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 ${\it Form} 990\text{-}EZ$

Short Form

DLN: 93492133022220 OMB No 1545-1150

2009

Department of the Treasury Internal Revenue Service

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

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than Open to Public \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

Inspection

A F	or t he		r tax year beginning 01-01-2009 , and endi	ng 12-31-2009		· _
B Check if applicable Please INTERNATIONAL PLAY EQUIPMENT MANUFA INTERNATIONAL PLAY EQUIPMENT MANUFA				D Employer identification num		
Name change use IRS label or l			52-21			
Initial return print or type. See 4305 NORTH SIXTH ST			E releph	one number		
_					F Group Numbe	Exemption er 🕨
• Se	ction		ons and 4947(a)(1) nonexempt charitable trusts ompleted Schedule A (Form 990 or 990-EZ).	G A ccounting me Other (specify		Cash Accrual
T W	ehsit e	:► WWWIPEMAORG		H Check ► 🔽		organization
			ne)— 501(c) (6) ◀(insert no) 4947(a)(1) or 5	27 Is not require Schedule B (ach 0, 990-EZ, or 990-PF)
		_	is not a section 509(a)(3) supporting organization ar	1 00000.000		
			m 990 return is not required, but if the organization c			
	i lines 5 art I		determine gross receipts, if \$500,000 or more, file Form 990 insta		▶ \$	207,125
	1		nses, and Changes in Net Assets or Fund			1
	2	, , , ,	enue including government fees and contracts		·	2 69,130
	3	Membership dues and			·	3 133,516
	4	Investment income	1 43363311161113		· -	4 4,479
	-		ale of accets other than inventory		· -	4,479
а.	5a		ale of assets other than inventory	5a		
Ę	Ь		asis and sales expenses	5b		_
Revenue	6	, ,	ale of assets other than inventory (Subtract line 5b front in the state of Schedule G)	•	⊢	5c
	а	•	ncluding \$ _of contributions			
		reported on line 1)		6a		
	ь	Less direct expense	s other than fundraising expenses	6b		
	_ c	•	from special events and activities (Subtract line 6b fi		_	6c
	7a	• •	ory, less returns and allowances	7a		
	Ь	Less cost of goods s		7b		
	c	-	from sales of inventory (Subtract line 7b from line 7a			7c
	8	Other revenue (descr	·	,	`	8
	9	•	nes 1, 2, 3, 4, 5c, 6c, 7c, and 8		—/	9 207,125
	10		nounts paid (attach schedule) 🕏			10 7,500
		Benefits paid to or for			—	
	11	·	ensation, and employee benefits		-	11 46,350
v.	12	,	, , ,		—	,
350	13		l other payments to independent contractors		—	97,694
Expenses	14		ities, and maintenance		<u> </u>	14 4 5 5 2
ω	15	-, .	, postage, and shipping		—	15 4,553
	16	Other expenses (des				16 34,346
	17	<u>-</u>	lines 10 through 16			190,443
NetAssets	18		r the year (Subtract line 17 from line 9)		. -	18 16,682
S S J	19		llances at beginning of year (from line 27, column (A)			
3			ported on prior year's return)		•	233,586
Z	20	-	assets or fund balances (attach explanation) .		•	20
	21		·	<u> </u>		250,268
Pa	rt II	Balance Sheets	—If Total assets on line 25, column (B) are \$1,250,	000 or more, file Form 9	990 inste	ead of Form 990-EZ
		(See t	he instructions for Part II)	(A) Beginning of year	ar	(B) End of year
22	Cash	, savings, and investm	·		586 22	250,268
23		and buildings			23	
		r assets (describe 🕨)		24	
25		assets		233,		250,268
26		l liabilities (describe	,		26	
		•	(line 27 of column (B) must agree with line 21) .	233,	586 27	250,268

