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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

2009

Open to Public Inspection

A Fo	or the 2	2009 ca	lendar yea	r, or tax year beginning	01-01-2009	and ending 12-31-20	009		
<b>B</b> Ch	eck ıf ap	pplicable	Please	C Name of organization ceres inc					identification number
☐ Ad	dress ch	ange	use IRS label or					22-3053	
┌ Na	me char	nge	print or type. See	Doing Business As				E Telephone	
┌ Inr	tıal retur	rn	Specific	Number and street (or P	O box if mail is	not delivered to street add	Iress) Room/s	(617) 24 i	
Гте	mınated	i	Instruc- tions.	99 chauncy street 6th floo	or			<b>G</b> Gross receip	ots \$ 9,565,522
┌ Am	nended r	return		City or town, state or cou	untry, and ZIP +	4			
┌ Ap	plication	pending		boston, MA 021111703					
			F Nan	ne and address of princ	ıpal officer		H(a) I	s this a group ret	urn for
			mındy l	ubber	'			ffiliates?	□ Yes ▼ No
				uncy street 6th floor , MA 021111703			11/b) A	!! -66!: :!	
			,				1	re all affiliates incl f "No" attach a li	uded? Yes No st (see instructions)
<b>I</b> Ta	ıx-exem	pt status	<b>▽</b> 501(c)	(3) <b>◄</b> (insert no )	947(a)(1) or \( \)	527		Group exemption	
J W	ebsit e	:⊫ ww	/W ceres or	g					
K For	m of ora	12 nization	✓ Corporat	ion Trust Association	Other 🕨		I Vear	of formation 1990	M State of legal domicile MA
_	rt I	Sumi	•	ion i rust i Association i	i Other F		L rear	or formation 1990	M State of legal doffficile. MA
Governance		Ceres, :	Inc (Ceres nterest org	e organization's mission ) is a Boston-based org anizations to increase o ons into business strate	ganızatıon tha corporate trai	it organizes and coord			•
₹									
ŝ	2	Check t	hıs box 叶	f the organization dis	continued its	operations or dispose	ed of more th	han 25% of its ne	et assets
<b>ა</b> ნ <i>ა</i> ბ	3	Number	of voting r	nembers of the governi	ng body (Part	VI, line 1a)			324
Activities &	4	Number	ofindepen	dent voting members o	of the governi	ng body (Part VI, line :	1b)		423
₹ C				nployees (Part V , line 2					<b>5</b> 65
₫,				lunteers (estimate if ne					6
	1	_		ted business revenue fr ness taxable income fro					<b>7a</b> 0 <b>7b</b> 0
	B	Net um	erated busi	ness taxable income in	0111 F01111 990	-1, IIIIe 34		Prior Year	Current Year
	8	Contri	hutions and	d grants (Part VIII, line		5,063,330	<del> </del>		
ē	9			revenue (Part VIII, line	,		2,319,342		
Revenue	10			ne (Part VIII, column (				28,158	
ä	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line						6,040	313,365
	12							7,416,870	0.550.269
	13			r amounts paid (Part I)				7,416,870	9,559,268
	14			r for members (Part IX,					0
	15			ompensation, employee			5 5 -		
Expenses		10)	,			,		2,860,982	3,554,241
<u>₹</u>	16a	Profes	sıonal fund	raising fees (Part IX, co	olumn (A), lın	e 11e)			7,050
置	b			enses (Part IX, column (D),					
	17			Part IX, column (A), lın			-	2,170,924	
	18			Add lines 13-17 (must			·	5,031,906	
	19	Reven	ue less exp	enses Subtract line 18	8 from line 12		Domin.	2,384,964	2,694,863
8 0 9 0 9 0							Бедіі	nning of Current Year	End of Year
386 388	20	Total	assets (Par	t X, line 16)				5,193,190	8,385,460
Net Assets or Fund Balances	21	Totall	ıabılıtıes (F	Part X, line 26)				870,183	1,367,590
	22			d balances Subtract lır	ne 21 from lır	e 20		4,323,007	7,017,870
Pa	rt II		ature Blo						
S:	_	and beli	ef, it is true, o	rgury, I declare that I have e correct, and complete Decla			sed on all info	rmation of which pre	to the best of my knowledge parer has any knowledge
Sigr Her		**** Signa	*** ature of office	er				2010-10-29 Date	
		mind	ly lubber pres	sident					
			e or print nam						
Paid		Preparer signature		H M GISO MST		Date 2010-10-29	Check if self-empolyed	(see instruction	entifying number ons)
	arer's		ame (or yours	CBIZ Tofias			<u> </u>	•	
Use	Only		nployed), and ZIP + 4	350 Massachusetts Ave	nue			EIN <b>•</b>	
		<u> </u>		Cambridge, MA 02139				Phone no 🕨	(617) 761-0600
—— Мау	the IR	S discus	s this retu	rn with the preparer sho		see instructions) .			✓ Yes

(Expenses \$

Total program service expenses►\$

#### Part III Statement of Program Service Accomplishments

- Briefly describe the organization's mission
- Ceres' mission is to integrate sustainability into capital markets for the health of the planet and its people. Ceres is known for its unique ability to bring diverse groups together to find positive solutions for complex environmental and social challenges. For example, in January 2010 at the United Nations, Ceres convened representatives of U.S. and international investor groups representing \$22 trillion in capital to examine and address the investment risks and emerging business opportunities from climate change and related macro environmental impacts. Ceres introduced the concept of "Climate Risk" to world business leaders and has mobilized \$8 trillion of investors to tackle climate. change Ceres launched the Ceres Principles, a corporate environmental code of conduct, and the Global Reporting Initiative, now the defacto standard for reporting environmental and social performance of 1,500 companies worldwide

2	Did the organization the prior Form 990	, ,	ant program s	ervices during the year	which were not listed on	✓ Yes  No
	If "Yes," describe	these new services on S	chedule O			
3	Did the organization services?	on cease conducting, or i	make significa	nt changes in how it co	nducts, any program	┌ Yes ┌ No
	If "Yes," describe	these changes on Sched	ule O			
4	Section 501(c)(3)		tions and secti	on 4947(a)(1) trusts a	largest program services be are required to report the am service reported	•
4a	(Code	) (Expenses \$	2,144,350	ıncludıng grants of \$	) (Revenue \$	156,476 )
	warming Ceres educ the Business for Inno	cates business leaders and involvative Climate and Energy Po	estors on the relat licy (BICEP) coalit	ted issues and opportunities tion Ceres staff work with t	stainable business practices which and involves them in the political his coalition of well-known consun organizations to further the goals	process In 2009, Ceres expanded ner brands to promote policies
4b	(Code	) (Expenses \$	1,260,124	ıncludıng grants of \$	) (Revenue \$	)
	transportation, and re sectors Ceres has all processes Ceres is c	eal estate sectors to find soluti so developed a water program oordinating dialogues on clima	ions to a range of n, which looks at o ite change with th	environmental problems at cross-cutting issues related to be electric power sector, com	ives from industries engaged in the tributable to these activities condu to water use and quality in compa nmercial real estate developers an pacts in risk assessment models	cted by companies in these ny supply chains and production
4c	governance issues A over 90 leading U S companies for climat	s part of this mission, in 2003 and European institutional inv e risk analysis and disclosure	Ceres launched a estors with assets Investor Summits	and continues to coordinate to s of over \$10 trillion Throug s, coordinated by Ceres, well	the Investor Network on Climate F h INCR, Ceres has mobilized majo	or institutional investors to press 03, 2005, 2008, and 2010 These
4d	Other program se	ervices (Describe in Sch	nedule O ) <b>See</b>	also Additional Data f	or Description	

