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Form 990



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)

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

OMB No 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

C Name of organization

SOCIETY FOR HUMAN RESOURCE MANAGEMENT

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

1800 DUKE STREET

Room/suite

City or town, state or country, and ZIP + 4

ALEXANDRIA, VA 223143499

F Name and address of principal officer

HENRY JACKSON

1800 DUKE STREET

ALEXANDRIA,VA 223143499

H(a) Is this a group return for affiliates?

☐ Yes ☒ No

H(b) Are all affiliates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number

I Tax-exempt status

☐ 501(c)(3) ☒ 501(c) (6) ☐ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website:

WWW SHRM ORG

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation

1949

M State of legal domicile

OH

Part I	Summary																								
Activities & Governance	1 Briefly describe the organization's mission or most significant activities SHRM'S MISSION IS TO SERVE THE NEEDS OF HUMAN RESOURCE PROFESSIONALS																								
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets																								
	<table><tr><td> 3 Number of voting members of the governing body (Part VI, line 1a) </td><td> 3 </td><td> 13 </td></tr><tr><td> 4 Number of independent voting members of the governing body (Part VI, line 1b) </td><td> 4 </td><td> 12 </td></tr><tr><td> 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) </td><td> 5 </td><td> 360 </td></tr><tr><td> 6 Total number of volunteers (estimate if necessary) </td><td> 6 </td><td> 7,925 </td></tr><tr><td> 7a Total unrelated business revenue from Part VIII, column (C), line 12 </td><td> 7a </td><td> 12,353,585 </td></tr><tr><td> 7b Net unrelated business taxable income from Form 990-T, line 34 </td><td> 7b </td><td> 3,043,278 </td></tr></table>	3 Number of voting members of the governing body (Part VI, line 1a)	3	13	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	360	6 Total number of volunteers (estimate if necessary)	6	7,925	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	12,353,585	7b Net unrelated business taxable income from Form 990-T, line 34	7b	3,043,278						
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Expenses	<table><tr><td> 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) </td><td> 636,300 </td><td> 625,871 </td></tr><tr><td> 14 Benefits paid to or for members (Part IX, column (A), line 4) </td><td> 0 </td><td> 0 </td></tr><tr><td> 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) </td><td> 40,124,333 </td><td> 42,996,352 </td></tr><tr><td> 16a Professional fundraising fees (Part IX, column (A), line 11e) </td><td> 0 </td><td> 0 </td></tr><tr><td> b Total fundraising expenses (Part IX, column (D), line 25) </td><td> 0 </td><td> </td></tr><tr><td> 17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) </td><td> 56,259,873 </td><td> 53,264,917 </td></tr><tr><td> 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) </td><td> 97,020,506 </td><td> 96,887,140 </td></tr><tr><td> 19 Revenue less expenses Subtract line 18 from line 12 </td><td> -3,232,595 </td><td> 4,985,692 </td></tr></table>	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	636,300	625,871	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	40,124,333	42,996,352	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0	b Total fundraising expenses (Part IX, column (D), line 25)	0		17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	56,259,873	53,264,917	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	97,020,506	96,887,140	19 Revenue less expenses Subtract line 18 from line 12	-3,232,595	4,985,692
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Net Assets or Fund Balances	<table><tr><td></td><td> Beginning of Current Year </td><td> End of Year </td></tr><tr><td> 20 Total assets (Part X, line 16) </td><td> 177,891,001 </td><td> 174,854,312 </td></tr><tr><td> 21 Total liabilities (Part X, line 26) </td><td> 53,992,252 </td><td> 67,943,531 </td></tr><tr><td> 22 Net assets or fund balances Subtract line 21 from line 20 </td><td> 123,898,749 </td><td> 106,910,781 </td></tr></table>		Beginning of Current Year	End of Year	20 Total assets (Part X, line 16)	177,891,001	174,854,312	21 Total liabilities (Part X, line 26)	53,992,252	67,943,531	22 Net assets or fund balances Subtract line 21 from line 20	123,898,749	106,910,781												
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Part II 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.

Sign Here

Signature of officer

2012-11-14

Date

MARY MOHNEY CHIEF FINANCIAL OFFICER

Type or print name and title

Paid Preparer's Use Only

Preparer's signature

FRANK H SMITH

Date

2012-11-13

Check if self-employed

☐

Preparer's taxpayer identification number (see instructions)

P00639053

Firm's name (or yours if self-employed), address, and ZIP + 4

RAFFA PC

1899 L STREET NW SUITE 900

WASHINGTON, DC 20036

EIN

52-1511275

Phone no

(202) 822-5000

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

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2011)

Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization's mission

SHRM'S MISSION IS TO SERVE THE NEEDS OF HUMAN RESOURCE PROFESSIONALS BY PROVIDING THE MOST ESSENTIAL AND COMPREHENSIVE RESOURCES AVAILABLE AND TO ADVANCE THE HUMAN RESOURCE PROFESSION TO ENSURE THAT HUMAN RESOURCES IS RECOGNIZED AS AN ESSENTIAL PARTNER IN DEVELOPING AND EXECUTING ORGANIZATIONAL STRATEGY

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes

No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ including grants of \$) (Revenue \$)

GOVERNMENT AND PUBLIC AFFAIRS SHRM MONITORS CONGRESSIONAL ACTIONS THAT IMPACT HUMAN RESOURCE MANAGEMENT ISSUES AND REPRESENTS MEMBERS' POSITIONS ON PENDING LEGISLATION AND REGULATORY ISSUES

4b

(Code) (Expenses \$ including grants of \$) (Revenue \$)

PUBLICATIONS SHRM DEVELOPS VARIOUS PUBLICATIONS WHICH EDUCATE MEMBERS AND NON-MEMBERS BY PROVIDING ARTICLES AND INFORMATION RELEVANT TO THE HUMAN RESOURCE MANAGEMENT FIELD

4c

(Code) (Expenses \$ including grants of \$) (Revenue \$)

