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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

2010

Open to Public Inspection

A Fo	r the	2010 ca	alendar year, or tax year begin	ning 01-01-2010 and ending 12-31-2	010			
		pplicable	C Name of organization CERES INC				-	identification number
_	dress ch	_	Doing Business As			22-3	30537	747
	me cha	_				E Telep	hone	number
	ial retu		Number and street (or P O box 199 CHAUNCY STREET 6TH FLOOR	f mail is not delivered to street address)	Room/suit	te (617) 247	7-0700
	mınate					G Gross	recein	ots \$ 7,102,484
_	ended		City or town, state or country, ar BOSTON, MA 021111703	nd ZIP + 4		G 01033	Гесегр	715 \$ 7,102,404
J Apı	olication	n pending						_
			F Name and address of p MINDY LUBBER	rincipal officer	H(a) Is t	this a group return	for affili	lates? Yes V No
			99 CHAUNCY STREET 6		H(b) Are	e all affiliates in	cluded	?
			BOSTON, MA 02111170	13				t (see instructions)
 т Та	x-exem	npt status	<u> </u>	¶ (insert no)	H(c) G	roup exempt	ion n	umber ►
			/W CERES ORG	(1.102.10.10.7)				
					<u> </u>			
			Corporation Trust Associa	ition Other ►	L Year o	of formation 19	90	M State of legal domicile MA
Pā	rt I		imary	sion or most significant activities				
Activities & Governance		CERES, INVEST	INC (CERES) IS A BOSTON OR, ENVIRONMENTAL, AND SS SOCIAL AND ENVIRONM	-BASED ORGANIZATION THAT ORG PUBLIC INTEREST ORGANIZATION ENTAL CHALLENGES AND INTEGRA	NS TO INCRE	ASE CORPO	RAT	E TRANSPARENCY,
ŝ	2	———— Check tl	his box 🛏 if the organization	discontinued its operations or dispose	ed of more tha	n 25% of its	net a	assets
න් ග			,	rning body (Part VI, line 1a)			з	21
ĕ				rs of the governing body (Part VI, line			4	20
<u> </u>	5	Total nu	mber of individuals employed	ın calendar year 2010 (Part V, lıne 2a)		5	82
∢	6	Total nu	mber of volunteers (estimate i	fnecessary)			6	16
	7a ⁻	Total un	related business revenue from	Part VIII, column (C), line 12			7a	0
	ь	Net unre	lated business taxable incom	e from Form 990-T, line 34			7Ь	0
						Prior Year		Current Year
Revenue	8			, line 1 h)		7,103,785		4,301,463
	9	_	•	, line 2g)		2,118,	$\overline{}$	2,525,281
歪	10 11			mn (A), lines 3, 4, and 7d)	•	313,	365	27,834
	12			11 (must equal Part VIII, column (A),	line	313,	303	241,030
		12) .		<u> </u>		9,559,	268	7,096,274
	13			art IX, column (A), lines 1–3)			0	0
	14			t IX, column (A), line 4)			0	0
8	15	Saları 10)	es, other compensation, emplo	oyee benefits (Part IX, column (A), line	s 5-	3,554,	241	4,063,211
Expenses	16a	Profes	sional fundraising fees (Part I	X, column (A), line 11e)		7,	050	7,422
ੜ	ь	Total fu	ındraısıng expenses (Part IX, column	(D), line 25) •622,112	_			
ш	17	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		3,303,	114	3,125,380
	18	Total	expenses Add lines 13-17 (n	nust equal Part IX, column (A), line 25	5)	6,864,	405	7,196,013
	19	Reven	ue less expenses Subtract lır	ne 18 from line 12		2,694,	_	-99,739
000 200					Begini	ning of Curre Year	nt	End of Year
SS-O	20	Total	assets (Part X, line 16)			8,385,	460	8,004,221
A PE	21					1,367,	590	1,086,090
žZ	22	Netas	sets or fund balances Subtra	ct line 21 from line 20		7,017,	870	6,918,131
Unde know	21 22 11 III r penal	Net as Sign Ities of p and belie	liabilities (Part X, line 26) . sets or fund balances Subtra lature Block erjury, I declare that I have exan			8,385, 1,367, 7,017,	590 870 , and	1,086,0 6,918,1 to the best of my
		Th.				I		
c:		**** Signa	*** ature of officer			2011-07-18 Date		
Sigr Here								
	-		DON MACFARLAND CFO or print name and title					
	ſ	Print/Typ	e	Preparer's signature	Date	Check if se		PTIN
Paid		preparer'		JOSEPH M GISO MST	2011-07-18	employed	<u> </u>	
Prep	arer			15				Firm's EIN
Use (Firm's ad	dress F 350 MASSACHUSETTS AVENU	JE				Phone no (617) 761-
	- I		CAMBRIDGE, MA 02139					1 3000