Part III Statement of Program Service Accomplishments (See the instructions for Part III)					Expenses
What is the organization's primary exempt	purpose?				uired for section 501
PROMOTE OPEN MARKET FOR MANUFAC	CTURERS			1 ' ' '	3) and 501(c)(4)
Describe what was achieved in carrying out describe the services provided, the number program title				organizations and section 4947(a)(1) trusts, optional for others)	
28 PROCESSED MEMBERSHIPS FOR 166 115 COMPANIES FOR PRODUCT CERTIF (Grants \$) If this		28a			
29 CONDUCTED SOCIAL AT NRPA CONF VOICE OF PLAY WEBSITES					
	s amount includes foreign o	grants, check here .	· · F	29a	
30 A WARDED GRANT TO JOE L FROST PI (Grants \$) If this	LAY COLLECTION s amount includes foreign ç	grants, check here .	▶┌	30a	
31 O ther program services (attach schedul (Grants \$) If this	le) s amount includes foreign g		▶ ┌	31a	
32 Total program service expenses (add line	es 28a through 31a) .		.	32	
Part IV List of Officers, Directors, Trus	stees, and Key Employees.	List each one even if not coi	mpensated (See the ins	tructions	s for Part IV)
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0)	(d) Contributions employee benefit pl deferred compensa	ans &	(e) Expense account and other allowances

Pa	rt V Other Information (Note the statement requirements in the instructions for Part V.)		Yes	No
33				
	description of each activity	33		N o
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		N o
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033 (e) notice, reporting, and proxy tax requirements?	35a		No
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions 37a			
ь	Did the organization file Form 1120-POL for this year?	37b		Νo
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		Νo
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . 38b			
39	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities 39b			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under			
	section 4911, section 4912, section 4955			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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	40b		
c	c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		Νο
41	List the states with which a copy of this return is filed 🕨			
42a	The organization's books are in care of DENISE CALABRESE Telephone no	(71	7)238	1744
	4305 N SIXTH STREET SUITE A Located at Harrisburg, PA ZIP + 4	► <u>17</u>	110	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority	[Yes	No No
	over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		N o
	If "Yes," enter the name of the foreign country 🕨			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
c	At any time during the calendar year, did the organization maintain an office outside of the U S?	42c		No
	If "Yes," enter the name of the foreign country ▶			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year			▶ Г
		[Yes	No
44	Did the organization maintain any donor advised funds? If "Yes", Form 990 must be completed instead of			
	Form 990-EZ.	44		Νο
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes", Form 990 must be completed instead of Form 990-EZ.	45		No