) (Revenue \$

1,353,808 including grants of \$

5,743,355

1,397,414)

art TV	Check	dist of	Required	Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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 term, permanent,or quasi- endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D,  Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ 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.			
	◆ 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.			
	◆ 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.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	Į	Į	
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, and program service activities outside the United States? 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	15		Νο
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 ? <i>If "Yes," complete Schedule F, Part III</i>	16		Νο
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		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "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		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t 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? If "Yes," complete Schedule I, Parts I and II	21		No
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? If "Yes," complete Schedule I, Parts I and III	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? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	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? If "Yes," complete Schedule L, Part $I$	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	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? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or 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)			_
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	<i>IV</i>	28a		No
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		N o
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νο
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	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</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm <b>990</b>	(2009)

Form	Part V Statements Regarding Other IRS Filings and Tax Compliance				
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance				
			Yes	No	
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable				

Lu	of U.S. Information Returns. Enter -0- if not applicable					
		1a	2	9		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	(			
c	Did the organization comply with backup withholding rules for reportable payments t gaming (gambling) winnings to prize winners?	o vend	dors and reportable	. 1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return	2a	6	5		
b	If at least one is reported on line 2a, did the organization file all required federal employee: If the sum of lines 1a and 2a is greater than 250, you may be required to e-fil instructions)			2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more durin return?	g the	year covered by this	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Scho	edule (	o	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a s over, a financial account in a foreign country (such as a bank account, securities ac account)?			4a		No
ь	If "Yes," enter the name of the foreign country ▶					
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1,   Financial Accounts	Report	of Foreign Bank and			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during	ng the	tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited	tax sh	elter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-E Prohibited Tax Shelter Transaction?	xemp	t Entity Regarding	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$1 organization solicit any contributions that were not tax deductible?		•	6a		No
b	If "Yes," did the organization include with every solicitation an express statement the were not tax deductible?	nat sud	ch contributions or gifts	6b		
7	Organizations that may receive deductible contributions under section 170(c).					
	Did the organization receive a payment in excess of \$75 made partly as a contribut services provided to the payor?			7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services p			7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal prope file Form 8282?	rty for •	which it was required t	<sup>о</sup> 7с		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay benefit contract?	prem	iums on a personal	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a pers	onal b	enefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8	8899	as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization frequired?	ile a F	orm 1098-C as	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) su the supporting organization, or a donor advised fund maintained by a sponsoring org business holdings at any time during the year?	anızat	ion, have excess	8		
9	Sponsoring organizations maintaining donor advised funds.					
	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					
а	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	•				
а	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 99	0 ın lı	eu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				

99 chauncy street 6th floor boston, MA 021111703

(617) 247-0700

**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.

Se	ection A. Governing Body and Management			
			Yes	No
1_	Enter the number of voting members of the governing body   1a   24			
1a b	Enter the number of voting members of the governing body			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any			
-	other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νo
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νo
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)		Yes	NI-
102	Does the organization have local chapters, branches, or affiliates?	10a	165	No No
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10a		110
11		105		
		11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	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?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		Νo
	If "Yes" to line a or b, describe the process in Schedule O (See instructions )			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ►MA, CA			
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 make these available. Check all that apply Own website.   Own website.   Own website.			
19	Describe in Schedule O whether (and if so, how), the organization makes 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	ne orga	ınızatıor	n <b>)</b>
	gabriela ochoa finance manager			

## Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees. See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
<b>(A)</b> Name and Title	(B) Average hours	Posi t	<b>(C</b> tion ( hat a	ched	ckal )	I		<b>(D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

Forr	m 990 (2009)				Page <b>8</b>
1b	Total	266,487	0		37,133
2	Total number of individuals (including but not limited to those listed above) who rec \$100,000 in reportable compensation from the organization 2	ceived more than			
				Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or hi on line 1a? <i>If</i> " <i>Yes," complete Schedule J for such individual</i>	•	oyee 3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other organization and related organizations greater than \$150,000? If "Yes," complete Sundividual	•	. 4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated rendered to the organization? If "Yes," complete Schedule J for such person	_	· 5		No
S	ection B. Independent Contractors				
1	Complete this table for your five highest compensated independent contractors tha \$100,000 of compensation from the organization	at received more than			
	(A) Name and business address	(B) Description of ser	vices	(C Compe	
910	d gardiner & associates 17th st NW Suite 210 hington, DC 20006	Consulting Services			242,558
_					
	Total number of independent contractors (including but not limited to those listed ab	oove) who received more t	than		

\$100,000 in compensation from the organization 🗗

Form **990** (2009)

Form 99								Page <b>9</b>
Part V	<b>/</b>	Statement o	or 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
ने इंड	1a	Federated cam	paigns 1a					
gra our	ь	Membership du	es <b>1b</b>					
∰. چ	С		ents 1c					
<u>#</u> ,#	d		zations 1d					
Sign Sign	e	Government grants		7 102 705				
Contributions, gifts, grants and other similar amounts	f g	sımılar amounts no	ons, gifts, grants, and <b>1f</b> ot included above ibutions included in	7,103,785				
Sont	h	lines 1a-1f \$ _ Total. Add lines	s 1a-1f	▶	7,103,785			
				Business Code				
inue	2a	membership dues		900,099	1,387,364	1,387,364		
Fe S	ь	conference fees		900,099	617,084	617,084		
92	С	fee for service		541,900	113,615	113,615		
	d							
Ē	е							
1100 11000	f	All other progra	am service revenue					
<u>*</u>	g	Total. Add lines	s 2a-2f		2,118,063			
	3		ome (including dividend	· · · · · · · · · · · · · · · · · · ·	22.466			22.166
	_	and other similar amounts)		<b>⊢</b>	23,166			23,166
	4 5		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·				
		Noyuntes :	(ı) Real	(II) Personal				
	6a	Gross Rents	. ,	, ,				
	ь	Less rental expenses						
	С	Rental income or (loss)						
	d		me or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	6,393	750				
	ь	Less cost or other basis and	6,254					
	c	sales expenses Gain or (loss)	139	750				
	d	• •	ss)		889			889
	8a	Gross income f	rom fundraising					
Other Revenue			s reported on line 1c)					
<u>Te</u>	ь	Less directev	penses b					
₹	c		(loss) from fundraising (	events 📂				
	9a		rom gaming activities ne 19					
	b c		penses b  (loss) from gaming activ	//ties 🏲				
		Gross sales of returns and allo	ınventory, less					
	ь		a oods sold b					
	С	Net income or (	(loss) from sales of inve					
	11a			Business Code 900,099	302,781	302,781		
	b	Honoraria	verises	900,099	8,121	8,121		
	c	Honoraria miscellaneoUS		900,099	2,431	2,431		
	d	All other reven		-,	32	-, · - <b>-</b>		32
	e	Total. Add lines	l					
	12			<b>▶</b>	313,365	2 424 200		34.007
	j				9,559,268	2,431,396	0	24,087