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

1 0111	Page 2
Par	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission
SEE	Check if Schedule O contains a response to any question in this Part III
### Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III ### Briefly describe the organization's mission Program Pr	
2	
	If "Yes," describe these new services on Schedule O
3	services?
	If "Yes," describe these changes on Schedule O
4	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
4a	(Code) (Expenses \$ 1,155,308 including grants of \$) (Revenue \$ 209,829)
	ENVIRONMENTAL, SOCIAL AND CORPORATE GOVERNANCE ISSUES AS PART OF THIS MISSION, IN 2003 CERES LAUNCHED AND CONTINUES TO COORDINATE THE INVESTOR NETWORK ON CLIMATE RISK (INCR), NOW AN ALLIANCE OF 100 LEADING U S AND EUROPEAN INSTITUTIONAL INVESTORS WITH ASSETS OF OVER \$10 TRILLION THROUGH INCR, CERES HAS MOBILIZED MAJOR INSTITUTIONAL INVESTORS TO PRESS COMPANIES FOR CLIMATE RISK ANALYSIS AND DISCLOSURE INVESTOR SUMMITS, COORDINATED BY CERES, WERE HELD AT THE UNITED NATIONS IN 2003, 2005, 2008, AND 2010 AND PLANS FOR A 2012 SUMMIT ARE UNDERWAY THESE GATHERINGS BRING TOGETHER LEADERS FROM GLOBAL ASSET OWNERS AND MANAGERS TO CONSIDER HOW COLLECTIVELY THEIR ACTIONS
	(Code) (Eypences \$ 1,604,738 including grants of \$) (Devenue \$ 100,000.)
40	INDUSTRY PROGRAMS CERES BRINGS INVESTORS AND ENVIRONMENTAL EXPERTS TOGETHER WITH REPRESENTATIVES FROM INDUSTRIES ENGAGED IN THE ELECTRIC POWER, OIL, INSURANCE, TRANSPORTATION, AND REAL ESTATE SECTORS TO CREATE SOLUTIONS TO A RANGE OF ENVIRONMENTAL PROBLEMS ATTRIBUTABLE TO THE ACTIVITIES CONDUCTED BY COMPANIES IN THESE SECTORS CERES HAS DEVELOPED A WATER PROGRAM, WHICH LOOKS AT CROSS-CUTTING ISSUES RELATED TO WATER USE AND QUALITY IN COMPANY SUPPLY CHAINS AND PRODUCTION PROCESSES CERES IS COORDINATING DIALOGUES ON CLIMATE CHANGE WITH THE ELECTRIC POWER SECTOR, COMMERCIAL REAL ESTATE DEVELOPERS AND OPERATORS, AND OIL COMPANIES CERES HAS ENGAGED
4c	(Code) (Expenses \$ 1,799,975 including grants of \$) (Revenue \$ 459,041)
	POLICY PROGRAMS CERES IS ENGAGED IN DEVELOPING CLIMATE AND ENERGY POLICIES THAT ENCOURAGE SUSTAINABLE BUSINESS PRACTICES WHICH LESSEN THE IMPACTS OF GLOBAL WARMING CERES EDUCATES BUSINESS LEADERS AND INVESTORS ON RELATED ISSUES AND OPPORTUNITIES AND INVOLVES THEM IN THE POLITICAL PROCESS IN 2010, CERES EXPANDED THE BUSINESS FOR INNOVATIVE CLIMATE AND ENERGY POLICY (BICEP) COALITION CERES STAFF WORK WITH THIS COALITION OF WELL-KNOWN CONSUMER BRANDS TO PROMOTE POLICIES ADDRESSING LONG-TERM ECONOMIC THREATS POSED BY GLOBAL WARMING CERES COLLABORATES WITH OTHER ORGANIZATIONS TO FURTHER THE GOALS OF THE PROGRAM
	Other and any and the Color of the Additional Data for Description
40	
	Total program service expenses▶\$ 5,956,229

			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 (see instruction)? 🕏	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, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
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 1	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? <i>If "Yes," complete Schedule D, Part II</i>	7		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	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? If "Yes," complete Schedule D, Part V	10		Νo
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		Νο
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Νο
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
	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, Parts I and IV	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, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV .	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I (see instructions)	17		N o
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		N o
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νο
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