SEMINARS AND EDUCATIONAL PRODUCTS SHRM PROVIDES VARIOUS FORUMS AND PRODUCTS TO HELP EDUCATE HUMAN RESOURCE PROFESSIONALS AND DISSEMINATE INFORMATION ON HUMAN RESOURCE ISSUES AND PROVIDE A NETWORKING FORUM FOR SUCH PROFESSIONALS

4d

Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses

\$

Form 990 (2011)

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	No
2	Is the organization required to complete Schedule B, Schedule of Contributors(see instructions)?	2	No
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	
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	Yes
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? If "Yes," complete Schedule D, Part 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	No
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, 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	No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	No
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		
a	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	Yes
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
e	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	Yes
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	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, XII, and XIII 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	Yes
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, Part I	14b	Yes
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part 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 assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	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	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	No
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 hospitals? If "Yes," complete Schedule H	20a	No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 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? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	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 owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</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? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a	Yes	
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance						
Check if Schedule O contains a response to any question in this Part V ☒						
		Yes	No			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	1a	206			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes			
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return.	2a	360			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes			
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b	Yes			
4a	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 or securities account)?	4a	Yes			
b	If "Yes," enter the name of the foreign country: <u>IN, CH, CJ, VI</u> See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a				No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b				No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	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?	6a				No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b				
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c				
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h				
8	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				
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?	9a				
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b				
11	Section 501(c)(12) organizations. Enter					
a	Gross income from members or shareholders.	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	13a				
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b				
c	Enter the aggregate amount of reserves on hand.	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a				No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b				

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

Section 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		
1b	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?		No
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?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?	Yes	
7a	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?	Yes	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	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		No

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	Yes	
10b	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?	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
11b	Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
12b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
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?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization	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?		No
16b	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?		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed
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. ☐ Own website ☐ Another's website ☒ Upon request
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. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization. MARY MOHNEY 1800 DUKE STREET ALEXANDRIA, VA 22314 (703) 548-3440

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

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 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 organizations compensated any current or former officer, director, or trustee

[illegible]

Part VII

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	7,591,552	0	1,713,296

2 Total number of individuals (including but not limited to those listed in Item 1) who received or accrued compensation in excess of \$100,000 of reportable compensation from the organization. ▶ 89

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3 Yes	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4 Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
GMMB 1010 WISCONSIN AVENUE NW SUITE 80 WASHINGTON, DC 20007	ADVERTISING/PR/PRINTING	4,739,010
HOLMES CORPORATION 2975 LONE OAK DRIVE SUITE 180 EAGAN, MN 55121	DEVELOPMENT/PROMOTION	4,445,412
INVNT LLC 138 SPRING STREET 4TH FLOOR NEW YORK, NY 10012	CONSULTING FIRM	1,918,943
MARKETING GENERAL INC 625 NORTH WASHINGTON ST 450 ALEXANDRIA, VA 22314	PRINTING COMPANY	1,834,959
QUAD GRAPHICS PO BOX 930505 ATLANTA, GA 31193	PRINTING COMPANY	1,470,488

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 ▶90

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f					
	g	Noncash contributions included in lines 1a-1f \$ _____						
	h	Total. Add lines 1a-1f						
Program Service Revenue			Business Code					
	2a	MEMBERSHIP DUES	900099	39,089,271	39,089,271			
	b	ANNUAL CONFERENCE	900099	23,668,997	18,745,984		4,923,013	
	c	ADVERTISING	541800	12,535,746		12,535,746		
	d	SEMINARS	900099	5,163,875	5,163,875			
	e	OTHER CONFERENCES	900099	3,352,207	3,186,987		165,220	
	f	All other program service revenue		29,943	29,943			
	g	Total. Add lines 2a-2f		83,840,039				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		2,618,132			2,618,132	
	4	Income from investment of tax-exempt bond proceeds . .						
	5	Royalties		1,139,602			1,139,602	
	6a	Gross rents	(i) Real	(ii) Personal				
			1,156,034					
			1,385,895					
			-229,861					
	c	Rental income or (loss)						
	d	Net rental income or (loss)		-229,861		-202,562	-27,299	
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
			121,801,489					
			116,218,049					
			5,583,440					
	c	Gain or (loss)						
	d	Net gain or (loss)		5,583,440			5,583,440	
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a					
	b	Less direct expenses	b					
	c	Net income or (loss) from fundraising events . .						
	9a	Gross income from gaming activities See Part IV, line 19	a					
	b	Less direct expenses	b					
	c	Net income or (loss) from gaming activities . .						
	10a	Gross sales of inventory, less returns and allowances	a	13,570,083				
	b	Less cost of goods sold	b	5,050,490				
c	Net income or (loss) from sales of inventory . .		8,519,593	8,499,192	20,401			
Miscellaneous Revenue		Business Code						
11a	MISCELLANEOUS	900099	2,454,723			2,454,723		
b	MAILING LIST RENTAL	900099	646,154			646,154		
c	EQUITY IN EARNINGS	900099	-2,698,990			-2,698,990		
d	All other revenue							
e	Total. Add lines 11a-11d		401,887					
12	Total revenue. See Instructions		101,872,832	74,715,252	12,353,585	14,803,995		

