(f) Direct controlling entity		9) 512(ontrol
Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the		the organization ai	nswered "Yes" o	n Form 990, P	Part IV, line 34 because	ıt had on	ıe
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	n Public charity (if section 501		Section (13) co	ontrol tity?
(1) Devereux Cleo Wallace	Mental Hlth	CO	501(c)(3)	3	Dev Foundatn	Yes Yes	No
8405 Church Ranch Blvd			, , , ,				
Westminster, CO 80021 84-0406820							
(2) Devereux Cleo Wallace Foundation c/o Dev Found 2012 Renaissance Blvd	Support Org	СО	501(c)(3)	11-I	Cleo Wallace	Yes	
King of Prussia, PA 19406 74-2277635							
(3) Helena Devereux Foundation	Support Org	PA	501(c)(3)	11-I	Dev Found	Yes	
444 Devereux Drive							
Villanova, PA 19085 30-0034707							
(4) Devereux Professional Group	Inactive	TX	501(c)(3)	11-I	Dev Found	Yes	
c o Devereux TX 1150 Devereux Dr							
League City, TX 77573 74-0406760							
(5) Devereux Kids Inc	Inactive	FL	501(c)(3)	7	Dev Found		

Child Welfare

501(c)3

N/A

(a) Name, address, and EIN of related organization		(b) Primary activity	y Legal domicile (state or foreign country)	entity	(e) Predom Income(r unrela excluded tax ur sections	inant elated, ited, d from nder s 512-	(f) Share o total incor		(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		ownership	
					314	+)			Yes	No		Yes	No		
Part IV Identification of Related line 34 because it had one									wered	d "Yes	" on Form	990,	Part :	IV,	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicil (state or fo country	e ireign	Direc	(d) ct controlling entity	Type (C corp	(e) of entity p, S corp, trust)	(f) Share of total Income		(g) e of end- year assets	(h of- Percen owner	tage	С	(i) ection 512 (b)(13) ontrolled entity? /es No	
(1) Devereux Properties Inc	Inactive	PA		Deve	reux Found	C Corp								es No	
PO Box 638 Villanova, PA 19085 23-1682903															

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule								
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?								
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		1a		No				
b Gift, grant, or capital contribution to related organization(s)		1b	Yes					
c Gift, grant, or capital contribution from related organization(s)		1c	Yes					
d Loans or loan guarantees to or for related organization(s)		1d		No				
e Loans or loan guarantees by related organization(s)		1e	Yes					
f Dividends from related organization(s)		1f						
g Sale of assets to related organization(s)		1g		No				
h Purchase of assets from related organization(s)		1h		No				
i Exchange of assets with related organization(s)		1 i		No				
j Lease of facilities, equipment, or other assets to related organization(s)		1j		No				
k Lease of facilities, equipment, or other assets from related organization(s)		1k		No				
l Performance of services or membership or fundraising solicitations for related organization(s)		11	Yes					
m Performance of services or membership or fundraising solicitations by related organization(s)		1m		No				
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		1n		No				
• Sharing of paid employees with related organization(s)		10		No				
p Reimbursement paid to related organization(s) for expenses		1 p		No				
q Reimbursement paid by related organization(s) for expenses		1q		No				
r Other transfer of cash or property to related organization(s)		1r		No				
s Other transfer of cash or property from related organization(s)		1 s		No				
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 a								
(a) Name of related organization (b) Transaction Transaction type (a-s) (c) Amount involved Method of determining								
1) Helena Devereux Foundation c 4,768,479	Invest earnings							
(2) Devereux Cleo Wallace	Admın Expenses							
(3) Helena Devereux Foundation	Admın Expenses							
(4) Helena Devereux Foundation e 143,589	Loan Payment							
(5) Devereux Cleo Wallace b 75,000	Scholarship							

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

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(f) (n) (n) (share of share of total end-come as:	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V?UBI amount in box 20 of Schedule K-1 (Form 1065)	n managing partner? le		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
]	
												\Box	
												\Box	
	•												

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

	information for responses to questions on senedate it (see instructions)
Return Reference	Explanation
Part V 2	The Helena Devereux Foundation (HDF) is a recognized 509(a)(3) supporting organization of Devereux, formed to manage and invest endowment funds to support Devereux's activities. Its Board of Trustees consists of members of Devereux's Board. The following officers of Devereux are officers of HDF in the capacities given. Robert Q. Kreider, President Robert C. Dunne, Sr. Vice President & CFO. Dolores McLaughlin, Esq., Sr. Vice President, General Counsel & Secretary, Lawrence Williams, Vice President for Audit and Compliance HDF does not maintain separate facilities and operates at one of Devereux's two Corporate sites, at 444 Devereux Drive, Villanova, PA. 19085. Devereux has adopted a Spending Rule policy under which approximately 5% of the endowment held by Helena Devereux Foundation is spent to support operations. Under this policy, HDF transferred \$4,768,479 to Devereux during the year.
Transactions with Related Organizations	Devereux borrowed a total of \$4,500,000 in 2011 and 2012 from Helena Devereux Foundation to finance the expansion of its New York campus. As of 6/30/2014, \$545,600 of that amount has been repaid to HDF. Devereux provides advances to Devereux Cleo Wallace in the ordinary course of business as cash is managed on a consolidated basis. As of June 30, 2014, Devereux had net advances outstanding to Devereux Cleo Wallace of \$1,174,060. These advances bear interest at a rate of 1.1947%

Schedule R (Form 990) 2013

Additional Data

Software ID: Software Version:

EIN: 23-1390618

Name: The Devereux Foundation

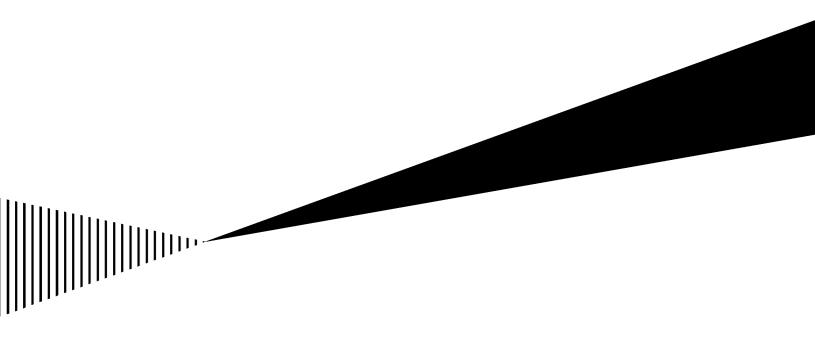
Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