LOIIII	990 (2010)			Page 4
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		Νo
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 lines 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		Νο
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		Νo
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? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? <i>If</i> " <i>Yes,"</i> complete Schedule L, Part IV	28b		Νο
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
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)?	35		Νο
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes Vo			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "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		Νο
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V .					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	36			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to gaming (gambling) winnings to prize winners?	vend	lors and reportable	1 c		
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	82			
b	If at least one is reported on line 2a, did the organization file all required federal empl				,,	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file	(see	: instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during	the		_		
h	year?	dula (3a 3b		N o
4a	At any time during the calendar year, did the organization have an interest in, or a signover, a financial account in a foreign country (such as a bank account, securities account)?	gnatu	re or other authority	4a		N o
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bar	nk and	f Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during	a the	tav vaar?	5a		
	Did any taxable party notify the organization that it was or is a party to a prohibited to			5b		No.
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			36		
				5c		
6a	Does the organization have annual gross receipts that are normally greater than \$10 organization solicit any contributions that were not tax deductible?	•	·	6a		N o
	If "Yes," did the organization include with every solicitation an express statement that were not tax deductible?	at suc	n contributions or gifts	6b		
7 a	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution of the property of the pr	on and	d partly for goods and	7a	Yes	
b	services provided to the payor?	• ovide	d?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal propert	,		-		NI -
d	file Form 8282?	7d		7c		N o
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a percontract?		al benefit	7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a perso	nal be	enefit contract?	7f		Νο
g	If the organization received a contribution of qualified intellectual property, did the or required?	ganız	ation file Form 8899 as	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles Form 1098-C?		-	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) sup the supporting organization, or a donor advised fund maintained by a sponsoring organization business holdings at any time during the year?	nızat	ion, have excess	8		
9	Sponsoring organizations maintaining donor advised funds.					
	Did the organization make any taxable distributions under section 4966?			9a		
ь 10	Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter	•		9b		
	1	10a				
	F	10b				
11						
		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				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990	ın lı (eu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on S	Sched	dule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states					
	in which the organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax	year		14a		Νο
Ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explana	tion ii	n Schedule O	14b		

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	ction A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year							
ь	Enter the number of voting members included in line 1a, above, who are							
	ındependent							
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		Νo				
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 governing documents since the prior Form 990 was filed?							
5	Did the organization become aware during the year of a significant 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		No				
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	The governing body?	8a	Yes					
b	Each committee with authority to act on behalf of the governing body?	8b	Yes					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		100					
	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 evenue Code.)							
Ne	venue Code.)		Yes	No				
10a	Does the organization have local chapters, branches, or affiliates?	10a	103	No				
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	100						
_	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b						
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes					
b	Describe in Schedule O the process, if any, used by the organization to review this 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?							
а	The organization's CEO, Executive Director, or top management official	15a	Yes					
	Other officers or key employees of the organization	15b		N o				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)							
	,							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νo				
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						
Se	ction C. Disclosure							
17	List the States with which a copy of this Form 990 is required to be filed ►MA, NY, CA, AL, AK, AZ, AR, CO, C ME, MD, MI, MN, KY, MO, NH, NJ, N OR, PA, NC, SC, TN, UT, VA, RI, W	IM, M	s,oH	, ок,				

- 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 of windows website. Another's website. Upon request
- 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization F
 GABRIELA OCHOA FINANCE MANAGER
 99 CHAUNCY STREET 6TH FLOOR
 BOSTON, MA 021111703

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

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, 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, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization no<u>r any related organization compensated any current officer, director, or trustee</u>

(A) Name and Title	(B) Average hours	Posi t	tion (that a	(che		II		(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	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
(1) VIDETTE BULLOCK MIXON DIRECTOR	5 00	х						0	0	0
(2) MAJORA CARTER DIRECTOR	5 00	х						0	0	0
(3) NORM DEAN CO-CHAIR	5 00	х		Х				0	0	0
(4) JACK EHNES DIRECTOR	5 00	х						0	0	0
(5) PAUL FREUNDLICH SECRETARY	5 00	х		х				0	0	0
(6) MICHEL GELOBTER DIRECTOR	5 00	х						0	0	0
(7) NEVA GOODWIN DIRECTOR	5 00	х						0	0	0
(8) JULIE F GORTE PHD DIRECTOR	5 00	х						0	0	0
(9) ALISA GRAVITZ TREASURER	5 00	х		х				0	0	0
(10) ASHOK GUPTA DIRECTOR	5 00	х						0	0	0
(11) DOUG HUSID DIRECTOR	5 00	х						0	0	0
(12) LANCE PIERCE DIRECTOR	5 00	х						0	0	0
(13) HOWARD RIFKIN DIRECTOR	5 00	х						0	0	0
(14) TEDD SAUNDERS DIRECTOR	5 00	х						0	0	0
(15) BILL SOMPLATSKY-JARMAN DIRECTOR	5 00	х						0	0	0
(16) DEBORAH SORONDO DIRECTOR	5 00	х						0	0	0