Part IX

Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	625,871			
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	7,123,641			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	25,473,134			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	5,072,525			
9	Other employee benefits	3,211,957			
10	Payroll taxes	2,115,095			
11	Fees for services (non-employees)				
a	Management				
b	Legal	399,509			
c	Accounting	122,290			
d	Lobbying	319,092			
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	264,423			
g	Other	10,024,294			
12	Advertising and promotion	5,796,295			
13	Office expenses	8,750,596			
14	Information technology	2,565,008			
15	Royalties				
16	Occupancy	1,258,087			
17	Travel	2,438,583			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	11,193,071			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,318,361			
23	Insurance	363,058			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	UBI TAXES	74,669			
b	AGENCY/SALES COMMISS	2,666,084			
c	CHAPTER SUPPORT	1,722,778			
d	MISCELLANEOUS	1,190,774			
e					
f	All other expenses	1,797,945			
25	Total functional expenses. Add lines 1 through 24f	96,887,140			
26	Joint costs. Check here ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			300	1	391
	2	Savings and temporary cash investments			13,621,861	2	10,571,364
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			1,867,171	4	2,566,227
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use			1,043,294	8	1,264,925
	9	Prepaid expenses and deferred charges			2,935,707	9	4,319,617
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	60,854,097			
	b	Less: accumulated depreciation	10b	26,952,022	33,124,950	10c	33,902,075
	11	Investments—publicly traded securities			100,651,040	11	103,657,920
	12	Investments—other securities. See Part IV, line 11			21,916,536	12	14,689,859
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			2,730,142	15	3,881,934
	16	Total assets. Add lines 1 through 15 (must equal line 34)			177,891,001	16	174,854,312
Liabilities	17	Accounts payable and accrued expenses			11,528,387	17	11,733,586
	18	Grants payable				18	
	19	Deferred revenue			26,564,302	19	28,447,557
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			5,254,075	23	4,584,803
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			10,645,488	25	23,177,585
	26	Total liabilities. Add lines 17 through 25			53,992,252	26	67,943,531
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			123,898,749	27	106,910,781
	28	Temporarily restricted net assets				28	
	29	Permanently restricted net assets				29	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			123,898,749	33	106,910,781
	34	Total liabilities and net assets/fund balances			177,891,001	34	174,854,312

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	101,872,832
2	Total expenses (must equal Part IX, column (A), line 25)	2	96,887,140
3	Revenue less expenses Subtract line 2 from line 1	3	4,985,692
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	123,898,749
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-21,973,659
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	106,910,781

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID:

Software Version:

EIN: 34-0948453

Name: SOCIETY FOR HUMAN RESOURCE MANAGEMENT

Form 990, Special Condition Description:

Special Condition Description

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	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOSE A BERRIOS CHAIR	8 00	X		X				35,000	0	0
ROBB E VAN CLEAVE SPHR IMMEDIATE PAST CHAIR	8 00	X		X				37,557	0	0
MELVIN L ASBURY SPHR DIRECTOR	8 00	X						20,000	0	0
JEFFREY M CAVA DIRECTOR	8 00	X						20,000	0	0
JORGE CONSUEGRA DIRECTOR	8 00	X						5,000	0	0
CALVIN W FINCH CPA DIRECTOR	8 00	X						20,000	0	0
BETTE J FRANCIS SPHR DIRECTOR	8 00	X						25,000	0	0
CAROLYN GOULD SPHR GPHR CCP DIRECTOR	8 00	X						0	0	0
JAMES A KAITZ DIRECTOR	8 00	X						25,000	0	0
GARY P LATHAM PHD DIRECTOR	8 00	X						25,000	0	0
MY-CHAU NGUYEN CPA DIRECTOR	8 00	X						10,000	0	0
VIRDA M RHEM SPHR DIRECTOR	8 00	X						20,000	0	0
GABRIELLE TOLEDANO DIRECTOR	8 00	X						5,000	0	0
HENRY G JACKSON CPA PRESIDENT & CEO	37 50	X		X				731,860	0	265,730
SHEILA FINLAYSON SECRETARY & DIRECTOR BOARD RELATIONS	37 50			X				155,567	0	95,896
HENRY A HART SECRETARY & GENERAL COUNSEL	37 50			X				367,782	0	122,351
MARY MOHNEY TREASURER & CFO	37 50			X				313,620	0	56,054
BRIAN DICKSON SVP, PROFESSIONAL DEVELOPMENT	37 50				X			320,038	0	53,796
DEBRA J COHEN SVP, KNOWLEDGE DEVELOPMENT	37 50				X			338,815	0	82,246
GARY K RUBIN SVP, PUBLISHING & E-MEDIA	37 50				X			388,621	0	76,581
JANET PARKER SVP, MEMBER SERVICES	37 50				X			366,341	0	20,287
STEVEN A MIRANDA CHIEF HR OFFICER	37 50				X			506,030	0	74,032
WILLIAM MARONI CHIEF GLOBAL COMM & EXT RELATIONS	37 50				X			277,372	0	62,711
AMY THOMPSON VP PUBLIC AFFAIRS	37 50				X			212,486	0	34,557
DEBORAH A KEARY VP, HUMAN RESOURCES	37 50				X			185,244	0	65,714

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	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ELIZABETH W BLOCK VP, MEETINGS & CONFERENCES	37 50				X			162,285	0	34,958
HEIDI BYERLY VP & CIO	37 50				X			223,361	0	54,529
LISA L CONNELL VP, EDUCATION	37 50				X			159,826	0	37,176
MARGO VICKERS CHIEF OF STAFF	37 50				X			181,717	0	57,185
MARK SCHMIT VP, RESEARCH	37 50				X			192,797	0	41,733
MICHAEL AITKEN VP, GOVERNMENT AFFAIRS	37 50				X			256,547	0	61,817
PAMELA J GREEN VP, US MEMBERSHIP	37 50				X			235,482	0	65,473
SHIRLEY DAVIS VP, DIVERSITY & INCLUSION	37 50				X			217,725	0	48,851
STACEY B HOLVENSTOT VP, MARKETING	37 50				X			277,023	0	34,383
TIM CANNY VP, ADVERTISING SALES	37 50				X			213,602	0	49,423
CHAD HOUGHTON DIR , GLOBAL BUSINESS SOLUTIONS	37 50					X		213,243	0	27,196
SUSAN E BERGMAN DIR , KNOWLEDGE CENTER	37 50					X		189,635	0	99,695
ELIZABETH O BILLE ASSOC GENERAL COUNSEL	37 50					X		183,536	0	15,061
STEVEN WILLIAMS DIR , E-MEDIA, OPS & BUS DEV	37 50					X		181,705	0	21,922
MARY K FERRARI DIR , FIN & OPERATIONAL ANALYSIS	37 50					X		173,918	0	53,939
NANCY L VOLPE SPHR FORMER OFFICER	5 50						X	117,817	0	0