Form 99(0-EZ (2009)							Page 4
Part V	Section 501(c)(3) organ All section 501(c)(3) organ 46-49b and complete the	nizations and section	1 4947(a)(1) nonexer	-			-	stions
46 Did	d the organization engage in direct	or indirect political can	npaign activities on beh	alf of or in opp	osition to		Yes	No
car	ndıdates for public office? If "Yes,"	complete Schedule C,	Part I			46		
47 Did	d the organization engage in lobbyii	ng activities? If "Yes,"	complete Schedule C, P	art II		47		
48 Is	the organization a school describe	d in section 170(b)(1)(A)(II)? If "Yes," complete	e Schedule E		48		
49a Dic	d the organization make any transfe	ers to an exempt non-cl	harıtable related organız	zation?		49a		
b If"	'Yes," was the related organization	a section 527 organiza	ation?			49b		
	mplete this table for the organization				•			
	ne and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	n employee	tributions to benefit plans & compensation	ac	e) Expe count rallowa	and
51 Co	otal number of other employees pa mplete this table for the organization compensation from the organization Name and address of each indepen	on's five highest compe n Ifthere is none, ente	r "None "		each received n		an \$10 ompen	
51(d) ⊤	otal number of other independent c	ontractors each receiv	ing over \$100,000 .					
	Under penalties of perjury, I declare t and belief, it is true, correct, and com	hat I have examined this re	turn, including accompanying					
Please Sign	Under penalties of perjury, I declare t	hat I have examined this ref	turn, including accompanying		on of which prepare			
Please Sign	Under penalties of perjury, I declare t and belief, it is true, correct, and com	hat I have examined this ret plete Declaration of prepare	turn, including accompanying	d on all information 2010-0	on of which prepare			
Please Sign Here	Under penalties of perjury, I declare to and belief, it is true, correct, and com ****** Signature of officer DENISE CALABRESE EXECUTIVE DITYPE or print name and title Preparer's signature LISA ACRI CPA	hat I have examined this rel plete Declaration of prepare	turn, including accompanying or (other than officer) is base. Date (2010-05-13	d on all information 2010-0	on of which prepare	er has ar	y kńowk	
Please Sign Here Paid	Under penalties of perjury, I declare t and belief, it is true, correct, and com ****** Signature of officer DENISE CALABRESE EXECUTIVE DI Type or print name and title Preparer's signature LISA ACRI CPA Firm's name (or yours LISA ACRI C if self-employed),	that I have examined this rel plete Declaration of prepare IREC	turn, including accompanying or (other than officer) is base. Date (2010-05-13	d on all information 2010-(Date Check if self-	on of which prepare 05-05 Preparer's identif	er has ar	y kńowk	
Please Sign Here	Under penalties of perjury, I declare to and belief, it is true, correct, and com ****** Signature of officer DENISE CALABRESE EXECUTIVE DITYPE or print name and title Preparer's signature LISA ACRI CPA Firm's name (or yours LISA ACRI C yours of self-employed), address, and ZIP + 4	that I have examined this rel plete Declaration of prepare IREC	turn, including accompanying or (other than officer) is base. Date (2010-05-13	d on all information 2010-(Date Check if self-	Preparer's identif	ying nun	y knowle	

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DLN: 93492133022220

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.

OMB No 1545-0047

Open to Public Inspection

If the organization answe	ered "Yes," to Form	990, Part IV, Line 3,	or Form 990-EZ, F	Part VI, 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

♦ Se ♦ Se If th	ection 501(c)(3) organizations that ection 501(c)(3) organizations that	s," to Form 990, Part IV, Line 4, or have filed Form 5768 (election under have NOT filed Form 5768 (election us," to Form 990, Part IV, Line 5 (Presented on the second second second second second second second second sec	section 501(h)) (nder section 501	Complete Part II-A Do no (h)) Complete Part II-B [t complete Do not coi	e Part II-B mplete Part	II-A
N a	me of the organization ERNATIONAL PLAY EQUIPMENT MANUFA	·				tion numbe	r
Par	t I-A Complete if the or	ganization is exempt under s	section 501(52-21027 c) or is a section 5		anizatio	n.
1	•	ganization's direct and indirect politic	•	_	_		
2	Political expenditures	,	, , ,	•	\$		
3	Volunteer hours				_		
Par	t I-B Complete if the or	ganization is exempt under s	section 501(c)(3).			
1		tax incurred by the organization und			- \$		
2	Enter the amount of any excise	tax incurred by organization manage	ers under sectioi	n 4955 I	- \$		
3	If the organization incurred a s	ection 4955 tax, did it file Form 472	O 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 section	501(c)((3).	
1	Enter the amount directly expe	ended by the filing organization for se	ction 527 exemp	ot function activities	- \$		
2	Enter the amount of the filing o exempt funtion activities	rganızatıon's funds contributed to otl	ner organizations	s for section 527	- \$		
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 112	0-POL, line 17b	- d		
4	Did the filing organization file F	Form 1120-POL for this year?			Ψ	☐ Yes	
5	State the names, addresses ar were made For each organizat contributions received that we	nd employer identification number (EI ion listed, enter the amount paid from re promptly and directly delivered to ittee (PAC) If additional space is ne	ı the filing organı a separate politi	ızatıon's funds Also ent cal organızatıon, such a	er the an	nount of po	litical
	(a) Name	(b) Address	(c) EIN	(d) A mount paid fro filing organization's funds If none, enter	s cor	A mount of ntributions and prompt ectly delive	received ly and