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

(A) Name and Title	(B) Average hours		tion (•		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(17) ANNE STAUSBOLL CO-CHAIR	5 00	Х		Х				0	0	0
(18) KEN SYLVESTER DIRECTOR	5 00	х						О	0	0
(19) BETSY TAYLOR DIRECTOR	5 00	х						0	0	0
(20) JOE UEHLEIN DIRECTOR	5 00	х						О	0	0
(21) MINDY LUBBER PRESIDENT	40 00	х		х				181,480	0	23,949
(22) GORDON MACFARLAND CFO	40 00			х				98,528	0	15,817
(23) PEYTON FLEMING DIR STRATEGIC COMMUNICATIONS	40 00					х		101,485	0	17,936
							<u> </u>		1	
c Total from continuation sheets t						· ·				
							-	381,493	0	57,702
Total number of individuals (inclu \$100,000 in reportable compens	•				ed a	bove)	who	received more thai	า	

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
DAVID GARDINER & ASSOCIATES 910 17TH ST NW SUITE 210 WASHINGTON, DC 20006	CONSULTING SERVICES	274,102
ANGELA BONARRIGO CO CEN 1101 14TH ST NW STE 1200 WASHINGTON, DC 20005	CONSULTING SERVICES	132,000

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

Form 9	90 (2010)				Pa	age 9
Part	VIII Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f	4,301,463	4,301,463			
Program Service Revenue	2a MEMBERSHIP DUES b CONF FEES & SPONS c FEE FOR SERVICE d e f All other program service revenue g Total. Add lines 2a-2f	900099 900099 541900	1,604,321 698,935 222,025 2,525,281	698,935		
	3 Investment income (including dividends, interest and other similar amounts)	^P ersonal	27,696			27,696
venue) O ther	138			138
Other Revenue	b Less direct expenses b c Net income or (loss) from fundraising events					
	11a OTHER REVENUE b c d All other revenue	ness Code 900099	241,696	241,696		
	e Total. Add lines 11a-11d		241,696 7,096,274	2,766,977	0	27,834

	990 (2010)				Page 10
Par					
	Section $501(c)(3)$ and $501(c)(4)$ organizations must omplete column (A) but are not required to c			(D)	
	ot include amounts reported on lines 6b,		(B)	(C)	(D)
	b, 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	280,008	148,299	84,781	46,928
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	3,018,279	2,524,646	192,309	301,324
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	105,077	69,746	24,920	10,411
9	Other employee benefits	387,986	261,314	 	51,442
10	Payroll taxes	271,861	184,614	· ·	37,441
а	Fees for services (non-employees) Management		201,021	13,000	
b	Legal	3,400		3,400	
c	Accounting	68,960		68,960	
d	Lobbying	11,683	11,683	 	
	Professional fundraising services See Part IV, line 17	7,422	11,063		7,422
e •	Investment management fees	7,422			7,422
	-				
g 12	Other	14.000	14 000		
12 13		14,000 314,987	14,000		20 552
	Office expenses	314,967	247,731	28,703	38,553
14 15					
16	Royalties	210 505	167.260	26 105	26.042
	Occupancy	219,505	,		26,042
17 18	Payments of travel or entertainment expenses for any federal, state, or local public officials	326,436	281,511	25,471	19,454
19	Conferences, conventions, and meetings	394,146	376,817	7,643	9,686
20	Interest	201,210		1,212	2,555
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	90,978	71,190	8,634	11,154
23	Insurance	30,370	, 1,130	3,551	11,131
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	PROFESSIONAL FEES	1,572,498	1,517,414	19,117	35,967
b	PRINTING	108,787	79,996	2,503	26,288
c					
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	7,196,013	5,956,229	617,672	622,112
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a				
	combined educational campaign and fundraising solicitation				

Part X Balance Sheet (A) (B) Beginning of year End of year 1,702,678 793.482 1 352,303 376.631 2 3,505,500 3,064,860 3 1,097,698 687,018 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Schedule L . . . 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) **A**ssets 7 8 8 Prepaid expenses and deferred charges 109,294 9 108,511 10a Land, buildings, and equipment cost or other basis Complete 556,692 10a Part VI of Schedule D 294.802 204.097 ь Less accumulated depreciation 10b 10c 261.890 11 11 1,401,207 12 2,699,146 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 8,385,460 16 8,004,221 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 764.832 17 669.690 17 Accounts payable and accrued expenses . 18 18 515.258 416.400 19 19 20 20 Liabilities 21 21 Escrow or custodial account liability $Complete\ Part\ IV\ of\ Schedule\ D$. . 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 24 Unsecured notes and loans payable to unrelated third parties 25 87.500 25 0 Other liabilities Complete Part X of Schedule D 26 1,367,590 26 1.086.090 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 Unrestricted net assets 1,416,819 1,945,440 Temporarily restricted net assets 5,601,051 4,972,691 28 28 Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 7,017,870 33 6,918,131 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 8.385.460 8.004.221