### Part IX Statement of Functional Expenses

	Section 501(c)(3) and 501(c)(4) organizations must complete all columns.									
	ll other organizations must complete column (A) but are not required to		ns (B), (C), and (B)	(D).   (C)	(D)					
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses					
1	Grants and other assistance to governments and organizations in the U S $$ See Part IV, line 21 $$									
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22									
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	Compensation of current officers, directors, trustees, and key employees	266,487	173,217	13,324	79,946					
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	2,650,662	2,136,084	290,681	223,897					
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	90,784	62,611	16,995	11,178					
9	Other employee benefits	311,909	215,116	58,391	38,402					
10	Payroll taxes	234,399	161,658	43,879	28,862					
11	Fees for services (non-employees)									
а	Management	5,500		5,500						
b	Legal	6,119	1,043	5,076						
c	Accounting	31,785		31,785	_					
d	Lobbying	6,835	6,835							
e	Professional fundraising See Part IV, line 17	7,050			7,050					
f	Investment management fees									
g	Other									
12	Advertising and promotion	753,752	753,752							
13	Office expenses	234,605	193,043	17,509	24,053					
14	Information technology									
15	Royalties									
16	Occupancy	212,117	157,386	35,966	18,765					
17	Travel	316,317	272,143	25,563	18,611					
18	Payments of travel or entertainment expenses for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	484,820	432,655	41,154	11,011					
20	Interest									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	72,648	55,939	7,991	8,718					
23	Insurance									
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)									
а	PROFESSIONAL FEES	1,088,331	1,045,280	14,753	28,298					
	PRINTING	90,285	76,593	<del>                                     </del>	9,041					
с		,	,	,						
d										
e										
f	All other expenses									
25	Total functional expenses. Add lines 1 through 24f	6,864,405	5,743,355	613,218	507,832					
26	Joint costs. Check here ► ☐ If following SOP 98-2	5,331,103	5,. 15,555	313,210	337,032					
	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 794.763 1.702.678 1 1 Cash—non-interest-bearing . . . . . . . . . . . . 485,906 2 352,303 2 2,113,278 3,505,500 3 3 4 838.138 1.097.698 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 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 6 Notes and loans receivable, net . . . . . 7 8 Inventories for sale or use . . . . . . 47.665 9 109,294 Prepaid expenses and deferred charges . . . . . . . . . . . . Land, buildings, and equipment cost or other basis Complete 417.428 10a 10a Part VI of Schedule D 10b 213.331 226.948 204.097 b Less accumulated depreciation . . . . 10c 11 11 1,401,207 673.809 12 12 Investments—other securities See Part IV, line 11 . . . . . . . . 13 13 Investments—program-related See Part IV, line 11 . . 14 14 12.683 15 12.683 15 16 5,193,190 16 8,385,460 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 485,456 17 764.832 17 Accounts payable and accrued expenses . 18 18 161,096 19 515,258 19 20 20 Liabilities 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 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 Unsecured notes and loans payable to unrelated third parties . . . . 24 223,631 25 Other liabilities Complete Part X of Schedule D . . . . . 25 87,500 26 **Total liabilities.** Add lines 17 through 25 . . . . . 870,183 26 1,367,590 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 533,062 1,416,819 27 Unrestricted net assets . . . . 27 28 3.789.945 28 5.601.051 Temporarily restricted net assets . . . . . Fund 29 29 Permanently restricted net assets . . . . . Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds . . . Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund . . . . . 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ Total net assets or fund balances . . . . . 4,323,007 7,017,870 33 33 34 Total liabilities and net assets/fund balances . . . . . 5,193,190 8,385,460 34

### Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	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	2c	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 consolidated basis, separate basis, or both			
	▼ Separate basis			
3а	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?	3a		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	3b		

Form **990** (2009)

### OMB No 1545-0047

#### **SCHEDULE A** (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

ceres inc

h

Name of the organization

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

**Public Charity Status and Public Support** 

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

Inspection

Employer identification number

22-3053747 Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 7 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II ) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type III - Other Type I **b** Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv)  Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organizati col (i) orga	(vii) A mount of support?	
		ınstructions))	Yes	No	Yes	No	Yes	No	
Total									

Provide the following information about the supported organization(s)