Form 990, Schedule R, Part II - Identification of Rel	rated Tax-Exempt C	rganizations ر	-				
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	Sectio (b)(contr	(g) on 512)(13) trolled tity?
I						Yes	No
(1) Devereux Cleo Wallace	Mental Hith	со	501(c)(3)	3	Dev Foundatn	Yes	Ţ !
8405 Church Ranch Blvd Westminster, CO 80021 84-0406820							
(1) Devereux Cleo Wallace Foundation	Support Org	СО	501(c)(3)	11-I	Cleo Wallace	Yes	T '
c/o Dev Found 2012 Renaissance Blvd King of Prussia, PA 19406 74-2277635							
(2) Helena Devereux Foundation	Support Org	PA	501(c)(3)	11-I	Dev Found	Yes	T '
444 Devereux Drive Villanova, PA 19085 30-0034707							
(3) Devereux Professional Group	Inactive	TX	501(c)(3)	11-I	Dev Found	Yes	
c o Devereux TX 1150 Devereux Dr League City, TX 77573 74-0406760							
(4) Devereux Kıds Inc	Inactive	FL	501(c)(3)	7	Dev Found		
5850 TG Lee Blvd Ste 400 Orlando, FL 32822 59-3593023							
(5) Devereux Community Based Care Inc	Child Welfare	FL	501(c)3	3	N/A		No
10570 S Federal Highway Suite 300 Port St Lucie, FL 34952 46-0908479							

CONSOLIDATED FINANCIAL STATEMENTS

The Devereux Foundation and Controlled Entities Years Ended June 30, 2014 and 2013 With Report of Independent Auditors

Ernst & Young LLP





Consolidated Financial Statements

Years Ended June 30, 2014 and 2013

Contents

Report of Independent Auditors	1
Consolidated Financial Statements	
Consolidated Balance Sheets	3
Consolidated Statements of Operations and Changes in Net Assets	5
Consolidated Statements of Cash Flows	7
Notes to Consolidated Financial Statements	8



Ernst & Young LLP One Commerce Square Suite 700 2005 Market Street Philadelphia, PA 19103 Tel +1 215 448 5000 Fax. +1 215 448 5500 ev com

Report of Independent Auditors

The Board of Trustees
The Devereux Foundation and Controlled Entities

We have audited the accompanying consolidated financial statements of The Devereux Foundation and Controlled Entities (Devereux), which comprise the consolidated balance sheets as of June 30, 2014 and 2013, and the related consolidated statements of operations and changes in net assets and cash flows for the years then ended, and the related notes to the consolidated financial statements

Management's Responsibility for the Financial Statements

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

Auditor's 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 Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement

An audit 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



Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the consolidated financial position of The Devereux Foundation and Controlled Entities at June 30, 2014 and 2013, and the consolidated results of their operations and changes in their net assets and their cash flows for the years then ended, in conformity with U S generally accepted accounting principles

Ernst + Young LLP

September 23, 2014

Consolidated Balance Sheets (In Thousands)

	June 30				
		2014		2013	
Assets					
Current assets					
Cash and cash equivalents, including client funds					
on deposits of \$1,835 in 2014 and \$1,725 in 2013	\$	13,061	\$	3,527	
Accounts receivable, net of allowance for					
uncollectibles of \$6,744 in 2014 and \$5,913 in 2013		45,608		48,899	
Current portion of assets limited as to use		729		2,306	
Operating fund investments		18,005		19,877	
Prepaid expenses and other current assets		3,486		3,068	
Total current assets		80,889		77,677	
Assets limited as to use		100.24		01.205	
By Board for designated purposes		100,264		81,295	
By Trustees under bond indenture agreements		2,716		4,236	
By Board for donor purposes		14,756		15,003	
By insurance agreement		4,000		4,000	
		121,736		104,534	
Property and equipment, net		111,105		109,672	
Other assets					
Other assets		522		519	
Deferred financing costs, net		937		990	
Pledges receivable and deferred gifts		6,461		6,448	
Total other assets		7,920		7,957	
Total assets	\$	321,650	\$	299,840	

	June 30				
		2014		2013	
Liabilities and net assets					
Current liabilities					
Current portion of long-term debt	\$	3,433	\$	4,087	
Accounts payable and accrued expenses		8,809		8,292	
Employee compensation and related benefits		25,037		23,690	
Estimated settlements due to third-party payors		10,324		9,101	
Reserves under insurance programs and other		•			
current liabilities		11,264		11,903	
Client funds on deposit		1,835		1,725	
Total current liabilities		60,702		58,798	
Estimated settlements due to third-party payors		2,907		2,044	
Reserves under insurance programs and other liabilities		17,113		16,141	
Deferred revenue		7,256		7,857	
Obligation to provide future services and use of facilities		7,250		7,057	
to continuing care clients		6,604		6,554	
Long-term debt		58,181		56,020	
Total liabilities		152,763		147,414	
Net assets					
Unrestricted		147,458		131,090	
Temporarily restricted		13,745		131,090	
Permanently restricted		,			
Total net assets		7,684		7,381	
Total liet assets		168,887		152,426	
Total liabilities and net assets	\$	321,650	\$	299,840	

See accompanying notes.

