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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

and ending

B Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization

HR POLICY ASSOCIATION

Doing Business As

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

1100 13TH STREET, NW

Room/suite
850

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

WASHINGTON, DC 20005

F Name and address of principal officer: JEFFREY C. MCGUINNESS

1100 13TH ST NW # 850, WASHINGTON, DC 20005

D Employer identification number

52-0747972

E Telephone number

202-789-8670

G Gross receipts \$ 7,557,799.**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: ▶ HRPOLICY.ORG**K** Form of organization: ☐ Corporation ☐ Trust ☒ Association ☐ Other ▶**L** Year of formation 1985**M** State of legal domicile: DC**Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>RESEARCH AND DEVELOPMENT OF HUMAN RESOURCES POLICY.</u>		
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	43
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	39
	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	0
	6	Total number of volunteers (estimate if necessary)	6	0
	Revenue	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a
b		Net unrelated business taxable income from Form 990-T, line 34	7b	0.
8		Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9		Program service revenue (Part VIII, line 2g)	347,000.	347,000.
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,444,078.	7,168,384.
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	15,147.	42,415.
12		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0.	0.
13		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	6,806,225.	7,557,799.
14		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
Expenses		15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25)	0.	0.
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	5,955,431.	6,736,727.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	0.	0.
	19	Revenue less expenses. Subtract line 18 from line 12	5,955,431.	6,736,727.
	20	Total assets (Part X, line 16)	850,794.	821,072.
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)	Beginning of Current Year	End of Year
	22	Net assets or fund balances. Subtract line 21 from line 20	3,626,221.	4,447,293.
			0.	0.
		3,626,221.	4,447,293.	

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 JEFFREY C. MCGUINNESS, CEO Date 10/2/2012
 ▶ Type or print name and title

Paid Preparer Use Only
 Print/Type preparer's name CHARLES R LEINS Preparer's signature [Signature] Date 10-2-12 Check ☐ if self-employed PTIN P00023132
 Firm's name ▶ GOLD, LEINS & ADOFF, LLP Firm's EIN ▶ 52-1636736
 Firm's address ▶ 51 MONROE PLACE, SUITE 1900
ROCKVILLE, MD 20850 Phone no 301-340-6300

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

☒ Yes ☐ No

SCANNED OCT 23 2012

19 610

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ANNE HILL DIRECTOR	1.00	X						0.	0.	0.
(19) ANGELA S. LALOR DIRECTOR	1.00	X						0.	0.	0.
(20) JOHN F. LYNCH DIRECTOR	1.00	X						0.	0.	0.
(21) J. RANDALL MACDONALD DIRECTOR	1.00	X						0.	0.	0.
(22) PAUL D. MCKINNON DIRECTOR	1.00	X						0.	0.	0.
(23) BRIAN M. MCNAMEE DIRECTOR	1.00	X						0.	0.	0.
(24) JACK T. MOLLEN DIRECTOR	1.00	X						0.	0.	0.
(25) JOHN M. MURABITO DIRECTOR	1.00	X						0.	0.	0.
(26) MOHEET NAGRATH DIRECTOR	1.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								0.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

- 3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 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? If "Yes," complete Schedule J for such individual
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4		X
5		X

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
THE FAIRMONT TURNBERRY ISLE, 19999 WEST COUNTRY CLUB DRIVE, AVENTURA, FL 33180	MEETING FACILITIES	203,884.
APPLIED ECONOMIC STRATEGIES, LLC, 1100 13TH STREET, NW, #850, WASHINGTON, DC	CONSULTING	161,300.
FALL CONSULTING, 10025 RHONE RIVER DRIVE, ELK GROVE, CA 95624	CONSULTING	132,337.
AMANDA H. BECK 2355 DUNBAR LANE, FALLS CHURCH, VA 22046	CONSULTING	102,079.