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

2011

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-EZ, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization SOCIETY FOR HUMAN RESOURCE MANAGEMENT	Employer identification number 34-0948453
---	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV	
2	Political expenditures	▶ \$
3	Volunteer hours	

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	☐ Yes ☐ No
4a	Was a correction made?	☐ Yes ☐ No
b	If "Yes," describe in Part IV	

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities	▶ \$
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$
4	Did the filing organization file Form 1120-POL for this year?	☐ Yes ☐ No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

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

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 Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount Enter the amount from the following table in both columns															
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		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		
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														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a If zero or less, enter -0-															
i Subtract line 1f from line 1c If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		☐ Yes ☐ 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) 2008	(b) 2009	(c) 2010	(d) 2011	(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					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(a)		(b)
		Yes	No	Amount
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			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	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			
c	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?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		No
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	Yes	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	39,089,271
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	1,924,887
b	Carryover from last year	2b	-3,318,276
c	Total	2c	-1,393,389
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	3,127,142
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does 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	-4,520,531

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation
------------	------------------	-------------

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, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
SOCIETY FOR HUMAN RESOURCE MANAGEMENT

Employer identification number
34-0948453

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☐ Yes ☐ No	

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)☐ Preservation of an historically importantly land area
☐ Protection of natural habitat☐ Preservation of a certified historic structure
☐ Preservation of open space

2

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ► _____

4

Number of states where property subject to conservation easement is located ► _____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ► _____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year
► \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

► \$ _____

(ii) Assets included in Form 990, Part X

► \$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

► \$ _____

b

Assets included in Form 990, Part X

► \$ _____

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2011

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance				
b	Contributions				
c	Investment earnings or losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations

3a(i)

Yes

No

(ii)

related organizations

3a(ii)

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		5,883,310		5,883,310
b Buildings		33,413,575	9,700,426	23,713,149
c Leasehold improvements				
d Equipment		12,443,894	10,570,275	1,873,619
e Other		9,113,318	6,681,321	2,431,997
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				33,902,075

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1101,872,832
2	Total expenses (Form 990, Part IX, column (A), line 25)	296,887,140
3	Excess or (deficit) for the year Subtract line 2 from line 1	34,985,692
4	Net unrealized gains (losses) on investments	4-10,284,503
5	Donated services and use of facilities	5
6	Investment expenses	6
7	Prior period adjustments	7425,183
8	Other (Describe in Part XIV)	8-12,114,339
9	Total adjustments (net) Add lines 4 - 8	9-21,973,659
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10-16,987,967

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	197,760,291
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments2a	-10,284,503
b	Donated services and use of facilities2b	
c	Recoveries of prior year grants2c	
d	Other (Describe in Part XIV)2d	6,436,385
e	Add lines 2a through 2d2e	-3,848,118
3	Subtract line 2e from line 13	101,608,409
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a	264,423
b	Other (Describe in Part XIV)4b	
c	Add lines 4a and 4b4c	264,423
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)5	101,872,832

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	1103,059,102
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities2a	
b	Prior year adjustments2b	
c	Other losses2c	
d	Other (Describe in Part XIV)2d	6,436,385
e	Add lines 2a through 2d2e	6,436,385
3	Subtract line 2e from line 13	96,622,717
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a	264,423
b	Other (Describe in Part XIV)4b	
c	Add lines 4a and 4b4c	264,423
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)5	96,887,140

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE ORGANIZATION PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS FOR THE YEARS ENDED DECEMBER 31, 2011 AND 2010, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE CONSOLIDATED FINANCIAL STATEMENTS OR WHICH MAY HAVE ANY EFFECT ON THE ORGANIZATION'S TAX-EXEMPT STATUS
PART XI, LINE 8 - OTHER ADJUSTMENTS		UNRECOGNIZED ACTUARIAL LOSS UNDER SFAS NO 158 - 12,114,339
PART XII, LINE 2D - OTHER ADJUSTMENTS		COST OF GOODS SOLD 5,050,490 RENTAL EXPENSES 1,385,895
PART XIII, LINE 2D - OTHER ADJUSTMENTS		COST OF GOODS SOLD 5,050,490 RENTAL EXPENSES 1,385,895

OMB No 1545-0047

Open to Public Inspection

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.**

▶ **Attach to Form 990. ▶ See separate instructions.**

34-0948453

3 Activities per Region (Use Part V if additional space is needed)

Schedule F (Form 990) 2011

1

(i) Method of valuation
(book, FMV, appraisal, other)

3 Enter total number of other organizations or entities

Part III

(a) Type of grant or assistance

(b) Region

(c) Number of recipients

(d) Amount of cash grant

(e) Manner of cash disbursement

(f) Amount of non-cash assistance

**(g) Description
of non-cash
assistance**

(h) Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*

☒ Yes ☐ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*

☐ Yes ☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*

☒ Yes ☐ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*

☐ Yes ☒ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*

☐ Yes ☒ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*

☐ Yes ☒ No

Supplemental Information

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

[illegible]

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization
SOCIETY FOR HUMAN RESOURCE MANAGEMENT

Employer identification number
34-0948453

Part I General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SHRM FOUNDATION 1800 DUKE STREET ALEXANDRIA,VA 22314	34-6610067	501(C)(3)	538,235				GENERAL OPERATING SUPPORT
(2) PEW CHARITABLE TRUST 901 E STREET NW WASHINGTON,DC 200042008	56-2307147	501(C)(3)	50,000				GENERAL OPERATING SUPPORT
(3) JOBS FOR AMERICA'S GRADUATES 1729 KING STREET SUITE 100 ALEXANDRIA,VA 22314	52-1194546	501(C)(3)	10,000				GENERAL OPERATING SUPPORT