# Part II Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

-	ection A. Public Support	ou checked the	box on line 5,	, or 8 of Part I	.)																											
	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 20	009	<b>(f)</b> Total																								
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	1,440,44	5 3,594,376	3,449,833	6,223,376	8,	,491,149	23,199,179																								
2	grants ") Tax revenues levied for the organization's benefit and either																															
	paid to or expended on its behalf							_																								
3	The value of services or facilities furnished by a governmental unit to																															
	the organization without charge	1,440,44	5 3,594,376	3,449,833	6,223,376	, s	,491,149	23,199,179																								
4 5	<b>Total.</b> Add lines 1 through 3 The portion of total contributions by each person (other than a	1,440,44	3,394,370	3,449,033	0,223,370	0,	,491,149	23,199,179																								
	governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column							6,835,608																								
6	(f) <b>Public Support.</b> Subtract line 5 from line 4							16,363,571																								
S	ection B. Total Support				I																											
	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	( <b>d)</b> 2008	(e) 2009		(e) 2009		(e) 2009		(e) 2009		(e) 2009		(e) 2009		(e) 2009		(e) 2009		(e) 2009		(e) 2009		(e) 2009		(e) 2009		(e) 2009		(f) Total
7	A mounts from line 4	1,440,445	15,429	3,449,833	6,223,376	8,	491,149	23,199,179																								
8	Gross income from interest,																															
	dividends, payments received on securities loans, rents, royalties and income from similar sources	5,364	15,429	30,457	29,319		23,166	103,735																								
9	Net income from unrelated business activities, whether or not the business is regularly carried on																															
LO	Other income (Explain in Part IV ) Do not include gain or loss from the sale of capital assets	4,485	3,839	9,326	6,040		313,365	337,055																								
l1	Total support (Add lines 7 through 10)							23,639,969																								
L2	Gross receipts from related activiti	es, etc (See ins	tructions )			12		3,588,627																								
13	First Five Years If the Form 990 is check this box and stop here		·	, thırd, fourth, or f	ifth tax year as a !	501(c)(3	) organız	ation,																								
	ection C. Computation of Pul																															
14	Public Support Percentage for 2009	•		11 column (f))		14		69 220 %																								
15	Public Support Percentage for 2008					15		73 670 %																								
	33 1/3% support test—2009. If the and stop here. The organization qua	alıfıes as a public	ly supported orga	nızatıon				►V																								
	33 1/3% support test—2008. If the box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organization mee	n qualifies as a p — <b>2009.</b> If the org tion meets the "f	ublicly supported anization did not o facts and circums	organization check a box on lin tances" test, chec	e 13, 16a, or 16b ck this box and <b>st</b>	and line	14 Explain	<b>▶</b>																								
L	organization 10%-facts-and-circumstances test	2008 If+ba a==	anization did not	shack a how on lin	a 13 162 16h a	r 1 7 a a a	d line	<b>►</b>																								
ь	15 is 10% or more, and if the organization Explain in Part IV how the organization	nızatıon meets th	e "facts and circu	mstances" test, o	heck this box and	stop he	re.	<b>▶</b> ┌																								
18	Private Foundation If the organizat	ion did not check	c a box on line 13,	16a, 16b, 17a oi	17b, check this	box and s	see	<b>.</b> ⊢																								

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support				1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	( <b>d)</b> 2008	(e) 2009	<b>(f)</b> Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt						
3	purpose Gross receipts from activities that				+		
3	are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5				-		
7a	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6 )						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	<b>(c)</b> 2007	( <b>d)</b> 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
11	business activities not included						
	ın lıne 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support (Add lines 9, 10c,						
14	11 and 12 ) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and <b>stop here</b>	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	<b>▶</b> ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	<b>009</b> (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	<b>2008</b> Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind <b>stop here.</b> T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes been	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(	us more man 33	1/370 and ine

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

**Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

DLN: 93493306019030

OMB No 1545-0047

#### **SCHEDULE C** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Open to Public Inspection

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

- ◆ 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

If the Selection	ection 501(c)(3) organizations that ection 501(c)(3) organizations that e organization answered "Ye	s," to Form 990, Part IV, Line 4, of t have filed Form 5768 (election under t have NOT filed Form 5768 (election s," to Form 990, Part IV, Line 5 (P	r section 501(h)) ( under section 501	Complete Part II-A Do not coi (h)) Complete Part II-B Do n	mplete Part II-B ot complete Part II-A
	ection 501(c)(4), (5), or (6) organi me of the organization	zations Complete Part III		Employeriden	tification number
	es inc			Employer iden	tilication number
	AT A Complete if the or		costion FO1/	22-3053747	iti
Par	Complete if the or	ganization is exempt under	section 501(	c) or is a section 527	organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect polit	ical campaign act	tivities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Par	tJEB Complete if the or	ganization is exempt under	section 501(	c)(3).	
1		e tax incurred by the organization un	_		\$
2		tax incurred by organization manag			\$
3	•	ection 4955 tax, did it file Form 47.			□ Yes □ No
4a	Was a correction made?	,	· · · · · · · · · · · · · · · · · ·		□ Yes □ No
ь	If "Yes," describe in Part IV				, 155 , 115
	-	ganization is exempt under	section 501(	c) except section 501	L(c)(3).
1	<u> </u>	ended by the filing organization for s			\$
2		organization's funds contributed to o			
	exempt funtion activities		3	▶	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	20-POL, line 17b	¢
4	Did the filing organization file <b>F</b>	Form 1120-POL for this year?			⊤ Yes
5	State the names, addresses ar were made For each organizat contributions received that we	nd employer identification number (E ion listed, enter the amount paid fro re promptly and directly delivered to nittee (PAC) If additional space is n	m the filing organ o a separate politi	ızatıon's funds Also enter t ıcal organızatıon, such as a	to which payments he amount of political
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political

enter-0-

section 4911 tax for this year?

┌ Yes ┌ No

P	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3) a	ind filed Form 5768 (	(election			
Α.	Check   If the filing organization belongs to	an affiliated group					
<u>B</u>	Check If the filing organization checked bo	x A and "limited control" provisions apply					
		Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)  Total lobbying expenditures to influence public opinion (grass roots lobbying)					
1a	Total lobbying expenditures to influence public (	opinion (grass roots lobbying)	0				
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	95,158				
c	under section 501(h)).  Check	95,158					
d	Other exempt purpose expenditures	6,261,415					
е	Total exempt purpose expenditures (add lines 1	6,356,573					
f	· ·	467,829					
	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 li	ne 1f)	116,957				
h	Subtract line 1g from line 1a If zero or less, ent	er -0-	0				
i	Subtract line 1 f from line 1 c If zero or less ente	er - 0 -	0				

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.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expendi	itures During 4	I-Year Avera	ging Period			
	Calendar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	<b>(c)</b> 2008	<b>(d)</b> 2009	<b>(e)</b> Total	
2a	Lobbying non-taxable amount	287,406	337,852	375,959	467,829	1,469,046	
<b>b</b>	Lobbying ceiling amount (150% of line 2a, column(e))					2,203,569	
c	Total lobbying expenditures	0	0	20,000	95,158	115,158	
d	Grassroots non-taxable amount	71,851	84,463	93,990	116,957	367,261	
е 	Grassroots ceiling amount (150% of line 2d, column (e))					550,892	
f	Grassroots lobbying expenditures	0	0	0			