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 **4**

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2011)

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

(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			
(27) WALTER M. OLIVER DIRECTOR	1.00	X						0.	0.	0.
(28) MARC C. REED DIRECTOR	1.00	X						0.	0.	0.
(29) DAVID A. RODRIGUEZ DIRECTOR	1.00	X						0.	0.	0.
(30) EVA SAGE-GAVIN DIRECTOR	1.00	X						0.	0.	0.
(31) LAURIE A. SIEGEL DIRECTOR	1.00	X						0.	0.	0.
(32) JILL B. SMART DIRECTOR	1.00	X						0.	0.	0.
(33) LARRY E. STEWARD DIRECTOR	1.00	X						0.	0.	0.
(34) SUSAN M. SUVER DIRECTOR	1.00	X						0.	0.	0.
(35) MARA E. SWAN DIRECTOR	1.00	X						0.	0.	0.
(36) SHARON C. TAYLOR DIRECTOR	1.00	X						0.	0.	0.
(37) JOHNNA G. TORSONE DIRECTOR	1.00	X						0.	0.	0.
(38) ELEASE E. WRIGHT DIRECTOR	1.00	X						0.	0.	0.
(39) DENNIS ZELENY DIRECTOR	1.00	X						0.	0.	0.
(40) JEFFREY C. MCGUINNESS CEO & TREASURER	15.00			X				0.	0.	0.
(41) DANIEL V. YAGER PRESIDENT & GENERAL COUNSEL	5.00			X				0.	0.	0.
(42) TIMOTHY J. BARTL SECRETARY	5.00			X				0.	0.	0.
(43) SUSAN F. DAVIS VICE CHAIR	5.00			X				0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ANNE HILL DIRECTOR	1.00	X						0.	0.	0.
(19) ANGELA S. LALOR DIRECTOR	1.00	X						0.	0.	0.
(20) JOHN F. LYNCH DIRECTOR	1.00	X						0.	0.	0.
(21) J. RANDALL MACDONALD DIRECTOR	1.00	X						0.	0.	0.
(22) PAUL D. MCKINNON DIRECTOR	1.00	X						0.	0.	0.
(23) BRIAN M. MCNAMEE DIRECTOR	1.00	X						0.	0.	0.
(24) JACK T. MOLLEN DIRECTOR	1.00	X						0.	0.	0.
(25) JOHN M. MURABITO DIRECTOR	1.00	X						0.	0.	0.
(26) MOHEET NAGRATH DIRECTOR	1.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								0.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

- 3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 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? If "Yes," complete Schedule J for such individual
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4		X
5		X

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
THE FAIRMONT TURNBERRY ISLE, 19999 WEST COUNTRY CLUB DRIVE, AVENTURA, FL 33180	MEETING FACILITIES	203,884.
APPLIED ECONOMIC STRATEGIES, LLC, 1100 13TH STREET, NW, #850, WASHINGTON, DC	CONSULTING	161,300.
FALL CONSULTING, 10025 RHONE RIVER DRIVE, ELK GROVE, CA 95624	CONSULTING	132,337.
AMANDA H. BECK 2355 DUNBAR LANE, FALLS CHURCH, VA 22046	CONSULTING	102,079.

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 **4**

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2011)

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

(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			
(27) WALTER M. OLIVER DIRECTOR	1.00	X						0.	0.	0.
(28) MARC C. REED DIRECTOR	1.00	X						0.	0.	0.
(29) DAVID A. RODRIGUEZ DIRECTOR	1.00	X						0.	0.	0.
(30) EVA SAGE-GAVIN DIRECTOR	1.00	X						0.	0.	0.
(31) LAURIE A. SIEGEL DIRECTOR	1.00	X						0.	0.	0.
(32) JILL B. SMART DIRECTOR	1.00	X						0.	0.	0.
(33) LARRY E. STEWARD DIRECTOR	1.00	X						0.	0.	0.
(34) SUSAN M. SUVER DIRECTOR	1.00	X						0.	0.	0.
(35) MARA E. SWAN DIRECTOR	1.00	X						0.	0.	0.
(36) SHARON C. TAYLOR DIRECTOR	1.00	X						0.	0.	0.
(37) JOHNNA G. TORSONE DIRECTOR	1.00	X						0.	0.	0.
(38) ELEASE E. WRIGHT DIRECTOR	1.00	X						0.	0.	0.
(39) DENNIS ZELENY DIRECTOR	1.00	X						0.	0.	0.
(40) JEFFREY C. MCGUINNESS CEO & TREASURER	15.00			X				0.	0.	0.
(41) DANIEL V. YAGER PRESIDENT & GENERAL COUNSEL	5.00			X				0.	0.	0.
(42) TIMOTHY J. BARTL SECRETARY	5.00			X				0.	0.	0.
(43) SUSAN P. DAVIS VICE CHAIR	5.00			X				0.	0.	0.
Total to Part VII, Section A, line 1c										