Pal	Check if Schedule O contains a response to any question in this Part XI			.୮	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		7,0	096,27
2	Total expenses (must equal Part IX, column (A), line 25)	2			196,01
3	Revenue less expenses Subtract line 2 from line 1	3			-99,739
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		7,0	017,87
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		6,9	918,13
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			৮	•
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
ь	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 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 in a separate basis, consolidated basis, or both	ssued			
	▼ Separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the r	equired	3b		

Employer identification number

SCHEDULE A (Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

CERES INC

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Inspection

		1	instructions))	Yes	No	Yes	No	Yes	No			
N a s u p	(i) me of ported nization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizate col (i) list your gove docume	on in ed in rning nt?	(v) Did you not organizati col (i) of support	on in your t?	(vi) Is the organizati col (i) orga in the U	on in anized S?		A mo	r ii) unt of port
h			ied entity of a persor								<u> </u>	<u> </u>
		•	er of a person descrit led entity of a persor			nove?				11g(ii) 11g(iii)		-
	•		governing body of the er of a person describ		_	tion				11g(i) 11g(ii)		-
			rectly or indirectly co	•		-	ersons desc	ribed in (ii)	ı	11c/i\	Yes	No
_	followin	g persons?	,				•					
g		:hıs box vugust 17, 2	006, has the organi	zatıon accep	ted any gift	or contributio	n from any o	of the				ı
f	If the o	rganization	received a written de	etermination	from the IRS	that it is a T	ype I, Type	II or Type II	[I sup	porting c	rganız	ation,
		nan foundatı ı 509(a)(2)	on managers and oth	ner than one	or more publ	ıcly supporte	d organizati	ons describe	d ın se	ection 50	09(a)(:	1) or
еГ	- By che	cking this bo	ox, I certify that the	organızatıon	ıs not contro	olled directly	or indirectly	by one or mo	ore dis	qualifie	d perso	ons
	the box	•	y supported organiza bes the type of suppo b Type II	ortıng organı	zatıon and c		11e throug	h 11h	_	ion 509(Type II		
11 Г	- An orga	anızatıon org	anızed and operated	exclusively	for the bene	fit of, to perfo	orm the funct	tions of, or to	•			
10	-		anized and operated									
			oss investment incor anization after June				•		ax) rro	m busin	esses	
	•		ities related to its ex	•	-			• •				
9	_		t normally receives								_	SS
8 _	_	•	described in section			•	•					
			A)(vi) (Complete Pa	art II)								
7 /	An orga describ		it normally receives	a substantıa	I part of its s	support from a	a governmen	ntal unit or fro	m the	general	public	:
6	-		local government or	-								
_	section	170(b)(1)(A)(iv). (Complete Pa	art II)								
5 T	Anorga	anızatıon ope	erated for the benefit	of a college	or universit	y owned or op	perated by a	governmenta	al unit	describe	ed in	
		ospital's name, city, and state										
4			ı organızatıon operat	_					.)(A)(i	iii). Ente	rthe	
2 , 3 Г	_	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
1 2	-	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).										
_			e foundation becaus			-						
Part :			blic Charity Stat						struct	ions		
								22-305374	47			

Total

Support Schedule for Organizations Described in Sections 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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	under Part III. If the	e organization	rails to qualify u	nder the tests i	isted below, pie	ease co	mpiete i	Part III.)
	ection A. Public Support endar year (or fiscal year beginning	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2	010	(f) Total
1	In) ► Gifts, grants, contributions, and membership fees received (Do not include any "unusual				8,491,149		5,905,922	27,664,656
2	grants ") Tax revenues levied for the organization's benefit and either paid to or expended on its							
3	behalf The value of services or facilities							
4	furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3	3,594,37	6 3,449,833	6,223,376	8,491,149		i,905,922	27,664,656
	The portion of total contributions by each person (other than a			,,			, , , , , , , ,	
	governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column							8,132,302
6	(f) Public Support. Subtract line 5 from line 4							19,532,354
Se	ection B. Total Support	•	•		•			
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 20	010	(f) Total
7	A mounts from line 4	3,594,376	3,449,833	6,223,376	8,491,149	5	,905,922	27,664,656
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	15,429	30,457	29,319	23,166		27,696	126,067
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
11	Total support (Add lines 7 through 10)							27,790,723
12	Gross receipts from related activiti	es, etc (See ins	tructions)			12		4,693,370
13	First Five Years If the Form 990 is check this box and stop here	for the organizat	ion's first, second	, thırd, fourth, or fı	fth tax year as a !	501(c)(3	3) organız	ation,
Se	ection C. Computation of Pul	olic Support I	Percentage					
14	Public Support Percentage for 2010			11 column (f))		14		70 280 %
15	Public Support Percentage for 2009	9 Schedule A, Pa	irt II, line 14			15		69 220 %
	33 1/3% support test—2010. If the and stop here. The organization qua	alıfıes as a public	ly supported orga	nızatıon				►✓
	33 1/3% support test—2009. If the box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organization Part IV how the organization meets.	n qualifies as a p — 2010. If the org tion meets the "f	ublicly supported anization did not c facts and circumst	organization :heck a box on lin :ances" test, chec	e 13, 16a, or 16b k this box and st	o and line	e 14 Explain	▶ □
b	organization 10%-facts-and-circumstances test- 15 is 10% or more, and if the organ Explain in Part IV how the organiza	nızatıon meets th	e "facts and circu	mstances" test, c	heck this box and	stop he	ere.	
18	supported organization Private Foundation If the organizat instructions	ion did not check	a box on line 13,	16a, 16b, 17a or	17b, check this l	box and	see	►□