Consolidated Statements of Operations and Changes in Net Assets (In Thousands)

		Year Ended June 30 2014 2013		
Unrestricted net assets		2014		2015
Revenue				
	\$	375,875	\$	362,729
Investment income	•	7,759	·	8,869
Gifts and bequests (including net assets released from restrictions due to time of \$657 in 2014 and \$2,862		,,,,,		- ,
in 2013)		5,579		6,864
Other revenue		9,319		9,927
Net assets released from restrictions for operations		2,209		3,191
		400,741		391,580
Expenses				
Salaries and wages		224,494		220,842
Employee benefits		63,521		65,147
Food		6,835		6,773
Purchased services		32,866		33,373
Supplies		7,928		7,614
Plant operation and maintenance		25,443		24,949
Provision for bad debts		3,137		2,270
Depreciation and amortization		12,275		11,586
Interest		2,812		3,466
Insurance		3,633		2,775
Other		10,961		11,384
		393,905		390,179
Operating income before other items		6,836		1,401
Other items				
Loss on early extinguishment of debt		(121)		(1,032)
(Decrease) increase in obligation to provide future services and				
the use of facilities to continuing care clients		(51)		3,012
Change in fair value of interest rate swap		(295)		_
Net gain on disposition of property		399		338
Other (losses) income		(68)		2,318
Excess of revenue over expenses		6,768		3,719

Consolidated Statements of Operations and Changes in Net Assets (continued) (In Thousands)

	Year Ended June 30			
	 2014	2013		
Unrestricted net assets (continued)		_		
Excess of revenue over expenses	\$ 6,768 \$	3,719		
Other changes in unrestricted net assets				
Unrealized gains on investments	8,693	3,257		
Net assets released from restrictions for property				
and equipment purchases	766	915		
Other	141	(873)		
Increase in unrestricted net assets	16,368	7,018		
Temporarily restricted net assets				
Gifts, grants, and bequests, net	3,422	3,228		
Net assets released from restrictions for operations	(2,866)	(6,053)		
Net assets released from restrictions to finance property				
and equipment purchases	 (766)	(915)		
Decrease in temporarily restricted net assets	(210)	(3,740)		
Permanently restricted net assets				
Gifts, grants, and bequests	5	68		
Net realized and unrealized gains on investments	635	434		
Other	(337)	(340)		
Increase in permanently restricted net assets	 303	162		
Increase in net assets	16,461	3,440		
Net assets, beginning of year	 152,426	148,986		
Net assets, end of year	\$ 168,887 \$	152,426		

See accompanying notes.

Consolidated Statements of Cash Flows (In Thousands)

	Year Ended June 30		
	2014		2013
Operating activities			
Increase in net assets	\$ 16,461	\$	3,440
Adjustments to reconcile increase in net assets to net			
cash provided by operating activities			
Net gain on disposition of property	(399)		(338)
Loss on early extinguishment of debt	121		1,032
Depreciation and amortization	12,275		11,586
Provision for bad debts	3,137		2.270
Deferred reimbursement	_		333
Net realized and unrealized gains in fair value of investments	(10,962)		(8,273)
Increase (decrease) in obligation to provide future services	51		(3,012)
Change in fair value interest rate swap	295		_
Restricted contributions	(3,427)		(3.296)
Changes in operating assets and liabilities			
Accounts receivable	154		(5.188)
Prepaid expenses and other current assets	(418)		143
Pledges receivable	657		3,023
Accounts payable and accrued expenses	222		(1.284)
Employee compensation and related benefits	1,347		1,851
Deferred revenue	(601)		(660)
Estimated settlements due to third-party payors, net	2,086		231
Reserves under insurance programs and other current liabilities	(87)		1,232
Net cash provided by operating activities	20,912		3,090
Investing activities			
Purchases of property and equipment, net	(13,309)		(10,220)
Other assets	(3)		(34)
(Increase) decrease in investments	(2,791)		3,251
Net cash used in investing activities	(16,103)		(7,003)
	(,,		(-)
Financing activities	10.460		17.025
Proceeds from long-term debt	10,460		17.025
Repayments of long-term debt	(8,424)		(22,106)
Deferred financing costs incurred	(68)		(156)
Restricted contributions, net	 2,757		2,859
Net cash provided by (used in) financing activities	4,725		(2,378)
Increase (decrease) in cash and cash equivalents	9,534		(6.291)
Cash and cash equivalents at beginning of year	 3,527		9,818
Cash and cash equivalents at end of year	\$ 13,061	\$	3,527

See accompanying notes

Notes to Consolidated Financial Statements (In Thousands)

June 30, 2014

1. Organization and Basis of Presentation

The Devereux Foundation and Controlled Entities (Devereux) is a not-for-profit corporation, dually designated by the Internal Revenue Service (IRS) as an educational facility and health care organization, with a nationwide network of behavioral health treatment centers for children, adolescents, and adults with complex emotional, psychiatric, and developmental disabilities, including individuals with autism spectrum disorders Treatment settings range along a continuum from acute psychiatric inpatient and campus-based residential settings to outpatient, foster care, in home, educational, vocational and prevention programs

Devereux functions as the sole corporate member for the following entities, which are included in the consolidated financial statements

Helena Devereux Foundation (HD Foundation) is a Pennsylvania not-for-profit corporation, which holds certain assets to benefit Devereux's programs

Devereux Cleo Wallace (DCW) is a Colorado not-for-profit corporation that operates a psychiatric residential treatment facility and provides other behavioral health services in the Denver area DCW is the sole corporate member of Devereux Cleo Wallace Foundation (DCW Foundation), a Colorado not-for-profit corporation that was established for the benefit of DCW

All significant intercompany balances and transactions have been eliminated in the consolidated financial statements

Devereux is affiliated with Devereux Community Based Care (DCBC), which is a Florida not-for-profit corporation that, effective November 1, 2013, entered into a contract with the Florida Department of Children and Families (DCF) to administer and coordinate child welfare and related services in Indian River, Martin, Okeechobee and St Lucie counties in Florida Devereux provides certain administrative, financial, and other support services to DCBC It also appoints a simple majority of DCBC's Board of Directors, with the remaining seats filled by individuals from the local community However, major decisions of the Board require supermajority approval, defined as two-thirds of the directors Accordingly, Devereux does not control the Board of DCBC and, because it also has no direct economic or controlling interest, DCBC is not consolidated into Devereux's consolidated financial statements

Notes to Consolidated Financial Statements (continued) (In Thousands)

2. Summary of Significant Accounting Policies

Use of Estimates

The preparation of consolidated financial statements in conformity with accounting principles generally accepted in the United States (U S GAAP) requires management to make estimates and assumptions that affect the amounts reported in the consolidated financial statements and accompanying notes Actual results could differ from those estimates

Cash and Cash Equivalents

Cash and cash equivalents, for which the carrying value approximates fair value, include money market funds and certain investments with original maturities of three months or less

Fair Value of Financial Instruments

Financial instruments consist of cash equivalents, accounts receivable, assets limited as to use and investment, accounts payable and accrued expenses, and long-term debt. The carrying amounts reported in the consolidated balance sheets for cash equivalents, accounts receivable, assets limited as to use and investment, and accounts payable and accrued expenses approximate fair value. Management's estimates of the fair value of other financial instruments are described elsewhere in the notes to the consolidated financial statements.