2

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

4

3

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

0

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 DUE DILIGENCE IS PERFORMED FOR ALL POTENTIAL GRANT RECIPIENTS GENERAL SUPPORT CONTRIBUTIONS ARE MADE TO WELL ESTABLISHED ORGANIZATIONS KNOWN FOR SUCCESSFUL OPERATIONS AND WORK CONTRIBUTIONS FOR PARTICULAR PROJECTS OR EVENTS SUPPORT PROJECTS/EVENTS CLOSELY ALIGNED WITH SHRM'S MISSION AND OBJECTIVES

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization SOCIETY FOR HUMAN RESOURCE MANAGEMENT	Employer identification number 34-0948453
---	--

Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
	☒ First-class or charter travel ☐ Housing allowance or residence for personal use ☒ Travel for companions ☐ Payments for business use of personal residence ☒ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	Yes
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
	☒ Compensation committee ☒ Written employment contract ☒ Independent compensation consultant ☒ Compensation survey or study ☐ Form 990 of other organizations ☒ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a	Receive a severance payment or change-of-control payment?	4a	Yes
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a	The organization?	5a	
b	Any related organization?	5b	
	If "Yes," to line 5a or 5b, describe in Part III		
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization?	6a	
b	Any related organization?	6b	
	If "Yes," to line 6a or 6b, describe in Part III		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

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)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual.

[illegible]

Part III **Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
	PART I, LINE 1A	IT IS SHRM'S POLICY TO ALLOW FIRST CLASS TRAVEL TO ANY EMPLOYEE OR DIRECTOR FLYING INTERNATIONAL OR FLYING 5 HOURS OR LONGER. SHRM MAY ALSO PROVIDE TAX INDEMNIFICATION PAYMENTS FOR RELOCATION EXPENSES. IN 2011, 3 KEY EMPLOYEES AND 3 DIRECTORS RECEIVED FIRST CLASS TRAVEL BENEFITS. 1 KEY EMPLOYEE AND 1 DIRECTOR RECEIVED TAX INDEMNIFICATION BENEFITS. ALL BOARD OF DIRECTORS AND CEO FLY BUSINESS/FIRST CLASS.
	PART I, LINES 4A-B	SHRM MAINTAINS AN UNQUALIFIED SUPPLEMENTAL EXECUTIVE RETIREMENT PLAN FOR EXECUTIVES WHO MEET CERTAIN CRITERIA. THE PLAN IS UNFUNDED AND MAINTAINS NO ASSETS. AS OF DECEMBER 2011, DEBRA J. COHEN, HENRY A. HART, HENRY G. JACKSON, AND GARY K. RUBIN WERE PARTICIPANTS IN THE PLAN. STEVE A. MIRANDA, CHIEF HR OFFICER, RECEIVED A TOTAL SEVERANCE PAYMENT OF \$139,202 FOR THE YEAR ENDED DECEMBER 31, 2011.

Software ID:

Software Version:

EIN: 34-0948453

Name: SOCIETY FOR HUMAN RESOURCE MANAGEMENT

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
HENRY G JACKSON CPA	(i) (ii)	540,392 0	186,883 0	4,585 0	251,647 0	14,083 0	997,590 0	0 0
SHEILA FINLAYSON	(i) (ii)	136,711 0	18,448 0	408 0	89,423 0	6,473 0	251,463 0	0 0
HENRY A HART	(i) (ii)	274,219 0	90,684 0	2,879 0	115,081 0	7,270 0	490,133 0	0 0
MARY MOHNEY	(i) (ii)	250,923 0	62,117 0	580 0	37,295 0	18,759 0	369,674 0	0 0
BRIAN DICKSON	(i) (ii)	267,837 0	50,640 0	1,561 0	46,432 0	7,364 0	373,834 0	0 0
DEBRA J COHEN	(i) (ii)	245,059 0	81,953 0	11,803 0	74,476 0	7,770 0	421,061 0	0 0
GARY K RUBIN	(i) (ii)	279,856 0	107,762 0	1,003 0	62,436 0	14,145 0	465,202 0	0 0
JANET PARKER	(i) (ii)	238,935 0	60,194 0	67,212 0	7,350 0	12,937 0	386,628 0	0 0
STEVEN A MIRANDA	(i) (ii)	195,245 0	170,821 0	139,964 0	56,083 0	17,949 0	580,062 0	0 0
WILLIAM MARONI	(i) (ii)	170,790 0	105,332 0	1,250 0	61,744 0	967 0	340,083 0	0 0
AMY THOMPSON	(i) (ii)	187,230 0	24,896 0	360 0	21,420 0	13,137 0	247,043 0	0 0
DEBORAH A KEARY	(i) (ii)	162,583 0	20,351 0	2,310 0	58,801 0	6,913 0	250,958 0	0 0
ELIZABETH W BLOCK	(i) (ii)	142,528 0	19,100 0	657 0	28,450 0	6,508 0	197,243 0	0 0
HEIDI BYERLY	(i) (ii)	180,676 0	42,090 0	595 0	40,090 0	14,439 0	277,890 0	0 0
LISA L CONNELL	(i) (ii)	138,137 0	21,410 0	279 0	24,034 0	13,142 0	197,002 0	0 0
MARGO VICKERS	(i) (ii)	155,010 0	25,322 0	1,385 0	42,596 0	14,589 0	238,902 0	0 0
MARK SCHMIT	(i) (ii)	175,392 0	16,553 0	852 0	35,031 0	6,702 0	234,530 0	0 0
MICHAEL AITKEN	(i) (ii)	225,070 0	30,845 0	632 0	42,962 0	18,855 0	318,364 0	0 0