Schedule A (Form 990 or 990-EZ) 2010 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified **b** A mounts 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 c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning **(e)** 2010 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (f) Total ın) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b c Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16	Public support percentage from 2009 Schedule A, Part III, line 15	16	
S	ection D. Computation of Investment Income Percentage		
17	Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	
18	Investment income percentage from 2009 Schedule A , Part III, line 17	18	

19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	Supplemental Information. Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

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) (Expenses \$	999,369 inclu	ding grants of \$) (Revenue \$	1,299,172)
CORPORATE GOVER STRUCTURES THIS I WORKING WITH THES AND GOALS THE ULI IMPROVEMENTS REG	NANCE PRACTICES, WITH S ACCOMPLISHED BY CO SE COMPANIES TO IMPRO FIMATE GOAL OF THIS PR	I A FOCUS ON STR NVENING CUSTO OVE THEIR PUBLIC ROGRAM IS COMP MENTAL FOOTPRI	ONG MANAGEMENT MIZED STAKEHOLDE DISCLOSURE OF SU ANIES ACHIEVING M	EEN SUSTAINABILITY AND S SYSTEMS AND ACCOUNTAB R GROUPS FOR MEMBER CON JSTAINABILITY PERFORMAN EASUREABLE PERFORMANC PACTS THERE ARE OVER 80	ILITY MPANIES AND CE, STRATEGY, E
(Code) (Expenses \$	396,839 inclu	ding grants of\$) (Revenue \$	698,935)
CONSTITUENCIES N INTERESTED IN CER PROVIDES ATTENDE PERFORMANCE AND SUBSTANTIVE LONG	1EMBER AND PROSPECTI ES WORK THROUGH A CC ES AN OPPORTUNITY TO TO HEAR ABOUT SUCCES	VE COMPANIES A MBINATION OF P LEARN ABOUT BE SSES ATTAINED A R PRACTICES DU	ND INVESTORS, COA LENARY AND WORKS ST PRACTICES IN SL ND CHALLENGES FAC RING THE CONFEREN	PRAWS REPRESENTATIVES FILITION MEMBERS, AND OTH HOP SESSIONS, THE CONFEUSTAINABILITY REPORTING CED BY COMPANIES IN MAKINCE INVESTOR MEMBERS MED RPORATE BEHAVIOR	ER PARTIES RENCE AND ING