Allowance for Uncollectibles

Devereux provides an allowance for uncollectible accounts for estimated losses resulting from the unwillingness or inability of clients to make payments for services. The allowance is determined by analyzing specific accounts and historical data and trends. Accounts receivable are charged off against the allowance for uncollectible accounts when management determines that recovery is unlikely and Devereux ceases collection efforts.

Assets Limited as to Use, Investments, and Investment Income

Assets limited as to use include assets set aside by the Board of Trustees (the Board), assets held by trustees under bond indenture agreements, assets for insurance agreements, and assets held by the Board for donor purposes Amounts set aside by the Board are designated for the operation of

Notes to Consolidated Financial Statements (continued) (In Thousands)

2. Summary of Significant Accounting Policies (continued)

certain facilities, scholarships, continuing care, and other contingencies. The Board retains control over designated assets and may, at its discretion, subsequently use the assets for other purposes. Assets limited as to use that are required for current obligations or designated for current use are reported as current assets.

Investments in debt and equity securities are measured at fair value based on quoted market prices Investment income or loss (including realized gains and losses on investments, interest, and dividends) is included in unrestricted investment income, or included in restricted investment income, if such income is restricted by the donor or legislation Devereux periodically reviews its investments for other-than-temporary declines in the market value of investments When an other-than-temporary decline is identified, the investment's cost is written down to the current market value and the loss is recorded as a component of the excess of revenue over expenses

Unrealized gains and losses on investments, to the extent that such losses are considered temporary, are reported as a component of changes in unrestricted or restricted net assets Realized gains and losses on investments sold are computed using the weighted-average cost method

Property and Equipment

Property and equipment is recorded at cost or, if donated, at fair market value at the date of receipt Depreciation is provided on a straight-line basis over the expected useful lives of the assets Gifts of long-lived assets, such as land, buildings, or equipment, are reported as other changes in net assets Interest cost incurred on borrowed funds during the period of construction of capital assets is capitalized as a component of acquiring those assets

Deferred Financing Costs

Deferred financing costs consist of bond financing costs, which relate to the long-term debt, and are amortized using the effective-interest-rate method over the term of the related debt

Notes to Consolidated Financial Statements (continued) (In Thousands)

2. Summary of Significant Accounting Policies (continued)

Temporarily and Permanently Restricted Net Assets

Temporarily restricted net assets represent those assets whose use has been limited by donors to a specific time period or purpose Permanently restricted net assets have been restricted by donors to be maintained by Devereux in perpetuity, with income generally available to support health care and education services

Permanently restricted net assets are invested on a pooled basis with Devereux's Board-designated investments. In accordance with Commonwealth of Pennsylvania Act 141, organizations are annually permitted to spend between 2% and 7% of permanently restricted net assets. For both 2014 and 2013, Devereux elected to spend at a rate of 5% Additionally, in accordance with the Pennsylvania law, Devereux classifies as permanently restricted net assets (a) the value of gifts donated to the permanent endowment and (b) accumulations to the permanent endowment made in accordance with the direction of the applicable donor gift instrument. This is regarded as the "historic dollar value" of the endowed fund. Any remaining, unspent earnings or net appreciation of the donor-restricted endowment funds is not classified in permanently restricted net assets and is classified as temporarily restricted net assets until those amounts are appropriated for expenditure by Devereux in a manner consistent with Devereux's spending policy.

Excess of Revenue Over Expenses

Included in the excess of revenue over expenses in the accompanying consolidated statements of operations and changes in net assets are all changes in unrestricted net assets, except for unrealized gains and losses on investments, to the extent that such losses are considered temporary, and net assets released from restrictions for property and equipment additions and other changes

Income Taxes

The IRS determined that Devereux, HD Foundation, DCW, and DCW Foundation qualify under certain provisions of the Internal Revenue Code and are exempt from federal income taxes Accordingly, no provision for federal or state income taxes is included in the consolidated financial statements

Notes to Consolidated Financial Statements (continued) (In Thousands)

2. Summary of Significant Accounting Policies (continued)

Charity Care

In advancement of its charitable mission, Devereux accepts clients with limited or no ability to pay for services A client is classified as a charity client by reference to certain established policies Essentially, these policies define charity services as those for which no payment is anticipated In assessing a client's ability to pay, Devereux uses generally recognized poverty income levels, but also includes cases where incurred charges are significant relative to income

Under certain governmental reimbursement programs, Devereux has been paid an amount less than actual costs due to agency budgeting constraints or other factors. The economic loss attributable to such programs is also included as charity care. Charity care amounts are not included in net client revenue or accounts receivable. The amount of costs incurred for services provided to clients that qualify for charity care and the economic shortfall attributable to unreimbursed costs of certain programs aggregated \$11,874 and \$15,909 in 2014 and 2013, respectively

In total, the amounts Devereux receives from third-party payers do not cover the full cost of providing services to its clients For 2014 and 2013, the percentage of total expenses covered by third-party reimbursement sources was 97 90% and 95 93%, respectively

Devereux also provides a variety of services and benefits within the communities in which it operates, for which no compensation is received. The cost of these services has not been quantified and, therefore, is not included in the charity care amounts referred to above

Contributions

Unconditional promises to give cash and other assets are reported at fair value at the date the promise is received Unconditional promises to give cash and other assets that are expected to be collected in future years are recorded at the present value of estimated future cash flows. The discounts on those amounts are computed using a risk-free interest rate applicable to the year in which the promise is received. The gifts are reported as either temporarily or permanently restricted support if they are received with donor stipulations that limit the timing or nature in which donated assets can be used. When a donor restriction expires, temporarily restricted net assets are reclassified as unrestricted net assets and reported in the consolidated statement of

Notes to Consolidated Financial Statements (continued) (In Thousands)

2. Summary of Significant Accounting Policies (continued)

operations and changes in net assets as net assets released from restrictions Donor-restricted contributions whose restrictions are met within the same year as received are reported as gifts and bequests in the accompanying consolidated financial statements

Functional Expenses

Devereux and its members' primary mission is to provide behavioral health care and education services to its clients. The majority of all operating expenses incurred were related to the provision of these services

Reclassifications

Certain reclassifications have been made to the financial statements of the prior year to conform to the current-year presentation