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
PAMELA J GREEN	(i) (ii)	175,827 0	59,065 0	590 0	46,448 0	19,025 0	300,955 0	0 0
SHIRLEY DAVIS	(i) (ii)	189,396 0	27,725 0	604 0	35,011 0	13,840 0	266,576 0	0 0
STACEY B HOLVENSTOT	(i) (ii)	222,883 0	53,681 0	459 0	33,432 0	951 0	311,406 0	0 0
TIM CANNY	(i) (ii)	159,394 0	21,440 0	32,768 0	30,901 0	18,522 0	263,025 0	0 0
CHAD HOUGHTON	(i) (ii)	182,768 0	30,131 0	344 0	20,174 0	7,022 0	240,439 0	0 0
SUSAN E BERGMAN	(i) (ii)	163,169 0	24,158 0	2,308 0	85,602 0	14,093 0	289,330 0	0 0
ELIZABETH O BILLE	(i) (ii)	160,728 0	22,511 0	297 0	14,078 0	983 0	198,597 0	0 0
STEVEN WILLIAMS	(i) (ii)	160,246 0	21,134 0	325 0	20,922 0	1,000 0	203,627 0	0 0
MARY K FERRARI	(i) (ii)	152,032 0	21,151 0	735 0	35,307 0	18,632 0	227,857 0	0 0
NANCY L VOLPE SPHR	(i) (ii)	117,817 0	0 0	0 0	0 0	0 0	117,817 0	0 0

SCHEDULE O

(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.

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization SOCIETY FOR HUMAN RESOURCE MANAGEMENT	Employer identification number 34-0948453
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Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	THE BY LAWS OF SHRM PROVIDE FOR 8 CLASSES OF MEMBERSHIP AS FOLLOWS 1)PROFESSIONAL MEMBERS, 2)GENERAL MEMBERS, 3)ASSOCIATE MEMBERS, 4)LIFE MEMBERS, 5)RETIRED ANNUAL MEMBERS, 6)STUDENT MEMBERS, 7)GLOBAL MEMBERS, 8)SPECIAL EXPERTISE MEMBERS NO CORPORATE MEMBERSHIPS ARE PERMITTED THE REQUIREMENTS AND PRIVILEGES OF THE VARIOUS MEMBERSHIP CLASSES ARE SPECIFIED IN ARTICLE II OF SHRM'S BY LAWS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7A	ELECTIONS OF OFFICERS AND DIRECTORS ARE CONDUCTED BY MAIL BALLOT IN ACCORDANCE WITH PROVISIONS OUTLINED IN ARTICLE VIII OF SHRM'S BYLAWS. EVERY PROFESSIONAL, GENERAL, SPECIAL EXPERTISE, RETIRED LIFE, PROFESSIONAL LIFE AND PAST CHAIR LIFE MEMBER OF SHRM IN GOOD STANDING SHALL BE ENTITLED TO ONE VOTE IN THE ELECTION OF SHRM'S BOARD OF DIRECTORS.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7B	IN ACCORDANCE WITH THE OHIO NONPROFIT CORPORATION ACT, MEMBERS MUST APPROVE CERTAIN CHANGES TO THE ORGANIZATION'S ARTICLES OF INCORPORATION, SUCH AS INSTANCES OF MERGERS OR CONSOLIDATIONS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	SHRM'S FEDERAL FORM 990 IS REVIEWED BY THE ACCOUNTING STAFF OF SHRM, INCLUDING THE CONTROLLER AND CFO. SUCH REVIEW TAKES PLACE UPON RECEIPT OF THE DRAFT FORM 990 FROM THE INDEPENDENT PUBLIC ACCOUNTING FIRM WHO CONDUCTS THE FINANCIAL STATEMENT AUDIT OF SHRM. THE REVIEW INCLUDES THE COMPARISON OF FINANCIAL DATA IN THE FEDERAL FORM 990 WITH THE AUDITED FINANCIAL STATEMENTS AND THE BOOKS AND RECORDS OF SHRM, AND THE NARRATIVE INFORMATION FOR ACCURACY AND COMPLETENESS. ADDITIONALLY, THE BOARD OF DIRECTORS HAS DELEGATED REVIEW OF THE FEDERAL FORM 990 TO THE CHAIR OF THE AUDIT COMMITTEE. AFTER THE REVIEW OF THE FORM 990 BY THE CHAIR OF THE AUDIT COMMITTEE, THE FORM IS SENT TO THE FULL BOARD OF DIRECTORS BEFORE FILING.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	THE SHRM BOARD CONFLICT OF INTEREST POLICY PROVIDES THE FOLLOWING PROCEDURES FOR ADDRESSING POTENTIAL CONFLICTS OF INTEREST THAT MAY REQUIRE BOARD OR COMMITTEE ACTION, SUCH AS 1) THE INTERESTED PERSON MUST DISCLOSE ALL FACTS MATERIAL TO THE CONFLICT OF INTEREST AND SUCH DISCLOSURE MUST BE REFLECTED IN THE MINUTES OF THE MEETING WHERE SUCH MATTER IS BEING REVIEWED, 2) THE INTERESTED PERSON IS PROHIBITED FROM PARTICIPATING IN DISCUSSIONS EXCEPT TO DISCLOSE MATERIAL FACTS AND RESPOND TO QUESTIONS, 3) SUCH PERSON SHALL NOT ATTEMPT TO EXERT HIS OR HER PERSONAL INFLUENCE WITH RESPECT TO THE MATTER EITHER AT OR OUTSIDE OF THE MEETING, 4) SUCH PERSON MAY NOT BE PRESENT TO HEAR THE BOARD OR COMMITTEE DISCUSSIONS ON THE MATTER, 5) SUCH INTERESTED PERSON IS PRECLUDED FROM VOTING ON THE MATTER AND SUCH PERSON'S PRESENCE MAY NOT BE COUNTED IN DETERMINING THE PRESENCE OF A QUORUM FOR PURPOSES OF THE VOTE AT THE MEETING, 6) SUCH PERSON MAY NOT BE PRESENT DURING THE VOTE UNLESS THE VOTE IS BY SECRET BALLOT, AND 7) SUCH PERSON'S INELIGIBILITY TO VOTE SHOULD BE REFLECTED IN THE MINUTES. ADDITIONALLY, THE SHRM EMPLOYEE CODE OF CONDUCT APPLIES TO ALL SHRM EMPLOYEES, AND ALL SHRM EMPLOYEES RECEIVE A COPY OF THE CODE OF CONDUCT AND RETURN AN ACKNOWLEDGEMENT TO THE SHRM HR DEPARTMENT THAT THEY UNDERSTAND AND WILL COMPLY WITH THE CODE OF CONDUCT. SECTION IV(K) OF THE CODE OF CONDUCT SETS FORTH THE CONFLICT OF INTEREST RULES APPLICABLE TO ALL EMPLOYEES. IT IS SHRM'S INTENT TO AVOID IMPROPRIETY IN ALL OF ITS DECISIONS AND ACTIONS. THE CODE OF CONDUCT REQUIRES EMPLOYEES TO AVOID TRANSACTIONS, ACTIVITIES AND RELATIONSHIPS WHICH PLACE THEIR PERSONAL INTERESTS IN CONFLICT WITH SHRM'S, NOT TO USE SHRM ASSETS OR THEIR POSITION AT SHRM FOR PERSONAL USE OR GAIN, NOT TO ACCEPT GIFTS FROM VENDORS UNLESS WITHIN SPECIFIED GIFT GUIDELINES. EMPLOYEES ARE INFORMED THAT ACTUAL OR POTENTIAL CONFLICTS OF INTEREST MAY GO BEYOND DEALINGS WITH MEMBERS, CUSTOMERS, VENDORS OR SUPPLIERS. CONFLICTS MAY ALSO INVOLVE DEALINGS WITH MANAGERS, SUBORDINATES OR OTHER STAFF MEMBERS. IF A CONFLICT OR POTENTIAL CONFLICT ARISES, EMPLOYEES UNDER THE POLICY MAY CONSULT WITH THEIR SUPERVISOR, THEIR DIVISION CHIEF OR HUMAN RESOURCES. AT MINIMUM, IF AN EMPLOYEE OR HIS/HER IMMEDIATE FAMILY MEMBER HAVE AN INTEREST IN A VENDOR THE EMPLOYEE IS REQUIRED TO DISCLOSE SUCH CONFLICT OF INTEREST TO THEIR DIVISION CHIEF (OR CEO IF THEY ARE A DIVISION CHIEF) AND THE EMPLOYEE MUST NOT BE INVOLVED IN THE SELECTION, MANAGEMENT OR OVERSIGHT OF SUCH VENDOR. IN ADDITION, ALL CONTRACTS OF OVER \$5,000 ARE REQUIRED TO BE REVIEWED BY THE GENERAL COUNSEL'S OFFICE AND TO BE PRESENTED TO GENERAL COUNSEL UNDER A COMPLETED SHRM CONTRACT ROUTING FORM. THAT SHRM CONTRACT ROUTING FORM REQUIRES THE INDIVIDUAL WHO INITIATES THE CONTRACT TO "COMMENT ON PERSONAL RELATIONSHIPS OR FRIENDSHIPS WITH VENDORS."