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	1 a 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	347,000.				
	g Noncash contributions included in lines 1a-1f \$						
h Total. Add lines 1a-1f			347,000.				
Program Service Revenue	2 a MEMBERSHIP DUES	Business Code	900099	3727875.	3727875.		
	b MEETING & SEMINAR FEE		900099	2647776.	2647776.		
	c TRAINING		900099	792,104.	792,104.		
	d PUBLICATIONS		900099	629.			629.
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			7168384.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			42,415.			42,415.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)						
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18						
	b Less: direct expenses						
	c Net income or (loss) from fundraising events						
	9 a Gross income from gaming activities. See Part IV, line 19						
	b Less: direct expenses						
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances							
b Less: cost of goods sold							
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
11 a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See instructions				7557799.	7167755.	0.	43,044.

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 ☒ X

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the 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				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management	865,000.			
b Legal	710,010.			
c Accounting	52,929.			
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	75,000.			
12 Advertising and promotion	325.			
13 Office expenses	93,906.			
14 Information technology	128,705.			
15 Royalties				
16 Occupancy	513,989.			
17 Travel	49,087.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,327,452.			
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	2,823.			
23 Insurance	4,328.			
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a CENTER ON EXECUTIVE COM	1,197,823.			
b HEALTH CARE INITIATIVES	301,088.			
c COMPUTER TIME/SOFTWARE	225,169.			
d PUBLIC AFFAIRS AND RELA	167,635.			
e All other expenses SEE SCH O	1,021,458.			
25 Total functional expenses. Add lines 1 through 24e	6,736,727.			
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Check here ☐ if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	3,431,813.	2	1,263,576.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	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)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net	190,000.	7	15,140.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 175,784.		
	b Less: accumulated depreciation	10b 171,806.	4,408.	10c 3,978.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	3,164,599.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	3,626,221.	16	4,447,293.	
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	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		25	
	26 Total liabilities. Add lines 17 through 25	0.	26	0.
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		27	
	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	3,626,221.	30	4,447,293.
	31 Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
	32 Retained earnings, endowment, accumulated income, or other funds	0.	32	0.
	33 Total net assets or fund balances	3,626,221.	33	4,447,293.
34 Total liabilities and net assets/fund balances	3,626,221.	34	4,447,293.	

Form 990 (2011)

Part XI Reconciliation of Net AssetsCheck 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	7,557,799.
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,736,727.
3	Revenue less expenses Subtract line 2 from line 1	3	821,072.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,626,221.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	0.
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	4,447,293.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☐

- 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?
- b Were the organization's financial statements audited by an independent accountant?
- c If "Yes" to line 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.
- 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 separate 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?
- 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.

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2011)

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011**Open to Public
Inspection**

Name of the organization

HR POLICY ASSOCIATION

Employer identification number

52-0747972

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 can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		☐ 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 education)	☐ Preservation of an historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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 section 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 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____

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 (ASC 958) relating to these items.

a Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

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

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

- 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:

- c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

	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 Net investment earnings, gains, and 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 current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ► _____ %
 b Permanent endowment ► _____ %
 c Temporarily restricted endowment ► _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
 (ii) related organizations

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

	Yes	No
3a(i)		
3a(ii)		
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				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		175,784.	171,806.	3,978.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c))				3,978.

Schedule D (Form 990) 2011

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) GOVERNMENT SECURITIES	2,742,063.	END-OF-YEAR MARKET VALUE
(B) CORPORATE BONDS	422,536.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶	3,164,599.	

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	

FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	7,557,799.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	6,736,727.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	821,072.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	<375,246.>
9	Total adjustments (net). Add lines 4 through 8	9	<375,246.>
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	445,826.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	7,311,711.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	7,311,711.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	246,088.
c	Add lines 4a and 4b	4c	246,088.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	7,557,799.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	6,865,885.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	129,158.
e	Add lines 2a through 2d	2e	129,158.
3	Subtract line 2e from line 1	3	6,736,727.
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 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	6,736,727.