Recent Accounting Pronouncements

In October 2012, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) 2012-05, Not-for-Profit Entities: Classification of the Sale Proceeds of Donated Financial Assets in the Statement of Cash Flows, which requires a not-for-profit entity to classify cash receipts from the sale of donated financial assets consistently with cash donations received in the statement of cash flows if those cash receipts were from the sale of donated financial assets that upon receipt were directed without any imposed limitations for sale and were converted nearly immediately to cash Accordingly, the cash receipts from the sale of those financial assets should be classified as cash inflows from operating activities, unless the donor restricted the use of the contributed resources to long-term purposes, in which case those cash receipts should be classified as cash flows from financing activities Otherwise, cash receipts from the sale of donated financial assets should be classified as cash flows from investing activities This guidance is effective prospectively for fiscal years beginning after June 15, 2013, with retrospective application to all prior periods presented permitted Devereux will adopt these provisions for the year ending June 30, 2015 The adoption will not impact Devereux's consolidated results of operations or financial position, however, it may change the classifications on the consolidated statement of cash flows

Notes to Consolidated Financial Statements (continued) (In Thousands)

2. Summary of Significant Accounting Policies (continued)

Subsequent Events

In accordance with Accounting Standards Codification (ASC) 855, management has evaluated subsequent events through the date the financial statements were issued on September 23, 2014

3. Net Client Revenue

Accounts receivable and net client revenue are reported on the accrual basis in the period in which services are rendered at established rates, net of contractual adjustments, discounts, and charity care Devereux recognizes bad debt expense and the allowance for uncollectible accounts based on its historical experience and individual account analysis

The majority of services are rendered to clients through reimbursement programs administered by state and local governmental agencies. A majority of those services are funded directly or indirectly by Pennsylvania, New Jersey, Florida, New York, and California. No single government agency accounted for more than 10% of revenue in 2014 or 2013. Under these programs, reimbursed amounts are based upon fee-for-service rates, a combination of historical costs and prospectively determined rates, or reasonable costs, as defined. In total, these programs accounted for 95% and 94% of total net client revenue in fiscal years 2014 and 2013, respectively. Remaining services are rendered through payment arrangements with managed care organizations, commercial insurance carriers, or private accounts.

Certain governmental agencies pay an interim rate or a fixed periodic amount during the period Devereux provides services and retroactively adjusts the reimbursement based upon actual costs incurred during the year or based on actual units of service delivered. Third-party settlements with governmental agencies are accrued on an estimated basis in the period the related services are rendered. Estimated settlements due to third-party payors are classified as current or noncurrent based on the anticipated timing of settlements. Differences between the estimated settlement and the finalized amounts are recorded in the year of settlement. During 2014 and 2013, prior-year settlement adjustments increased net client revenue by \$612 and \$889, respectively. In the opinion of management, adequate provision has been made for any additional adjustments that may result from the final settlement of outstanding cost reports.

Notes to Consolidated Financial Statements (continued) (In Thousands)

3. Net Client Revenue (continued)

Devereux is subject to numerous laws and regulations of federal, state, and local governments Compliance with these laws and regulations can be subject to government review and interpretation, as well as regulatory actions unknown and unasserted at this time Government activity in the health care industry continues to increase with respect to investigations and allegations concerning possible violations of regulations by health care providers, which could result in the imposition of significant fines and penalties, as well as significant repayments of previously billed and collected revenues of client services Devereux has implemented a corporate compliance program and conducts documentation audits of services provided and the underlying clinical documentation to ensure compliance with established regulations When potential overpayments are identified, payors are notified and refunds issued

4. Investments

Investments are stated at fair value as follows

	June 30				
		2014		2013	
Assets limited as to use and operating					
fund investments					
Cash and cash equivalents	\$	5,549	\$	5,034	
Equity mutual funds		47,483		36,299	
Commodity funds		6,111		4,424	
Real estate investment trust (REIT) funds		5,260		4,240	
Fixed-income mutual funds		8,201		12,907	
Multi-asset funds		58,018		53,212	
U S government and agency bonds		9,848		10,601	
Total	\$	140,470	\$	126,717	

Notes to Consolidated Financial Statements (continued) (In Thousands)

4. Investments (continued)

Investment income and realized and unrealized gains and losses on investments and cash and cash equivalents are comprised of the following

	Year Ended J 2014	une 30 2013	
Unrestricted net assets			
Amounts included in investment income			
Interest, dividends, and distributions	\$ 6,125 \$	4,287	
Net realized gains on sales of investments	1,634	4,582	
	 7,759	8,869	
Other changes in unrestricted net assets Net change in unrealized gains and losses	·		
on investments	8,693	3,257	
Permanently restricted net assets			
Net realized and unrealized gains on investments	635	434	
Total investment gain	\$ 17,087 \$	12,560	

No investments had unrealized losses as of June 30, 2014

5. Fair Value Measurements

In determining fair value, Devereux uses the market approach The market approach utilizes prices and other relevant information generated by market transactions involving identical or comparable assets or liabilities Information used to establish fair value estimates falls into three tiers, which prioritize the inputs used in measuring fair value These tiers include Level 1 – defined as observable inputs such as quoted prices in active markets, Level 2 – defined as inputs other than quoted prices in active markets that are either directly or indirectly observable, and Level 3 – defined as unobservable inputs in which little or no market data exists, therefore, requiring an entity to develop its own assumptions

Notes to Consolidated Financial Statements (continued) (In Thousands)

5. Fair Value Measurements (continued)

The following tables present the fair value hierarchy for Devereux's financial assets and liabilities measured at fair value on a recurring basis at June 30, 2014 and 2013