che	dule C (Form 990 or 990-EZ) 200						Page 3
Pa	rt II-B Complete if the or (election under se	rganization is exempt under ection 501(h)).	section 501(c)(3) and has I				
			-	(;	a)	(b	)
				Yes	No	A mo	unt
1		anization attempt to influence foreign t to influence public opinion on a legis					
а	Volunteers?						
b	Paid staff or management (includ	e compensation in expenses reported	l on lines 1c through 1i)?				
c	Media advertisements?						
d	Mailings to members, legislators	, or the public?					
е	Publications, or published or broa	adcast statements?					
f	Grants to other organizations for	lobbying purposes?					
g	Direct contact with legislators, th	neır staffs, government officials, or a l	egislative body?				
h	Rallies, demonstrations, seminar	s, conventions, speeches, lectures, c	rany sımılar means?				
i	Other activities? If "Yes," descri	ibe in Part IV					
j	Total lines 1c through 1:						
2a	Did the activities in line 1 cause	the organization to be not described	n section 501(c)(3)?				
Ь	If "Yes," enter the amount of any	tax incurred under section 4912					
c	If "Yes," enter the amount of any	tax incurred by organization manage	rs under section 4912				
d	If the filing organization incurred	a section 4912 tax, did it file Form 4	720 for this year?				
Par	t III-A Complete if the or 501(c)(6).	ganization is exempt under	section 501(c)(4), section !	501(c	)(5), o		
	W					Yes	s No
1		nore) dues received nondeductible by			-	2	
2	=	n-house lobbying expenditures of \$2,0			-	3	
3		ryover lobbying and political expendit		-01/-	\ <u>\</u>		
26H	501(c)(6) if BOTH	rganization is exempt under Part III-A, lines 1 and 2 are					ion
	answered "Yes".						
1	Dues, assessments and similar a			1			
2	expenses for which the section 5	bbbying and political expenditures (do 27(f) tax was paid).	o not include amounts of political				
a	Current year	(. , para).		2a			
ь	Carryover from last year			2b			
c	Total			2c			
3	Aggregate amount reported in se	ction 6033(e)(1)(A) notices of nonde	ductible section 162(e) dues	3			
4	If notices were sent and the amo	unt on line 2c exceeds the amount or	line 3, what portion of the excess				
	does the organization agree to ca political expenditure next year?	arryover to the reasonable estimate o	f nondeductible lobbying and	4			
5	Taxable amount of lobbying and p	political expenditures (see instruction	ıs)	5			
Pä	rt IV Supplemental Info	ormation					
	mplete this part to provide the des o, complete this part for any addit	criptions required for Part I-A, line 1, ional information	Part I-B, line 4, Part I-C, line 5, an	d Part	II-B, lıne	11	
	Ident if ier	Return Reference	Explana	t ion			

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493306019030

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

**Supplemental Financial Statements** 

Open to Public

ernal Rev	enue Service	► Attach to Fo	orm 990. F See separate instructions.			nspect	ion
	of the organiz	zation		Emp	loyer identificatio	n numbe	r
ceres in	C			22-1	3053747		
Part	I Organi	zations Maintaining Donor Ad	dvised Funds or Other Similar			Complet	te if the
	organız	ation answered "Yes" to Form 99	· · · · · · · · · · · · · · · · · · ·				
_			(a) Donor advised funds	(	<b>b)</b> Funds and other	eraccou	nts
	tal number at	•					
_		ributions to (during year)					
		ts from (during year)					
-		e at end of year					
	_		sors in writing that the assets held in o organization's exclusive legal control?			┌ Yes	Г№
us	ed only for ch	<del>-</del> , , , , , , , , , , , , , , , , , , ,	donor advisors in writing that grant fur efit of the donor or donor advisor, or fo	•	r purpose	┌ Yes	┌ No
Part 1	II Consei	rvation Easements. Complete	ıf the organızatıon answered "Yes	" to Forn	n 990, Part IV, l	ıne 7.	
	Preservation Protection Preservation omplete lines	of natural habitat on of open space	on or pleasure) Preservation of	fa certifie	d historic structur		a
					Held at the En	d of the	Year
_		f conservation easements		2a			
	=	estricted by conservation easements		2b			
c N	umber of cons	ervation easements on a certified his	toric structure included in (a)	2c			
d N	umber of cons	ervation easements included in (c) ac	equired after 8/17/06	2d			
th	e taxable yea	r ▶	rred, released, extinguished, or termin	ated by th	ie organization du	rıng	
. D	oes the organ	es where property subject to conserva ization have a written policy regarding the conservation easements it holds?	the periodic monitoring, inspection, h	andling of	violations, and	┌ Yes	┌ No
St	aff and voluni	teer hours devoted to monitoring, insp	ecting and enforcing conservation eas	ements d	uring the year 🛌		
<b>'</b> A	mount of expe	nses incurred in monitoring, inspecti	ng, and enforcing conservation easeme	ents during	g the year ► \$		
		servation easement reported on line 2 and 170(h)(4)(B)(II)?	(d) above satisfy the requirements of	section		☐ Yes	┌ No
ba	alance sheet,	<del>-</del>	onservation easements in its revenue the footnote to the organization's financ nents	•	· ·		
art I	<b>III Organi</b> Comple	zations Maintaining Collection the organization answered "	ns of Art, Historical Treasure 'Yes" to Form 990, Part IV, line 8.	s, or Otl	her Similar As	sets.	
ar	t, historical ti	reasures, or other similar assets held	116, not to report in its revenue state for public exhibition, education or rese ancial statements that describes thes	earch in fu			<u> </u>
hı	storical treas		116, to report in its revenue statement public exhibition, education, or researc				
(i	<b>)</b> Revenues ir	ncluded in Form 990, Part VIII, line 1			<b>►</b> \$		
(ii	i) Assets incl	uded ın Form 990, Part X			<b>-</b> \$		
If	the organizat	,	orical treasures, or other similar asset S 116 relating to these items	s for finan			
		ded in Form 990, Part VIII, line 1	-		<b>►</b> \$		

**b** Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art	t, His	tori	<u>cal Tr</u>	easu	res, or O	the	<u>r Similar A</u>	<u>sset</u>	<b>S</b> (co.	ntınued)
3	Using the organization's accession and other items (check all that apply)	records, check an	y of th	ne fol	lowing	that are	e a significa	nt u	se of its colle	tion		
а	Public exhibition		d	Γ	Loan	orexch	ange progra	ams				
b	Scholarly research		e	Γ	Other	-						
с	Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	ıın hov	w the	y furthe	er the o	rganızatıon'	sex	empt purpose	ın		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								ılar	Гγ	es	□ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Comple	ete ıf	the	organ	ızatıon			es" to Form			, 110
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	ediary	for c	ontribu	itions o	rotherasse	ets r	not	<b>┌ Y</b>	es	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ıng t	able		Г	1	A	moun	t	
c	Beginning balance							1c				
d	Additions during the year						<u> </u>	1d				
e	Distributions during the year						<u> </u>	1e				
f	Ending balance						<u> </u>	1f				
2a	Did the organization include an amount on Fo	orm 990 Part X lin	212 م				L.			Гу	ec	┌ No
	If "Yes," explain the arrangement in Part XIV		621.								CS	, 110
	t V Endowment Funds. Complete		n ans	Wer	ad "Ye	s" to F	Form 990	Dar	t IV line 10			
	Endownene i anabi compiece i	(a)Current Year		)Prior			Years Back		Three Years Back		our Ye	ars 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 yea	r end balance held	as									
а	Board designated or quasi-endowment	%										
ь	Permanent endowment • %											
С	Term endowment ► %											
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	thata	are held	d and a	dmınıstered	for	the			
	organization by	_									Yes	No
	(i) unrelated organizations							•		ı(i)		
	(ii) related organizations								· · · -	(ii)		
	If "Yes" to 3a(II), are the related organization	•						•		3b		
4 Dar	Describe in Part XIV the intended uses of the tVI Investments—Land, Buildings					00 Da	rt V line	1 0				
rai	Threstments—Land, buildings	, and Equipme	<u> 111. 3</u>			•			(-) A			
	Description of investment				a) Cost o		(b)Cost or o basis (othe		(c) Accumulat depreciation		( <b>d)</b> Bo	ok value
<b>1a</b> l	and		•									
	Buildings		•									
<b>c</b> l	_easehold improvements						73,	,169	18	.292		54,877
d I	Equipment						342,	,179	194	106		148,073
_ /	Other			- 1			1 -	,080	I	0221		1,147
	. Add lines 1a-1e (Column (d) should equal Fo	<u> </u>	<u> </u>				2,	,000	<u> </u>	933		1,147