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, line 2; 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.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

ACCRUAL BASIS UNEARNED REVENUES ADJUSTMENT	-246,088.
CURRENT YEAR PREPAID EXPENSES	-129,158.
TOTAL TO SCHEDULE D, PART XI, LINE 8	-375,246.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

ACCRUAL BASIS UNEARNED REVENUES ADJUSTMENT	246,088.
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Part XIV Supplemental Information *(continued)*

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

CURRENT YEAR PREPAID EXPENSES	129,158.
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Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

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

OMB No 1545-0047

2011

Open To Public Inspection

Name of the organization

HR POLICY ASSOCIATION

Employer identification number
52-0747972

Part I	Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).
---------------	--

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

[illegible]

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958

▶ \$ _____

▶ \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

Part II	Loans to and/or From Interested Persons.
----------------	---

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

[illegible]

Total	\$
--------------	-----------

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

[illegible]

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
JEFFREY C. MCGUINESS	OFFICER	60,000.	JEFFREY C.		X
DANIEL V. YAGER	OFFICER	20,000.	DANIEL V. Y		X
TIMOTHY J. BARTL	OFFICER	20,000.	TIMOTHY J.		X
JEFFREY C. MCGUINESS	OFFICER	190,000.	THE ORGANIZ		X
DANIEL V. YAGER	OFFICER	190,000.	THE ORGANIZ		X

Part V Supplemental Information

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

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: JEFFREY C. MCGUINESS

(D) DESCRIPTION OF TRANSACTION: JEFFREY C. MCGUINESS WHO IS AN OFFICER OF THE ORGANIZATION IS ALSO A PARTNER IN THE LAW FIRM OF MCGUINESS & YAGER, LLP. DANIEL V. YAGER AND TIMOTHY J. BARTL ARE ALSO PARTNERS IN THE SAME LAW FIRM AND ARE OFFICERS OF THE ORGANIZATION.

(A) NAME OF PERSON: DANIEL V. YAGER

(D) DESCRIPTION OF TRANSACTION: DANIEL V. YAGER WHO IS AN OFFICER OF THE ORGANIZATION IS ALSO A PARTNER IN THE LAW FIRM OF MCGUINESS & YAGER, LLP. JEFFREY C. MCGUINESS AND TIMOTHY J. BARTL ARE ALSO PARTNERS IN THE SAME LAW FIRM AND ARE OFFICERS OF THE ORGANIZATION.

(A) NAME OF PERSON: TIMOTHY J. BARTL

(D) DESCRIPTION OF TRANSACTION: TIMOTHY J. BARTL WHO IS AN OFFICER OF THE ORGANIZATION IS ALSO A PARTNER IN THE LAW FIRM OF MCGUINESS & YAGER, LLP. JEFFREY C. MCGUINESS AND DANIEL V. YAGER ARE ALSO PARTNERS IN THE SAME LAW FIRM AND OFFICERS OF THE ORGANIZATION.

(A) NAME OF PERSON: JEFFREY C. MCGUINESS

Part V Supplemental Information

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

(D) DESCRIPTION OF TRANSACTION: THE ORGANIZATION MADE A SHORT TERM LOAN TO HEALTH CARE POLICY ROUNDTABLE IN THE AMOUNT OF \$190,000 AT AN INTEREST RATE OF 3.75 PERCENT PER ANNUM. JEFFREY MCGUINESS IS A MEMBER OF HEALTH CARE POLICY ROUNDTABLE AS WELL AS AN OFFICER OF HR POLICY ASSOCIATION.

(A) NAME OF PERSON: DANIEL V. YAGER

(D) DESCRIPTION OF TRANSACTION: THE ORGANIZATION MADE A SHORT TERM LOAN TO HEALTH CARE POLICY ROUNDTABLE IN THE AMOUNT OF \$190,000 AT AN INTEREST RATE OF 3.75 PERCENT PER ANNUM. DANIEL V. YAGER IS A MEMBER OF HEALTH CARE POLICY ROUNDTABLE AS WELL AS AN OFFICER OF HR POLICY ASSOCIATION.

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 990-EZ 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

HR POLICY ASSOCIATION

Employer identification number

52-0747972

FORM 990, PART VI, SECTION A, LINE 2: THREE OF THE OFFICERS IN THE ORGANIZATION JEFFREY C. MCGUINESS, DANIEL V. YAGER AND TIMOTHY J. BARTL ARE ALSO PARTNERS IN THE LAW FIRM OF MCGUINESS & YAGER, LLP.

FORM 990, PART VI, SECTION A, LINE 7A: THE ORGANIZATION'S BY-LAWS PERMIT THE MEMBERS TO ELECT PERSONS TO THE GOVERNING BODY.