	Total		Level 1		Level 2		Level 3
\$	5,549	\$	5,549	\$	_	\$	_
	47,483		47,483		_		_
	6,111		6,111		_		_
	5,260		5,260		_		_
	8,201		8,201		_		_
	9,848		9,848		_		_
	58,018		11,000		47,018		
\$	140,470	\$	93,452	\$	47,018	\$	
\$	5,689	\$		\$	5,689	\$	
\$	327	\$	_	\$	327	\$	
¢	5.03/1	Φ	5.03/1	Φ		P	
Ψ		Ψ		Ψ		Ψ	
					_		
					_		
					43 326		
\$	126,717	\$	83,391	\$	43,326	\$	
\$	4,864	\$	_	\$	4,864	\$	_
	\$ \$ \$	\$ 5,549 47,483 6,111 5,260 8,201 9,848 58,018 \$ 140,470 \$ 5,689 \$ 327 \$ 327 \$ 12.907 10.601 53,212 \$ 126.717	\$ 5,549 \$ 47,483 6,111 5,260 8,201 9,848 58,018 \$ 140,470 \$ \$ \$ 5,689 \$ \$ \$ 5,689 \$ \$ \$ 327 \$ \$ \$ \$ 36,299 4,424 4,240 12,907 10,601 53,212 \$ 126,717 \$	\$ 5,549 \$ 5,549 47,483 47,483 6,111 6,111 5,260 5,260 8,201 8,201 9,848 9,848 58,018 11,000 \$ 140,470 \$ 93,452 \$ 5,689 \$ - \$ 327 \$ - \$ 36,299 36,299 4,424 4,240 12,907 12,907 10,601 10,601 53,212 9,886 \$ 126,717 \$ 83,391	\$ 5,549 \$ 5,549 \$ 47,483	\$ 5,549 \$ 5,549 \$ - 47,483	\$ 5,549 \$ 5,549 \$ - \$ 47,483

Notes to Consolidated Financial Statements (continued) (In Thousands)

5. Fair Value Measurements (continued)

Devereux's Level 1 securities primarily consist of cash, money market funds, equity mutual funds, commodity funds, REIT funds, fixed-income mutual funds, and U S government and agency bonds Devereux determines the estimated fair value for its Level 1 securities using quoted (unadjusted) prices for identical assets or liabilities in active markets

Devereux has investments in two multi-asset funds One of the funds is an exchange-traded mutual fund whose fair value has been determined using Level 1 inputs In accordance with ASU 2009-12, the fair value of Devereux's other investment in a multi-asset fund was calculated using the fund's net asset value per share at June 30, 2014 and 2013. The fair value of these underlying assets as of June 30, 2014 and 2013, was \$47,018 and \$43,326, respectively, with a daily redemption period without notice. This multi-asset fund requires no up-front commitments and is made up of the following diversified investments common stock, convertible bonds, commodity funds and REIT funds, corporate bonds, asset-backed securities, mortgage-backed securities, U.S. Government and agency bonds, U.S. Treasury bonds, acquired funds, preferred stocks, and other short-term investments. Given Devereux's prompt ability to liquidate this investment at its net asset value, it was classified as a Level 2 investment.

The interest rate swap, which is classified as a Level 2 liability, is valued using techniques including discounted cash flow analysis on the expected cash flow of the derivative. This analysis reflects the contractual terms of the derivative, including the period to maturity, and uses observable market-based inputs, including interest rate curves

6. Property and Equipment

Estimated	Jur	June 30			
Useful Lives	2014		2013		
\$	6,145	\$	6,145		
8–25 years	25,470		25,084		
5–40 years	216,056		210,100		
3–20 years	62,203		58,594		
	5,610		5,113		
	315,484		305,036		
	204,379		195,364		
\$	111,105	\$	109,672		
	8-25 years 5-40 years 3-20 years	Useful Lives 2014 8-25 years 25,470 5-40 years 216,056 3-20 years 62,203 5,610 315,484 204,379	Useful Lives 2014 \$ 6,145 \$ 8-25 years 25,470 5-40 years 216,056 3-20 years 62,203 5,610 315,484 204,379		

Notes to Consolidated Financial Statements (continued) (In Thousands)

6. Property and Equipment (continued)

In 2007, Devereux sold its campus in Santa Barbara, California, and leased back a portion of the campus for operating purposes At the time of the sale, \$3,960 of the \$18,309 gain on sale was deferred and is being recognized over the ten-year initial lease period

7. Pledges Receivable and Deferred Gifts

The following is a summary of promises to give funds to Devereux

	June 30		
		2014	2013
Pledges receivable in			
Less than one year	\$	293 \$	1,034
One to five years		556	670
		849	1,704
Less allowance for uncollectible accounts		(40)	(67)
Less discount to present value		(37)	(53)
Pledges receivable, net		772	1,584
Beneficial interest in trusts held by third parties, net		5,689	4,864
Total	\$	6,461 \$	6,448

The present value of the future cash flows of pledges receivable was determined using discount rates approximating 2 0% for 2014 and 2013

Devereux periodically receives indications of an intention to give from individuals through the settlement of the individuals' estates The anticipated value of these intended gifts has not been established, nor has it been recognized as an asset in the consolidated balance sheets

The beneficial interests in trusts are unconditionally designated for the benefit of Devereux upon the occurrence of some future event During 2014, Devereux did not receive any cash from trusts, one new gift of \$450 in beneficial interest in trusts was received During 2013, Devereux received \$2,196 in cash from trusts, no new gifts in beneficial interest in trusts were received The interests are recorded at fair value as represented by the third-party trustee

Notes to Consolidated Financial Statements (continued) (In Thousands)

8. Long-Term Debt

	June 30		
		2014	2013
\$29,240 tax-exempt Chester County Health and Education			
Facilities Authority Revenue Bonds, Series of 2006			
(the 2006 Pennsylvania Bonds)	\$	23,670 \$	24,525
\$16,300 tax-exempt Dormitory Authority of the State of			
New York Revenue Bonds, Series 1995 (the New York			
Bonds) The bonds are secured by a first mortgage on the			
Red Hook, New York, property and revenues earned by			
the facility		_	3,440
3 25% to 7 15% mortgages payable monthly through			
October 2028, secured by the related properties,			
equipment, or revenue		9,486	8,467
\$2,500 tax-exempt New Jersey Economic Development			
Authority Revenue Bonds, Series of 1997			1.650
(the New Jersey Bonds)		_	1,650
\$6,580 tax-exempt Chester County Health and			
Education Facilities Authority Revenue Bonds,		7 440	5.021
Series of 2011 (the 2011 Pennsylvania Bonds)		5,449	5,831
\$8,745 tax-exempt Chester County Health and Education			
Facilities Authority Revenue Bonds, Series of 2012		0.245	0.745
(the 2012 Pennsylvania Bonds)		8,245	8,745
\$7,054 tax-exempt Colorado Health Facilities Authority		6 202	7.054
Revenue Bonds, Series of 2012 (the 2012 Colorado Bonds)		6,392	7,054
\$9,000 taxable borrowing from a bank (the 2013 Loan)		8,004	50.712
Total long-term debt		61,246	59,712
Less current portion		(3,433)	(4,087) 395
Net long torm dobt	•	368 58,181 \$	
Net long-term debt	<u>\$</u>	58,181 \$	56,020