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	CEO COMPENSATION IS SET BY THE BOARD OF DIRECTORS' COMPENSATION AND ORGANIZATION COMMITTEE. COMPENSATION OF THE 10% HIGHEST PAID EMPLOYEES AT SHRM IS RECOMMENDED BY AN INDEPENDENT COMPENSATION CONSULTANT, THROUGH REVIEW OF RELEVANT COMPARABILITY DATA. THE RECOMMENDATION IS DISCUSSED AND SUBSTANTIATED BY THE CEO AND CHRO. COMPENSATION AMOUNTS ARE DIRECTLY LINKED TO THE INDIVIDUAL'S PERFORMANCE RATING. THE SHRM BOARD OF DIRECTORS APPROVES A REASONABLE LEVEL OF HONORARIA FOR ALL BOARD MEMBERS, INCLUDING THE BOARD CHAIR AND IMMEDIATE PAST CHAIR, WHO ARE OFFICERS OF THE CORPORATION. THE SHRM GOVERNANCE COMMITTEE OF THE BOARD OF DIRECTORS RECOMMENDS THE HONORARIA FOR ALL BOARD MEMBERS, AND THE FULL BOARD THEN APPROVES THE HONORARIA LEVEL. IN RECOMMENDING AND APPROVING THE HONORARIA AND ITS LEVEL, THE GOVERNANCE COMMITTEE AND BOARD OF DIRECTORS RESPECTIVELY HAVE BEFORE THEM AT THE TIME OF RECOMMENDATION/APPROVAL AND RELY UPON SURVEYS AND AN OPINION OF AN OUTSIDE NATIONALLY RECOGNIZED COMPENSATION EXPERT SUPPORTING THE REASONABLENESS OF THE HONORARIA. THE OHIO NON-PROFIT CORPORATION ACT UNDER WHICH SHRM IS INCORPORATED AT OHIO CODE SECTION 1702.301 EXPRESSLY ALLOWS DIRECTORS TO VOTE TO ESTABLISH REASONABLE COMPENSATION FOR THEMSELVES, "IRRESPECTIVE OF ANY FINANCIAL OR PERSONAL INTEREST OF ANY OF THE DIRECTORS."

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	SHRM'S ANNUAL FINANCIAL STATEMENTS ARE PUBLISHED IN ITS ANNUAL REPORT WHICH IS AVAILABLE TO THE PUBLIC ON SHRM'S WEBSITE. SHRM'S BYLAWS ARE ALSO AVAILABLE TO THE PUBLIC ON SHRM'S WEBSITE. SHRM'S ARTICLES OF INCORPORATION ARE AVAILABLE ON THE OHIO SECRETARY OF STATE CORPORATE DIVISION WEBSITE. SHRM WILL CONSIDER MAKING ITS CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC UPON REQUEST.