FORM 990, PART VI, SECTION B, LINE 11: A COPY OF THE FORM 990 WILL BE PROVIDED TO EACH MEMBER OF THE EXECUTIVE COMMITTEE FOR REVIEW AND COMMENTS BY EITHER REGULAR MAIL OR BY E-MAIL PRIOR TO FILING OF THE RETURN IF SUCH REVIEW CAN BE COMPLETED BEFORE THE FILING DEADLINE. SHOULD THE FILING DEADLINE PROHIBIT A REVIEW PRIOR TO FILING, SUCH REVIEW WILL BE COMPLETED AS SOON THEREAFTER AS POSSIBLE.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, SUCH AS FORM 990, BY-LAWS, ARTICLES OF INCORPORATION AND FORM 1023, AVAILABLE TO THE PUBLIC UPON REQUEST. THE FINANCIAL STATEMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC.

FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENSES:

ECONOMIC CONSULTING:

TOTAL EXPENSES 165,300.

WORKFORCE DEVELOPMENT:

TOTAL EXPENSES 155,497.

Name of the organization

HR POLICY ASSOCIATION

Employer identification number
52-0747972**LABOR RELATIONS TRAINING INITIATIVES:****TOTAL EXPENSES** 107,768.**MEMBERSHIP DEVELOPMENT:****TOTAL EXPENSES** 95,000.**MEDIA ANALYSIS RESEARCH:****TOTAL EXPENSES** 66,500.**PUBLICATIONS/SUBSCRIPTIONS/DUES:****TOTAL EXPENSES** 62,801.**MEDIA MONITORING:****TOTAL EXPENSES** 54,000.**STATIONARY/COPYING/PRINTING:****TOTAL EXPENSES** 53,624.**POSTAGE AND EXPRESS MAIL:****TOTAL EXPENSES** 44,746.**AMICUS BRIEF ACTIVITY:****TOTAL EXPENSES** 40,000.**TELECOMMUNICATIONS:****TOTAL EXPENSES** 36,300.**LEGISLATIVE MONITORING ACTIVITY:**

Name of the organization

HR POLICY ASSOCIATION

Employer identification number

52-0747972

TOTAL EXPENSES 36,000.

ASIAN GLOBAL LABOR RELATIONS:

TOTAL EXPENSES 36,000.

EBRI CONTRIBUTION:

TOTAL EXPENSES 24,500.

RESEARCH SERVICE:

TOTAL EXPENSES 21,269.

SUBSCRIBER DEVELOPMENT:

TOTAL EXPENSES 15,000.

REPAIRS AND MAINTENANCE:

TOTAL EXPENSES 6,763.

TAXES AND LICENSES:

TOTAL EXPENSES 390.

TOTAL OTHER EXPENSES ON FORM 990, PART IX, LINE 24E, COL A 1,021,458.

2011 DEPRECIATION AND AMORTIZATION REPORT

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Asset No	Description	Date Acquired	Method	Life	C o n v	Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	CDW DIRECT SOFTWARE FOR APTIFY SERVER	09/30/05	SL	3.00		16	26.				26.	26.		0.	26.
2	CDW DIRECT USER LICENSES	09/30/05	SL	3.00		16	1,084.				1,084.	1,084.		0.	1,084.
3	CDW DIRECT SQL 2000 STD SERVER LICENSE	09/30/05	SL	3.00		16	992.				992.	992.		0.	992.
4	DELL 3.8 GHZ XEON SERVER	10/28/05	SL	5.00		16	3,390.				3,390.	2,848.		0.	2,848.
5	DELL LATITUDE D410 LAPTOP	11/28/05	SL	5.00		16	2,352.				2,352.	1,927.		0.	1,927.
6	CDW DIRECT BACK UP LICENSE	12/14/05	SL	3.00		16	204.				204.	204.		0.	204.
7	CDW DIRECT SOFTWARE UPGRADE	12/14/05	SL	3.00		16	774.				774.	774.		0.	774.
8	CDW DIRECT PHILIPS 21" FLAT MONITOR	12/14/05	SL	5.00		16	452.				452.	452.		0.	452.
9	DELL LATITUDE D610 LAPTOP	12/30/05	SL	5.00		16	2,203.				2,203.	2,203.		0.	2,203.
10	DELL LATITUDE D610 LAPTOP	12/30/05	SL	5.00		16	1,861.				1,861.	1,860.		0.	1,860.
11	VERIZON TRE0650 MOBILE PHONE	12/30/05	SL	5.00		16	508.				508.	508.		0.	508.
12	CDW SOFTWARE	03/16/06	SL	3.00		16	490.				490.	490.		0.	490.
13	CGI APTIFY MEMBERSHIP SOFTWARE	08/31/06	SL	3.00		16	144,562.				144,562.	144,562.		0.	144,562.
14	2 LAPTOPS	10/10/07	SL	5.00		16	1,027.				1,027.	803.		205.	1,008.
15	2 COMPUTERS	10/19/07	SL	5.00		16	2,043.				2,043.	1,567.		409.	1,976.
16	LAPTOP	01/29/08	SL	3.00		16	1,226.				1,226.	1,226.		0.	1,226.
17	LAPTOP	04/28/08	SL	3.00		16	1,222.				1,222.	1,154.		68.	1,222.
18	2 LAPTOPS	06/28/08	SL	3.00		16	2,225.				2,225.	1,855.		370.	2,225.