Notes to Consolidated Financial Statements (continued) (In Thousands)

8. Long-Term Debt (continued)

In July 2013, Devereux entered into an agreement with a bank to borrow \$9,000 in variable-rate debt (the 2013 Loan) that was used to currently refund the 1995 New York and 1997 New Jersey Bonds and finance certain capital expenditures. The 2013 Loan matures over a five-year period, however, after three years and annually thereafter, Devereux may request the bank to extend the maturity date up to a maximum term of 15 years. Concurrent with the 2013 Loan, Devereux entered into a 15-year interest rate swap with a notional amount of \$8,393 that effectively fixes the interest rate at 5 03%. A loss on early extinguishment of debt of \$121, comprised of the write-off of the unamortized issuance costs and original issue discount, was recorded in 2014 and is included as a component of excess of revenue over expenses.

In November 2012, Devereux issued the 2012 Pennsylvania and 2012 Colorado Bonds to refinance the Series 2002 Pennsylvania and Series 2002 Colorado Bonds All of the bonds were acquired by a financial institution. The bonds mature over a 15-year period and the financial institution has an option to call the bonds after seven years (November I, 2019). The 2012 Pennsylvania and 2012 Colorado Bonds bear interest at a fixed rate, subject to a rate reset if the bonds are not called by the financial institution. A loss on early extinguishment of debt of \$1,032, comprised of the write-off of the unamortized issuance costs and original issue discount, was recorded in 2013 and is included as a component of excess of revenue over expenses. The Series 2002 Bonds bore interest at rates between 4 125% to 5 000% for the period from July 1, 2012 through the November 2012 redemption.

In December 2011, Devereux issued the 2011 Pennsylvania Bonds to refinance the 1997 Pennsylvania Bonds All of the bonds were acquired by a financial institution. The 2011 Pennsylvania Bonds bear interest at a variable rate equal to 65 00% of the one-month LIBOR, plus a margin of 1 40%. The rate on the bonds at June 30, 2014, was 1 50%. The bonds mature over a 15½-year period, and the financial institution has an option to call the bonds after seven years (December 15, 2018).

All of the tax-exempt bonds, except the New York Bonds (collectively, the Bonds) and the 2013 Loan, were issued under a Master Trust Indenture (MTI) for which Devereux, HD Foundation, DCW, and DCW Foundation are members of the obligated group and were issued to advance, refund, or refinance previously issued tax-exempt bonds and other debt, to finance certain capital expenditures, and to fund required debt service and reserve funds. They are secured by an interest in Gross Revenues, as defined, as well as mortgages on certain properties. Gross Revenues represent all revenue and accounts, excluding those of the Red Hook, New York, facility, pledged for the New York Bonds

Notes to Consolidated Financial Statements (continued) (In Thousands)

8. Long-Term Debt (continued)

The original issue discounts and premiums on the Bonds are being amortized using the interest method over the term of the related debt

Agreements related to the Revolving Credit Agreement (see Note 9) and the debt issued under the MTI, contain financial covenants requiring Devereux to maintain debt service coverage and liquidity ratios All such covenants were complied with at June 30, 2014 and 2013

Other information relating to each of the Bonds, all of which have serial and term components, is as follows

		2012 Pennsylvania Bonds	2012 Colorado Bonds
Annual principal payment	July 1	November 1	November 1
Annual principal payment	2028	2028	2028
Year of final maturity	2020	2020	2020
Range of principal and/or sinking fund payments	\$409 to \$769	\$510 to \$674	\$167 to \$787
Interest payment dates	Monthly	May 1 and November 1	May 1 and November 1
Range of interest rates	5 03%	2 15%	2 28%
		2011	2006
		Pennsylvania	Pennsylvania
		Bonds	Bonds
Annual principal payment		May 1 and November 1	November 1
Year of final maturity		2027	2031
Range of principal and/or			
sinking fund payments		\$385 to \$454	\$890 to \$1,915
Interest payment dates		May 1 and November 1	May 1 and November 1
Range of interest rates		Variable	5 00% to 5 25%

Notes to Consolidated Financial Statements (continued) (In Thousands)

8. Long-Term Debt (continued)

Scheduled maturities of all long-term debt for the next five years ending June 30 are as follows

2015	\$ 3,433
2016	3,641
2017	3,747
2018	3,852
2019	9,657
Thereafter	36,769

Interest paid on all indebtedness amounted to \$2,847 in 2014 and \$3,592 in 2013

Fair Value

Devereux uses quoted market prices in estimating the fair value of the revenue bonds and the outstanding mortgage obligations' carrying value approximates the fair value. The fair value of the long-term debt at June 30, 2014 and 2013, is \$62,201 and \$60,475, respectively, and was determined using the market approach under ASC 820

9. Note Payable

Devereux has a bank Revolving Credit Agreement (Revolver) for \$39,300, which is available for working capital and letters of credit. The term of the Revolver is through November 30, 2014. The Revolver is secured by a parity lien on Gross Revenues and by mortgages on certain Devereux properties, as defined under the MTI (see Note 8). As of June 30, 2014 and 2013, under the Revolver, interest on working capital loans is computed at the one-month LIBOR rate plus an applicable margin of 1 00%. At June 30, 2014 and 2013, no working capital loans were outstanding. At June 30, 2014, letters of credit aggregating \$10,309 were outstanding, substantially all of which were used to secure deductibles under insurance policies (see Note 14). Fees on outstanding letters of credit accrue at 1 00% at June 30, 2014 and 2013. A commitment fee of 0 25% is paid on unused Revolver amounts.