Investments—Other Securities. See	-orm 990, Part X, line 12 I		
<ul><li>(a) Description of security or category (including name of security)</li></ul>	( <b>b)</b> Book value		d of valuation f-year market value
Financial derivatives		Sost of endso	, Jan Markot Fardo
Closely-held equity interests			
Other			
certificates of deposit	1,401,207		F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	1,401,207		
Part VIII Investments—Program Related. See		13	
			d of valuation
(a) Description of investment type	(b) Book value		f-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )	0.15		
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
			( <b>b)</b> Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			( <b>b)</b> Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, lin			(b) Book value
Part IX Other Assets. See Form 990, Part X, Im  (a) Descrip	tion		(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	5.)		(b) Book value

9,559,268	1			lumn (A), line 12)	Total revenue (Fo	1
6,864,405	2			umn (A), line 25)	Total expenses (	2
2,694,863	3			t line 2 from line 1	Excess or (defici	3
	4			ments	Net unrealized ga	4
	5				Donated services	5
	6				Investment expe	6
	7				Prior period adjus	7
	8				Other (Describe	8
0	9			1	Total adjustment	9
2,694,863	10		nd 9	icial statements Combine lines 3 a	Excess or (defici	10
rn	er Ret	s With Revenue p	tement	e per Audited Financial Sta	t XIII Reconci	Part
9,666,364	1			t per audited financial statements	Total revenue, g	1
				Form 990, Part VIII, line 12	A mounts include	2
			2a		Net unrealized g	а
		107,096	2b		Donated service	b
			2c		Recoveries of pr	c
			2d		Other (Describe	d
107,096	2e				Add lines <b>2a</b> thr	e
9,559,268	3				Subtract line <b>2e</b>	3
				III, line 12, but not on line <b>1</b>	A mounts include	4
			4a	Form 990, Part VIII, line 7b .	Investment exp	а
			4b		Other (Describe	b
0	4c				Add lines <b>4a</b> and	c
9,559,268	5		ne 12 )	ıs should equal Form 990, Part I, lı	Total Revenue /	5
	per R	its With Expenses	<u>itemen</u>	es per Audited Financial St		Part
6,971,501	1			financial	Total expenses statements .	1
	-			Form 990, Part IX, line 25		2
		107,096	2a			- а
			2b		Prior year adjust	b
			2c		Other losses	c
			2d		Other (Describe	d
107,096	2e				Add lines <b>2a</b> thr	e
6,864,405	3				Subtract line <b>2e</b>	3
· ·				X, line 25, but not on line 1:	A mounts include	4
			4a	Form 990, Part VIII, line 7b	Investment exp	а
			4b			b
0	4c				Add lines <b>4a</b> and	С

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

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

Ident if ier	Return Reference	Explanation
	Positions Under FIN 48	the organization accounts for the effect of any uncertain tax positions based on a "more likely than not" threshold to the recognition of the tax positions being sustained based on the technical merits of the position under scrutiny by the applicable taxing authority if a tax position or positions are deemed to result in uncertainties of the positions, the unrecognized tax benefit is estimated based on a "cumulative probability assessment" that aggregates the estimated tax liability for all uncertain tax positions interest and penalties assessed, if any, are accrued as income tax expense the organization has identified its tax status as a tax exempt entity as a tax position and has determined that such tax position does not result in an uncertainty requiring recognition the organization is not currently under examination by any taxing jurisdiction its federal and state income tax returns are generally open for examination for the past 3 years

DLN: 93493306019030

OMB No 1545-0047

**SCHEDULE F** (Form 990)

### Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990. ► See separate instructions.

**Inspection** 

Department of the Treasury Internal Revenue Service Name of the organization **Employer identification number** ceres inc 22-3053747 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. 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 For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed ) (d) Activities conducted in (e) If activity listed in (d) (f) Total expenditures (a) Region (b) Number of (c) Number of region (by type) (ie, is a program service, for region fundraising, program services, offices in the employees or agents in region grants to recipients located in describe specific type of region service(s) in region the region) north america 1 program services As the Senior Director of 57,270 Corporate Programs for Ceres, Andrea Moffat works with a range of Canadian-based companies on reporting and disclosure, policy development, and stakeholder engagement Her daily activities in Canada include managing the Ceres Corporate Program team and working with US and international companies on corporate social responsibility ıssues

57,270

Part IV	, line 15, for an	sistance to Orgar y recipient who recensional	eived more than \$5	es Outside the Ur ,000. Check this box	nited States. Composite of the composite	plete if the organiza received more tha	tion answered "Yes' n \$5,000	'to Form 990, ► 厂
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Enter total n tax-exempt	number of recipions by the IRS, or f	ent organizations lis or which the grante	ted above that are e or counsel has pr	recognized as chari ovided a section 50	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . ►	
3 Enter total n	umber of other	organizations or en	tities					: (Earm 990) 2009

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of (b) Region (d) A mount of (e) Manner of cash (a) Type of grant or (f) A mount of (g) Description (h) Method of assistance cash grant disbursement of non-cash valuation recipients non-cash (book, FMV, assistance assistance appraisal, other)

Schedule F (Form 990) 2009

Identifier	ReturnReference	ın Part I, line 2, and any additional information.  Explanation

**Compensation Information** 

DLN: 93493306019030

**Employer identification number** 

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Open to Public Inspection

cere	es inc		22-3053747			
Pa	rt I Questions Regarding Compensation	n	<u> </u>			
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel		Housing allowance or residence for personal use			
	Travel for companions	$\vdash$	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	$\vdash$	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement orprovision of all the expenses desc	_		1b		
2	Did the organization require substantiation prior to rofficers, directors, trustees, and the CEO/Executive			2		
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the		y			
	Compensation committee	l F	Written employment contract			
	Independent compensation consultant	□	Compensation survey or study			
	Form 990 of other organizations	<u>  -                                   </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymer	it?	4a		No
ь	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b		Νο
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and pr					
	Only 501(c)(3) and 501(c)(4) organizations only mu	ıst comp	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a,	did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a,	did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," of			7		No
8	Were any amounts reported in Form 990, Part VII, p					
	subject to the initial contract exception described in Part III	n Regs	section 53 4958-4(a)(3)? If "Yes," describe			
				8		Νo
9	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	e rebutt	able presumption procedure described in Regulations	9		