128111
05-01-11

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2011 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

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Asset No	Description	Date Acquired	Method	Life	C o n v	Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
19	LAPTOP	07/28/08	SL	3.00		16	1,163.				1,163.	938.		225.	- 1,163.
20	LAPTOP	05/28/08	SL	3.00		16	1,007.				1,007.	868.		139.	1,007.
21	ADJUSTMENT	07/01/09		.000		HXL6						1,726.		0.	1,726.
22	EQUIPMENT	07/01/10	200DB	5.00		HXL7	4,580.				4,580.	916.		1,407.	2,323.
23	COMPUTER HARDWARE	07/01/11	200DB	5.00		HXL9B	2,393.				2,393.			0.	
	* TOTAL 990 PAGE 10 DEPR						175,784.				175,784.	168,983.		2,823.	171,806.

128111
05-01-11

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2011 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - HR POLICY ASSOCIATION

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
1	CDW DIRECT SOFTWARE	093005SL		3.00	16	26.			26.	26.		0.
2	FOR APTIFY SERVER	093005SL		3.00	16	1,084.			1,084.	1,084.		0.
3	CDW DIRECT USER	093005SL		3.00	16	992.			992.	992.		0.
4	CDW DIRECT SQL 2000	093005SL		3.00	16	3,390.			3,390.	2,848.		0.
5	STD SERVER LICENSE	093005SL		3.00	16	2,352.			2,352.	1,927.		0.
6	DELL S.8 GHZ XEON	102805SL		5.00	16	204.			204.	204.		0.
7	SERVER	102805SL		5.00	16	774.			774.	774.		0.
8	DELL LATITUDE D410	112805SL		3.00	16	452.			452.	452.		0.
9	LAPTOP	121405SL		5.00	16	2,203.			2,203.	2,203.		0.
10	CDW DIRECT BACK UP	121405SL		5.00	16	1,861.			1,861.	1,860.		0.
11	LICENSE	121405SL		5.00	16	508.			508.	508.		0.
12	CDW DIRECT SOFTWARE	121405SL		3.00	16	490.			490.	490.		0.
13	UPGRADE	121405SL		3.00	16	144,562.			144,562.	144,562.		0.
14	CDW DIRECT PHILIPS	123005SL		5.00	16	1,027.			1,027.	803.		205.
15	821" FLAT MONITOR	123005SL		5.00	16	2,043.			2,043.	1,567.		409.
16	DELL LATITUDE D610	101007SL		3.00	16	1,226.			1,226.	1,226.		0.
17	LAPTOP	101907SL		3.00	16	1,222.			1,222.	1,154.		68.
18	DELL LATITUDE D610	042808SL		3.00	16	2,225.			2,225.	1,855.		370.
19	LAPTOP	062808SL		3.00	16							
20	VERIZON TRE0650											
21	MOBILE PHONE											
22	CDW SOFTWARE	031606SL		3.00	16							
23	CGI APTIFY											
24	MEMBERSHIP SOFTWARE	083106SL		3.00	16							
25	142 LAPTOPS											
26	152 COMPUTERS											
27	16 LAPTOP											
28	17 LAPTOP											
29	182 LAPTOPS											

128102
05-01-11

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2011 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - HR POLICY ASSOCIATION

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
19	LAPTOP	072808	SL	3.00	16	1,163.			1,163.	938.		225.
20	LAPTOP	052808	SL	3.00	16	1,007.			1,007.	868.		139.
21	ADJUSTMENT	070109		.000	16					1,726.		0.
22	EQUIPMENT	070110	200DB	5.00	17	4,580.			4,580.	916.		1,407.
23	COMPUTER HARDWARE	070111	200DB	5.00	19B	2,393.			2,393.			0.
	* TOTAL 990 PAGE 10 DEPR					175,784.			175,784.	168,983.		2,823.