Devereux entered into a financing agreement, as amended (the Loan Agreement), with a bank providing advances up to an aggregate amount of \$4,000 that expires on December 31, 2015. The loans are for the purpose of acquiring and renovating real property at various locations in the state of New Jersey, to be used as group homes for intellectually and developmentally disabled

Notes to Consolidated Financial Statements (continued) (In Thousands)

9. Note Payable (continued)

individuals Loan advances initially bear interest at the prime rate, and within 90 days are converted to amortizing term loans with a term of either five, seven, or ten years at the election of Devereux Principal is paid in monthly installments based on a 25-year amortization, and bears interest at the following rates for a five- or a seven- year term the Federal Home Loan Bank (FHLB) rate plus 225 basis points, or for a ten-year term the FHLB rate plus 250 basis points The loans are secured by first mortgage liens on the properties financed A commitment fee of 0 25% is paid on the unused amount At June 30, 2014 and 2013, there was \$3,135 and \$1,772, respectively, in outstanding loans that are included in the mortgages payable total in Note 8

10. Obligation to Provide Future Services and the Use of Facilities to Continuing Care Clients

Devereux is contractually obligated to provide care for life to certain clients. The obligation, which recognizes the future costs, to be incurred under these continuing care contracts, was computed using the following assumptions for 2014 and 2013 annual cost of care based on actual operating costs, life expectancy based on 1959-61 U.S. Life Tables, an inflation factor base of 4.75% for 2014 and 2013 of the average annual operating cost, an interest yield of 6.00% for 2014 and 2013, and a reduction for any supplemental payments to be received from the clients. The obligation is further reduced to the extent Devereux receives Social Security (assumed to increase at an annual rate of 3.00% for 2014 and 2013) or other benefits on behalf of the clients.

As of June 30, 2014, there were 27 individuals covered by continuing care contracts

Devereux also recognizes the present value of certain arrangements with several continuing care residents under which Devereux is the beneficiary of the assets of trusts established on behalf of the residents

Notes to Consolidated Financial Statements (continued) (In Thousands)

10. Obligation to Provide Future Services and the Use of Facilities to Continuing Care Clients (continued)

The present value of the components of the obligation follows

	June 30			
		2014	2013	
Gross liability	\$	22,441 \$	25,136	
Social Security and other benefits		(8,195)	(9,362)	
Future trust interests		(7,642)	(9,220)	
	<u>\$</u>	6,604 \$	6,554	

11. Retirement Plan

Devereux has a defined contribution retirement plan that covers substantially all full-time employees, as well as part-time employees working a minimum of 1,000 hours who have completed two years of service and are active employees at the end of the plan year, which is administered by the Teachers Insurance and Annuity Association Contributions to the plan are based on 5% of the employee's compensation (6% prior to January 1, 2013), plus a match of employee contributions up to 2% of compensation These contributions are credited to individual annuity contracts owned by each participant and are charged to expense when earned Contribution expense was \$7,796 in 2014 and \$8,714 in 2013

12. Temporarily Restricted Net Assets

Temporarily restricted net assets are available for the following purposes

	June 30			
		2014		2013
Purchase of property and equipment	\$	622	\$	743
Behavioral health care and education services		3,602		4,077
Research		910		766
Other		1,718		1,804
For future periods		6,893		6,565
	\$	13,745	\$	13,955

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Notes to Consolidated Financial Statements (continued) (In Thousands)

12. Temporarily Restricted Net Assets (continued)

During 2014 and 2013, \$2,866 and \$6,053, respectively, of temporarily restricted net assets were released from restrictions for operations, of which \$657 and \$2,862, respectively, related to the collection of previous pledges, which are classified as a component of unrestricted gifts and bequests in the consolidated statements of operations and changes in net assets

13. Permanently Restricted Net Assets

Activity in Devereux's permanently restricted net assets is as follows

	June 30			
		2014	2013	
Endowment balance at beginning of year Investment income return	\$	7,381 \$	7,219	
Investment income		138	125	
Realized and unrealized gains		635	434	
Total investment income return		773	559	
Contributions Appropriation of endowment assets for		5	68	
intended purpose		(475)	(465)	
Endowment balance at end of year	\$	7,684 \$	7,381	

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Notes to Consolidated Financial Statements (continued) (In Thousands)

14. Commitments and Contingencies

Operating Leases

Devereux leases various equipment and facilities under operating leases expiring at various dates through 2019 Total rent expense for the years ended June 30, 2014 and 2013, was \$7,853 and \$8,076, respectively The following is a schedule by year of future minimum lease payments under operating leases as of June 30, 2014, that have initial or remaining lease terms in excess of one year

Year ending June 30	
2015	\$ 6,183
2016	4,231
2017	2,970
2018	1,163
2019	361
Thereafter	 572
	\$ 15,480

Workers' Compensation

Devereux maintains workers' compensation insurance with a per-claim deductible of \$750 for 2014 and 2013 Due to this level of retention, Devereux maintains \$2,177 of cash on deposit with its insurers for the payment of future claims, which is included in operating fund investments in the consolidated balance sheets Additionally, Devereux is required to post letters of credit of \$10,309 as collateral for its obligations as of June 30, 2014 and 2013 (see Note 9) Based upon historical loss experience, management determined that a \$15,008 and \$14,671 liability for the estimated retention and costs of claims not settled as of June 30, 2014 and 2013, respectively, be recorded as a component of reserves under insurance programs and other liabilities in the consolidated balance sheets. In 2013, Devereux recorded a \$1,900 charge related to prior-year losses as a change in estimate in the consolidated statement of operations.

Notes to Consolidated Financial Statements (continued) (In Thousands)

14. Commitments and Contingencies (continued)

Professional and General Liability

Devereux is insured under a claims-made policy for professional liability and an occurrence policy for general liability Devereux retained \$8,000 for 2014 and 2013 in aggregate deductibles related to the combination of professional and general liability coverage. Due to this level of retention, Devereux is required to post \$4,000 of collateral, which was met with an insurance trust holding treasury securities valued at \$4,197 as of June 30, 2014. Based upon historical loss experience, management determined that a \$4,731 and \$4,625 liability for the estimated retention and cost of claims and incidents not settled as of June 30, 2014 and 2013, respectively, be recorded as a component of reserves under insurance programs and other liabilities in the consolidated balance sheets. Devereux plans to continue to obtain adequate professional and general liability insurance.

Litigation

Devereux and DCW are contingently liable in connection with certain claims and contracts arising in the normal course of its activities. After consultation with legal counsel, management believes these matters will be resolved without a material adverse effect on Devereux's future financial position or results from operations

Devereux is not a party to, nor are any of its properties the subject of, any material, pending legal proceedings other than ordinary, routine litigation incidental to the business

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