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DLN: 93493206004241

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

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

ınternai	Revenue Service				Inspection
		es," to Form 990, Part IV, Line 3, o	r Form 990-EZ, Pa	art V, line 46 (Political Car	npaign Activities),
• Se	ction 501(c)(3) organizations Co ction 501(c) (other than section ction 527 organizations Complet	omplete Parts I-A and B Do not complete 501(c)(3)) organizations Complete Pa e Part I-A only es," to Form 990, Part IV, Line 4, o	rts I-A and C below	·	Activities), then
• Se	ction 501(c)(3) organizations tha	at have filed Form 5768 (election unde at have NOT filed Form 5768 (election	r section 501(h)) C	omplete Part II-A Do not cor	mplete Part II-B
	-	es," to Form 990, Part IV, Line 5 (P	roxy Tax) or Forr	n 990-EZ, Part V, line 35a	(Proxy Tax), then
	ction 501(c)(4), (5), or (6) organ	ızatıons Complete Part III		Te	
	me of the organization EES INC			22-3053747	tification number
Part	t I-A Complete if the or	ganization is exempt under	section 501(c		organization.
1	Provide a description of the oi	ganızatıon's dırect and ındırect polit	ıcal campaıgn actı	vities in Part IV	
2	Political expenditures			.	\$
3	V olunteer hours				
		ganization is exempt under		:)(3).	
1		e tax incurred by the organization ur		•	\$
2		e tax incurred by organization manag		4955 ►	\$
3		section 4955 tax, did it file Form 47	20 for this year?		☐ Yes ☐ No
4a	Was a correction made?				☐ Yes ☐ No
ь	If "Yes," describe in Part IV				
	-	ganization is exempt under			<u>(c)(3).</u>
1		ended by the filing organization for s			\$
2	Enter the amount of the filing exempt funtion activities	organization's funds contributed to o	ther organizations	for section 527	\$
3	Total exempt function expend	itures Add lines 1 and 2 Enter here	and on Form 1120	O-POL, line 17b	\$
4	Did the filing organization file	Form 1120-POL for this year?			┌ Yes ┌ No
5	organization made payments amount of political contributio	nd employer identification number (E For each organization listed, enter th ns received that were promptly and o political action committee (PAC) If	ne amount paid fro directly delivered t	m the filing organization's f to a separate political orga	unds Also enter the nization, such as a
	(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 organization If none, 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)	and fi	led Form 5768	(election
4	Check If the filing organization belongs to				
<u>B</u>	Check If the filing organization checked bo	x A and "limited control" provisions apply			
	Limits on Lobbying E (The term "expenditures" means a			(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)		0	
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)		11,683	
c	Total lobbying expenditures (add lines 1a and 1	b)		11,683	
d	Other exempt purpose expenditures			6,562,218	
e	Total exempt purpose expenditures (add lines 1	c and 1d)		6,573,901	
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both		478,695	
	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)		119,674	
h	Subtract line 1g from line 1a If zero or less, ent	er -0-		0	
i	Subtract line 1ffrom line 1c 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 Expenditures During 4-Year Averaging Period									
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total				
2a	Lobbying non-taxable amount	337,852	375,959	467,829	478,695	1,660,335				
b	Lobbying ceiling amount (150% of line 2a, column(e))					2,490,503				
c	Total lobbying expenditures		20,000	95,158	11,683	126,841				
_d	Grassroots non-taxable amount	84,463	93,990	116,957	119,674	415,084				
е 	Grassroots ceiling amount (150% of line 2d, column (e))					622,626				
f	Grassroots lobbying expenditures	0	0	0	0					

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

		(a)			(b)		
		Yes	No		\ moun	nt	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of						
а	Volunteers?			_			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			-			
c	Media advertisements?						
d	Mailings to members, legislators, or the public?						
е	Publications, or published or broadcast statements?						
f	Grants to other organizations for lobbying purposes?						
g	Direct contact with legislators, their staffs, government officials, or a legislative body?						
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
i	Other activities? If "Yes," describe in Part IV						
j	Total lines 1c through 1i						
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
b	If "Yes," enter the amount of any tax incurred under section 4912						
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912						
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
	** THE A. Commisse if the every instinction is every medical exception FA4/s\/4\ exception [n	
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6).	501(c)(5), (or se			
	501(c)(6).	501(c)(5), « 		Yes	No	
1	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members?	501(c)(5), (1			
1 2	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?	501(c)(5), (1 2			
1 2 3	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year?			1 2 3	Yes	No	
1 2 3	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?	501(c)(5), (1 2 3	Yes	No	
1 2 3	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I	501(c)(5), (1 2 3	Yes	No	
1 2 3 Par	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".	501(c II-A,)(5), (1 2 3	Yes	No	
1 2 3 Par	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political	501(c II-A,)(5), (1 2 3	Yes	No	
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	501(c II-A,)(5), (1 2 3	Yes	No	
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year	501(c II-A,)(5), (1 2 3	Yes	No	
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	501(c II-A, 1 2a 2b)(5), (1 2 3	Yes	No	
1 2 3 Par 1 2 a b	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	501(c II-A, 1 2a 2b 2c)(5), (1 2 3	Yes	No	
1 2 3 Par 1 2 a b c	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TIII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	2a 2b 2c 3)(5), (1 2 3	Yes	No	

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

Ident if ier Return Reference | Explanation efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493206004241