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base (ii) Bonus & incentive compensation		(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Mındy Lubber	(I) (II)	158,405 0	7,000 0		6,730 0	20,033 0		0 0
						•		

#### 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

if ie	er Return Reference	Explanation
if ie	Reference	Explanat ion

Schedule J (Form 990) 2009

#### **SCHEDULE M** (Form 990)

### **NonCash Contributions**

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization **Employer identification number** ceres inc 22-3053747 Types of Property (a) (b) (c) (d) Check Number of Contributions Revenues reported on Method of determining Form 990, Part VIII, line ıf revenues applicable 1 g 1 Art-Works of art . . 2 Art—Historical treasures 3 Art—Fractional interests 4 Books and publications 5 Clothing and household goods . . . . . Cars and other vehicles Boats and planes . . . Intellectual property Securities—Publicly traded . 6,254 fmv 10 Securities—Closely held stock 11 Securities—Partnership, LLC, or trust interests . . . . 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures . . . . 14 Qualified conservation contribution—Other . . Real estate—Residential . Real estate—Commercial . 17 Real estate—Other . . . 18 Collectibles . . . . 19 Food inventory . . . 20 Drugs and medical supplies . **21** Taxidermy . . . . . 22 Historical artifacts . . . 23 Scientific specimens . . 24 Archeological artifacts . 25 Other ► ( \_\_ Other ►( \_\_ 26 27 Other ►( \_\_ 28 Other ► (\_ Number of Forms 8283 received by the organization during the tax year for contributions 29 0 for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . . . . . . . . . No 30a **b** If "Yes," describe the arrangement in Part II 31 Yes Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? . . . . . . . . . 32a Yes b If "Yes," describe in Part II

If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,

#### Part II

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Ident if ier	Ret urn Reference	Explanation
Third Party Use	,	Each time Ceres receives donated securities the organizational policy is to sell them and convert them into money market funds, which is being executed through the financial institution Charles Schwab

Schedule M (Form 990) 2009

### OMB No 1545-0047

Open to Public Inspection

### **SCHEDULE 0**

(Form 990)

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information. ► Attach to Form 990.