Identifier	Return Reference	Explanation
	990 PART VII, COLUMN F & SCH J, PART II, COLUMN C	THE METHOD USED TO CALCULATE THE VALUE OF ANNUAL PENSION BENEFITS HAS BEEN CHANGED TO A PRESENT VALUE ACTUARIAL CALCULATION

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -10,284,503 PRIOR PERIOD ADJUSTMENTS 425,183 UNRECOGNIZED ACTUARIAL LOSS UNDER SFAS NO 158 -12,114,339 TOTAL TO FORM 990, PART XI, LINE 5 -21,973,659

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
SOCIETY FOR HUMAN RESOURCE MANAGEMENT

Employer identification number
34-0948453

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(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	(g) Section 512(b)(13) controlled organization	
						Yes	No
(1) SHRM FOUNDATION 1800 DUKE STREET ALEXANDRIA, VA 223143499 34-6610067	RESEARCH/SUPPORT HR STANDARDS	VA	501(C)(3)	LINE 7	SOCIETY FOR HUMAN RESOURCE MANAGEMENT	Yes	

Part III

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) SHRM CORPORATION 1800 DUKE STREET ALEXANDRIA, VA 223143499 76-0839798	ON-LINE JOBS ADVERTISING PROGRAM	VA	N/A	C	3,581,745	604,465	100 000 %
(2) STRATEGIC HUMAN RESOURCE MGMT INDIA 702 VIBGYOR TOWERS PLOT NO C-62 7 MUMBAI IN 80-2212005	HR RESEARCH AND EDUCATIONAL PROGRAMS IN INDIA	IN	N/A	C	893,423	2,589,530	100 000 %

Part V

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

Note. Complete line 1 if any entity is listed in Parts II, III or IV

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 (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to related organization(s)

c

Gift, grant, or capital contribution from related organization(s)

d

Loans or loan guarantees to or for related organization(s)

e

Loans or loan guarantees by related organization(s)

f

Sale of assets to related organization(s)

g

Purchase of assets from related organization(s)

h

Exchange of assets with related organization(s)

i

Lease of facilities, equipment, or other assets to related organization(s)

j

Lease of facilities, equipment, or other assets from related organization(s)

k

Performance of services or membership or fundraising solicitations for related organization(s)

l

Performance of services or membership or fundraising solicitations by related organization(s)

m

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

n

Sharing of paid employees with related organization(s)

o

Reimbursement paid to related organization(s) for expenses

p

Reimbursement paid by related organization(s) for expenses

q

Other transfer of cash or property to related organization(s)

r

Other transfer of cash or property from related organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

Yes

No

No

No

No

No

No

No

No

No

Yes

Yes

Yes

Yes

No

Yes

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) See Additional Data Table			
(2)			
(3)			
(4)			
(5)			
(6)			

Schedule R (Form 990) 2011

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.

[illegible]

Part VII

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation	
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Software ID:

Software Version:

EIN: 34-0948453

Name: SOCIETY FOR HUMAN RESOURCE MANAGEMENT

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount Involved (\$)	(d) Method of determining amount involved
(1) SHRM CORPORATION	M	169,108	CASH
(2) SHRM CORPORATION	N	246,442	CASH
(3) SHRM CORPORATION	O	341,549	CASH
(4) SHRM CORPORATION	P	911,173	CASH
(5) SHRM CORPORATION	R	1,180,000	CASH
(6) STRATEGIC HUMAN RESOURCE MGM'T INDIA	B	5,000,000	CASH
(7) SHRM FOUNDATION	B	538,235	CASH
(8) SHRM FOUNDATION	N	284,266	CASH
(9) SHRM FOUNDATION	P	79,446	CASH
(10) SHRM FOUNDATION	O	44,986	CASH
(11) SHRM FOUNDATION	M	64,440	FMV
(12) STRATEGIC HUMAN RESOURCE MGM'T INDIA	L	52,635	CASH

TY 2011 Itemized Other Assets Schedule**Name:** SOCIETY FOR HUMAN RESOURCE MANAGEMENT**EIN:** 34-0948453

Corporation Name	Corporation EIN	Other Assets Description	Beginning Amount	Ending Amount
STRATEGIC HUMAN RESOURCE MANAGEMENT INDI		DEPOSITS	288,559	220,216
		OTHER ASSETS	99,522	68,113

**TY 2011 Itemized Other Current Assets
Schedule****Name:** SOCIETY FOR HUMAN RESOURCE MANAGEMENT**EIN:** 34-0948453

Corporation Name	Corporation EIN	Other Current Assets Description	Beginning Amount	Ending Amount
STRATEGIC HUMAN RESOURCE MANAGEMENT INDI		PREPAID EXPENSES	3,888	3,566

TY 2011 Other Deductions Schedule**Name:** SOCIETY FOR HUMAN RESOURCE MANAGEMENT**EIN:** 34-0948453

Description	Foreign Amount (should only be used when attached to 5471 Schedule C Line 16)	Amount
PROFESSIONAL FEES		1,285,427
INSURANCE		6,248
OFFICE EXPENSES		228,075
ART & PHOTOGRAPHY		51,951
TRAVEL		392,962
DUES & SUBSCRIPTIONS		2,586
UTILITIES		10,705
FOOD & BEVERAGE		209,290
MAINTAINENCE		70,239
FEES		4,875
ADVERTISING		594,551
MISCELLANEOUS		42,139
STAFF DEVELOPMENT		7,186
DONATED SERVICES		222,702

TY 2011 Itemized Other Liabilities Schedule**Name:** SOCIETY FOR HUMAN RESOURCE MANAGEMENT**EIN:** 34-0948453**TY 2011 Itemized Other Liabilities Schedule**

Corporation Name	Corporation EIN	Other Liabilities Description	Beginning Amount	Ending Amount
STRATEGIC HUMAN RESOURCE MANAGEMENT INDI		DUE TO SHRM	1,174,611	1,460,065
		DUE TO HRCI	412	0

TY 2011 Other Income Statement

Name: SOCIETY FOR HUMAN RESOURCE MANAGEMENT

EIN: 34-0948453

Description	Foreign Amount	Amount
SEMINARS AND EDUCATIONAL PROGRAMS		474,257
OTHER		418,975