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c)(3) and file	d Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked box		d" provisions apply	,		
<u> </u>	Limits on Lobbying E (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	ıbyıng)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 18	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount f	from the following table	ın both			
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,000,000				
		•				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)				
h	Subtract line 1g from line 1a If zero or less, enter	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 li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					

Sche	edule C (Form 990 or 990-EZ) 2009				age 3	
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and h (election under section 501(h)).	as NOT f	iled Fo		8	
		((a)		(b)	
		Yes	No	A mou	nt	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities? If "Yes," describe in Part IV					
j	Total lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)(5), o	r sectio	n	
_			_	Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?		<u> </u>	1	No	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		_	2 Yes		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
Par	Tt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Paanswered "Yes".				n	
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	al				
а	Current year	2a	<u> </u>			
b	Carryover from last year	2b				
С	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
Pa	art IV Supplemental Information	ı	•			
Со	omplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5 so, complete this part for any additional information	, and Part	II-B, lıne	11		
		lanation				

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TY 2009 Grants and Similar Amounts Paid Schedule

Name: INTERNATIONAL PLAY EQUIPMENT MANUFA

EIN: 52-2102729

Item No.	1
Class of Activity	ANNUAL CONTRIBUTION
Donee's Name	JOE L FROST PLAY COLLECTION
Donee's Address	4301 BROADWAY San Antonio, TX 78209
Amount (FMV)	5,000
Purpose of Payment to Affiliate	
Relationship	NONE
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

Item No.	2
Class of Activity	BRONZE SPONSOR
Donee's Name	SUMMIT ON THE VALUE OF PLAY
Donee's Address	263 LEHOTSKY HALL PO BOX 340735 Clemson, SC 29634
Amount (FMV)	2,500
Purpose of Payment to Affiliate	
Relationship	NONE
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

TY 2009 Other Expenses Schedule

Name: INTERNATIONAL PLAY EQUIPMENT MANUFA

EIN: 52-2102729

Description	Amount
CERTIFICATIONS AND MEETINGS	8,067
BANK AND CREDIT CARD FEES	2,904
INSURANCE EXPENSE	3,800
OFFICE EXPENSE	664
TELEPHONE EXPENSE	1,897
TRAVEL EXPENSE	6,461
WEBSITE EXPENSE	8,215
DUES EXPENSE	2,338

Software ID: Software Version:

EIN: 52-2102729

Name: INTERNATIONAL PLAY EQUIPMENT MANUFA

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
RICHARD HAWLEY 4305 NORTH SIXTH ST HARRISBURG,PA 17110	DIRECTOR 1	0	0	0
TED ILLJES 4305 NORTH SIXTH ST HARRISBURG,PA 17110	DIRECTOR 1	0	0	0
CURTIS CLEVELAND 4305 NORTH SIXTH ST HARRISBURG,PA 17110	TREASURER 1	0	0	0
TOM NORQUIST 4305 NORTH SIXTH ST HARRISBURG,PA 17110	IMMEDIATE PAST 1	0	0	0
BILL CLAPP 4305 NORTH SIXTH ST HARRISBURG,PA 17110	SECRETARY 1	0	0	0
KEITH SACKS 4305 NORTH SIXTH ST HARRISBURG,PA 17110	DIRECTOR 1	0	0	0
TIM AHERN 4305 NORTH SIXTH ST HARRISBURG,PA 17110	PRESIDENT 1	0	0	0
RANDY WATERMILLER 4305 NORTH SIXTH ST HARRISBURG,PA 17110	DIRECTOR 1	0	0	0
LLOYD REESE 4305 NORTH SIXTH ST HARRISBURG,PA 17110	PRESIDENT ELECT 1	0	0	0
SCOTT LIEBELT 4305 NORTH SIXTH ST HARRISBURG,PA 17110	DIRECTOR 1	0	0	0
CALABRESE MANAGEMENT 4305 NORTH SIXTH ST HARRISBURG, PA 17110	MGMT COMPANY 14	46,350	0	0