- NEXT YEAR FEDERAL - HR POLICY ASSOCIATION

Asset No	Description	Date Acquired	Method	Life	Unadjusted Cost Or Basis	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Amount Of Depreciation
1	CDW DIRECT SOFTWARE FOR APTIFY SERVER	093005SL		3.00	26.		26.	26.	0.
2	CDW DIRECT USER LICENSES	093005SL		3.00	1,084.		1,084.	1,084.	0.
3	CDW DIRECT SQL 2000 STD SERVER LICENSE	093005SL		3.00	992.		992.	992.	0.
4	DELL S.8 GHZ XEON SERVER	102805SL		5.00	3,390.		3,390.	2,848.	0.
5	DELL LATITUDE D410 LAPTOP	112805SL		5.00	2,352.		2,352.	1,927.	0.
6	CDW DIRECT BACK UP LICENSE	121405SL		3.00	204.		204.	204.	0.
7	CDW DIRECT SOFTWARE UPGRADE	121405SL		3.00	774.		774.	774.	0.
8	CDW DIRECT PHILIPS 21" FLAT MONITOR	121405SL		5.00	452.		452.	452.	0.
9	DELL LATITUDE D610 LAPTOP	123005SL		5.00	2,203.		2,203.	2,203.	0.
10	DELL LATITUDE D610 LAPTOP	123005SL		5.00	1,861.		1,861.	1,860.	0.
11	VERIZON TRE0650 MOBILE PHONE	123005SL		5.00	508.		508.	508.	0.
12	CDW SOFTWARE	031606SL		3.00	490.		490.	490.	0.
13	CGI APTIFY MEMBERSHIP SOFTWARE	083106SL		3.00	144,562.		144,562.	144,562.	0.
14	2 LAPTOPS	101007SL		5.00	1,027.		1,027.	1,008.	19.
15	2 COMPUTERS	101907SL		5.00	2,043.		2,043.	1,976.	67.
16	LAPTOP	012908SL		3.00	1,226.		1,226.	1,226.	0.
17	LAPTOP	042808SL		3.00	1,222.		1,222.	1,222.	0.
18	2 LAPTOPS	062808SL		3.00	2,225.		2,225.	2,225.	0.
19	LAPTOP	072808SL		3.00	1,163.		1,163.	1,163.	0.
20	LAPTOP	052808SL		3.00	1,007.		1,007.	1,007.	0.
21	ADJUSTMENT	070109		.000				1,726.	0.
22	EQUIPMENT	070110200DB5		5.00	4,580.		4,580.	2,323.	879.
23	COMPUTER HARDWARE	070111200DB5		5.00	2,393.		2,393.	766.	766.
	* TOTAL 990 PAGE 10 DEPR				175,784.		175,784.	171,806.	1,731.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions	
Type or print Name of exempt organization or other filer, see instructions HR POLICY ASSOCIATION	Employer identification number (EIN) or ☒ 52-0747972
Number, street, and room or suite no. If a P.O. box, see instructions. 1100 13TH STREET, NW, NO. 850	Social security number (SSN) ☐
City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20005	

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

THE ASSOCIATION

- The books are in the care of ☒ **1100 13TH STREET, NW, NO. 850 - WASHINGTON, DC 20005**

Telephone No ☒ **202-789-8670**

FAX No. ☐

- If the organization does not have an office or place of business in the United States, check this box ☐

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until **NOVEMBER 15, 2012.**

5 For calendar year **2011**, or other tax year beginning _____, and ending _____.

6 If the tax year entered in line 5 is for less than 12 months, check reason. ☐ Initial return ☐ Final return

☐ Change in accounting period

7 State in detail why you need the extension

ABC

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ☐

Date ☐