**Supplemental Information to Form 990** 

Name of the organization ceres inc

**Employer identification number** 

22-3053747

debate on climate and energy policy the program draws resources from varous other pro- in the organization in addition to securing specific funding to further program goals  Form990, Part VI, Section A, Iline 2  For part of 2009, Norman Dean, Co-chair of Ceres Board of Directors, was working as a C Counsel for Cooler, Inc. Cooler, Inc.'s Founder and CEO is Michel Gelobter, who is also a D of Ceres Board in the summer of 2009, Norman Dean ceased working with Cooler, Inc. an started working as President and Executive Director of TopTop IUSA  All members have equivalent power except for certain members who have roles with the such as the Co-chairs, Treasurer, and Secretary For example, the Treasurer would center on the such as the Co-chairs, Treasurer, and Secretary For example, the Treasurer would be to sign organizational documents. All members would have the same power when it comes down to organizational decisions.  Form990, Part VI, Section B, line  11  The accounting auditing firm sends the organization a questionnaire to fill out for preparing Form990. This questionnaire is prepared and review ed by the Finance team. Then, the accounting auditing firm prepares the 990, with the information gathered in the questionnair provided by the Finance team. Then, the accounting auditing firm prepares the 990, with the information gathered in the questionnair provided by the Finance team. The Senor Managem team reviews this and emails to the full board for its review prior to its filing. The Audit Contains the virtee of the auditors to review and accept the 990. Attended the 990 is the auditors to review and accept the 990. Attended the 990 is recommendation of the support the 990 in the provided by the finance team. The support of the board member is provided with the Ceres Board Polices's contain the written conflict of interest policy in this package in the gather state and provided the SCI formor organization. The case of the support of the power provided	ldentifier	Return Reference	Explanation
VI, Section A, line 2  Counsel for Cooler, Inc. Cooler, Inc. Se Founder and CEO is Michel Gelobter, who is also a D of Ceres Board in the summer of 2009, Norman Dean ceased working with Cooler, Inc. an started working as President and Executive Director of TopTen USA  All members have equivalent power except for certain members who have roles with the I such as the Co-chairs, Treasurer, and Secretary. For example, the Treasurer would condificate the finance of mormittee meetings and oversee the finances of the organization, while the Secretor level would be to sign organizational documents. All members would have the same power when it correct down to organizational decisions.  The accounting auditing firms ends the organization a questionnaire to fill out for preparing Form990. Plant Plant of the accounting auditing firm prepares the 990, with the information gathered in the questionnair provided by the Finance team and sends a draft to the organization. The Senior Managem team reviews this and emails to the full board for its review prior to its filing. The Audit Commets with the auditors to review and accept the 990. Afterwards the 990 is filed.  The organization has a written conflict of interest policy. As part of the board reminer is provided with the Ceres Board Policies? Interest Statement (CIST) where they are required to disclose any conflict of interest than exist with the organization. Once a year, the board members are required to inform to a the board co-chairs of Ceres of any material change that develops during the year in the information contained in the foregoing statement.  Form 990, Part VI, Section B, line 15  Form990, Part VI, Section B, line 15  Form990, Part VI, Section B, line 2  Form990, Part VI, Section B, line 3  Form990, Part VI, Section B, line 4  Form990, Part VI		New Program Services	in 2009, ceres expanded its policy program in order to bring investor and business voices into the debate on climate and energy policy the program draws resources from various other programs in the organization in addition to securing specific funding to further program goals
such as the Co-chairs, Treasurer, and Secretary. For example, the Treasurer would cond. Inne 6  such as the Co-chairs, Treasurer, and Secretary. For example, the Treasurer would cond. Finance Committee meetings and oversee the finances of the organization, while the Secret role would be to sign organizational documents. All members would have the same power when it comes down to organizational decisions.  Form 990, Part VI, Section B, line 11  The accounting auditing firm sends the organization a questionnaire to fill out for preparing form 990. This questionnaire is prepared and reviewed by the Finance team Then, the accounting auditing firm prepares the 990, with the information gathered in the questionnal provided by the Finance team, and sends a draft to the organization. The Senior Managem team reviews this and emails to the full lobard for its review prior to its filling. The Audit Commets with the auditors to review and accept the 990. Afterwards the 990 is filed.  Form 990, Part VI, Section B, line 12c  The organization has a written conflict of interest policy. As part of the board training, who joining the Ceres Board, the new board member is provided with the Ceres Board Policies: contain the written conflict of interest policy. As part of the board training, who joining the Ceres Board, the new board member is provided with the Ceres Board Policies: visit with the organization Once a year, the board members are provided this CIS form to Also, as part of the governance compliance the board members are required to information Also, as part of the governance compliance the board members are required to information Also, as part of the governance compliance the board members are required to information back to the committee of the board annually review and approves the CEOs compens. A member of that committee gathers data from salary surveys from comparable sized non and brings that information back to the committee for its deliberations. The CEO is responsible for assit the appropriate levels of other	VI, Section A,		For part of 2009, Norman Dean, Co-chair of Ceres Board of Directors, was working as a General Counsel for Cooler, Inc Cooler, Inc 's Founder and CEO is Michel Gelobter, who is also a Director of Ceres Board In the summer of 2009, Norman Dean ceased working with Cooler, Inc and has started working as President and Executive Director of TopTen USA
Form 990, Part VI, Section B, line 11 Form 990, Part VI, Section B, line 12c Form 990, Part VI, Section B, line 12c Form 990, Part VI, Section B, line 13c Form 990, Part VI, Section B, line 15a Form 990, Part VI, Section C, line 15b Form 990, Part VI, Section C, line 15c Form 990, Part VI,	VI, Section A,		All members have equivalent power except for certain members who have roles with the Board such as the Co-chairs, Treasurer, and Secretary For example, the Treasurer would conduct Finance Committee meetings and oversee the finances of the organization, while the Secretary's role would be to sign organizational documents. All members would have the same power to vote when it comes down to organizational decisions
VI, Section B, line 12c    Joining the Ceres Board, the new board member is provided with the Ceres Board Policies contain the written conflict of interest policy. In this package is included the form "Conflict of Interest Statement (CIS)" where they are required to disclose any conflict of interest that mexist with the organization. Once a year, the board members are provided this CIS formto Also, as part of the governance compliance the board members are required to inform to a the board co-chairs of Ceres of any material change that develops during the year in the information contained in the foregoing statement.    Form 990, Part VI, Section B, line 15a	VI, Section B, line		accounting auditing firm prepares the 990, with the information gathered in the questionnaire provided by the Finance team, and sends a draft to the organization. The Senior Management team reviews this and emails to the full board for its review prior to its filing. The Audit Committee
A member of that committee gathers data from salary surveys from comparable sized nony and brings that information back to the committee for its deliberations. The committee then con the appropriate compensation level for the coming year and any bonus warranted for the year. This is then conveyed with a recommendation to the full board in an executive session the vote taken to approve the recommended compensation. The CEO is responsible for asset the appropriate levels of other key employees. Compensation is based on performance, levels of the financial statements and governing documents upon request. Ceres' Form 990 is also available via Guidestar, and the Massachusetts Attorney. General's wiebsite.  The organization provides copies of the financial statements and governing documents upon request. Ceres' Form 990 is also available via Guidestar, and the Massachusetts Attorney. General's wiebsite.  EINE 2C-DOES ORGANIZATION HAVE A COMMITTEE THAT ASSUMES OVERSIGHT  ASSUMES OVERSIGHT  A member of that committee gathers data from salary surveys from comparable sized non and approving the audited financial statements and approving the audited financial statements.	VI, Section B, line		
VI, Section C, line 19  request Ceres' Form 990 is also available via Guidestar, and the Massachusetts Attorney General's w ebsite  the organization has an audit committee w ithin its board w hich oversees the audit of the file statements and selection of an independent accountant the committee w as formed in july The Committee in the committee in the committee w as formed in july The Committee in the committee	VI, Section B, line		The Executive Committee of the board annually reviews and approves the CEO's compensation A member of that committee gathers data from salary surveys from comparable sized nonprofits and brings that information back to the committee for its deliberations. The committee then decides on the appropriate compensation level for the coming year and any bonus warranted for the prior year. This is then conveyed with a recommendation to the full board in an executive session and the vote taken to approve the recommended compensation. The CEO is responsible for assessing the appropriate levels of other key employees. Compensation is based on performance, level of responsibility, cost of living factor, inflation, and to some degree the nonprofit market in Boston.
12, PART XI - ORGANIZATION HAVE Statements and selection of an independent accountant the committee was formed in july 1 the committee has the responsibility of meeting with the auditors and approving the audited financial statements	VI, Section C, line		l '
REPORTING OF AUDITY	12, PART XI - FINANCIAL	ORGANIZATION HAVE A COMMITTEE THAT	the organization has an audit committee within its board which oversees the audit of the financial statements and selection of an independent accountant, the committee was formed in july 2009 the committee has the responsibility of meeting with the auditors and approving the audited financial statements

#### **Additional Data**

Software ID: Software Version:

**EIN:** 22-3053747

Name: ceres inc

### Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program ser	vices				
(Code Corporate Progams	) (Expenses \$	793,904	including grants of \$	) (Revenue \$	1,123,080 )
(Code Conference Programs	) (Expenses \$	559,904	including grants of \$	) (Revenue \$	274,334 )

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

Compensated Employees (A)	(B)	- Circ	((					(D)	(E)	(F)
Name and Title	A verage hours	A verage Position (check all hours that apply)						Reportable compensation from the	Reportable compensation	Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Stuart Auchincloss director	5 00	Х						0	0	0
Vidette Bullock Mixon director	5 00	X						0	0	0
Majora Carter director	5 00	Х						0	0	0
Norm Dean co-chair	5 00	X		X				0	0	0
Jack Ehnes director	5 00	X						0	0	0
Rıchard Ferlauto dırector	5 00	X						0	0	0
Paul Freundlich secretary	5 00	Х		Х				0	0	0
Mıchel Gelobter dırector	5 00	Х						0	0	0
Neva Goodwin director	5 00	X						0	0	0
Julie FGorte PhD director	5 00	Х						0	0	0
Alisa Gravitz treasurer	5 00	X		Х				0	0	0
Ashok Gupta dırector	5 00	X						0	0	0
Doug Husıd dırector	5 00	X						0	0	0
Bob Massie director	5 00	X						0	0	0
Lance Pierce director	5 00	X						0	0	0
Howard Rifkin director	5 00	X						0	0	0
Tedd Saunders director	5 00	X						0	0	0
Bill Somplatsky-Jarman director	5 00	X						0	0	0
Deborah Sorondo dırector	5 00	X						0	0	0
Anne Stausboll co-chair	5 00	X		Х				0	0	0
Ken Sylvester director	5 00	X						0	0	0
Betsy Taylor director	5 00	X						0	0	0
Joe Uehlein director	5 00	X						0	0	0
Mindy Lubber president/ceo	40 00	X		X				165,405	0	26,763
Gordon MacFarland cfo	40 00			Х				101,082	0	10,370