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

	me of the organization LES INC		Employer identification number					
CEF	ES INC		22-3	3053747				
Pa	rt I Organizations Maintaining Donor A				Complet	te if the		
	organization answered "Yes" to Form 9			L) Formula and a				
	Total growth and of con-	(a) Donor advised funds	(b) Funds and of	ner accou	nts ———		
	Total number at end of year							
	Aggregate contributions to (during year)							
•	Aggregate grants from (during year)							
•	Aggregate value at end of year							
•	Did the organization inform all donors and donor adv funds are the organization's property, subject to the	-	or advi	sed	☐ Yes	┌ No		
,	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the be				☐ Yes	□ No		
Pa I	conferring impermissible private benefit rt III Conservation Easements. Complete	out the organization answered "Yes" to	Form	1 990 Part IV	•			
L 2	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreated Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual easement on the last day of the tax year	organization (check all that apply) tion or pleasure) Preservation of an Preservation of a c	histori ertified	cally important d historic struct	ly land are	a		
	easement on the last day of the tax year	Г		Held at the	End of the	Year		
а	Total number of conservation easements	<u> </u>	2a					
ь	Total acreage restricted by conservation easement	s	2b					
С	Number of conservation easements on a certified hi	storic structure included in (a)	2c					
d	Number of conservation easements included in (c) a	acquired after 8/17/06	2d					
3	Number of conservation easements modified, transf	ے ferred, released, extinguished, or terminated	d by th	e organization (luring			
	the taxable year 🛌	, .	·	-	_			
ı.	Number of states where property subject to conserv	vation easement is located .						
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds	ng the periodic monitoring, inspection, hand	— ling of	violations, and	┌ Yes	┌ No		
5	Staff and volunteer hours devoted to monitoring, ins	pecting and enforcing conservation easeme	ents du	uring the year 🕨				
7	A mount of expenses incurred in monitoring, inspect	ing, and enforcing conservation easements	durıng	; the year ► \$ _				
3	Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of sect	ion		Г Yes	∏ No		
•	In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	the footnote to the organization's financial	•	•				
ar	Organizations Maintaining Collection Complete if the organization answered	ons of Art, Historical Treasures, o "Yes" to Form 990, Part IV, line 8.	or Oth	ner Similar <i>I</i>	\ssets.			
la	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fi	d for public exhibition, education or researc	h ın fuı			- e,		
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these item	public exhibition, education, or research in			•			
	(i) Revenues included in Form 990, Part VIII, line	1		> \$				
	(ii) Assets included in Form 990, Part X			► \$				
2	If the organization received or held works of art, his following amounts required to be reported under SFA		r fınanı					
а	Revenues included in Form 990, Part VIII, line 1			► \$				

b Assets included in Form 990, Part X

	Organizations Maintaining Co	<u>llections of Art</u>	t, His	<u>tori</u>	<u>cal Tr</u>	<u>easu</u>	res, or O	the	r Similar Ass	ets (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	e foll	owing t	hat are	a significa	nt us	se of its collectio	n	
а	Public exhibition		d	Γ	Loan	orexch	ange progra	ams			
b	Scholarly research		e	Γ	Other						
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIV	ollections and expla	ıın hov	v the	/ furthe	r the o	rganızatıon	's ex	empt purpose ın		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t									Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						answered	Y" t	es" to Form 99	0,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	ediary	for c	ontribu	tions o	r other ass	ets n		Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ing ta	able		Г		A		
_	D						-	1.	A mo	unt	
c d	Additions during the year						—	1c 1d			
e	Additions during the year Distributions during the year						—	1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990 Part X lin	217 م				<u>L</u>			Yes	
	If "Yes," explain the arrangement in Part XIV		C 2 1 ·						,		, 110
	t V Endowment Funds. Complete		n ans	were	d "Ye	s" to F	orm 990	Pari	t IV line 10		
	Endownient i anabi compiete i	(a)Current Year		Prior \			Years Back			e)Four Y	ears 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 a	as								
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment 🕨										
c	Term endowment ▶										
3a	Are there endowment funds not in the posses	ssion of the organiz	atıon 1	thata	re held	and ac	dmınıstered	for	the		
	organization by								2-43	Yes	No
	(i) unrelated organizations			•				•	3a(i)		
b	(ii) related organizations				 ulo D2				3a(11)	<u> </u>	<u> </u>
4	Describe in Part XIV the intended uses of th	•				• •		•			<u> </u>
	t VI Investments—Land, Buildings					90. Pa	rt X. line	10.			
	<u> </u>	g and Equipme) Cost o		(b)Cost or o		(c) Accumulated		
	Description of investment				sis (inves		basis (othe		depreciation	(d) B	ook value
1a	_and										
b	Buildings										
c	_easehold improvements		•				81	,075	30,256		50,819
d	Equipment		•				475	,617	264,546		211,071
	7 + h = =							- 1		i	
	Other	<u> </u>	•								

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
(3)Other (A) CERTIFICATES OF DEPOSIT	2,699,146	F
(A) CERTIFICATES OF DEPOSIT	2,099,140	Г
	+	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	2,699,146	
Part VIII Investments—Program Related. Se	_//-	3
		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	•	
Part IX Other Assets. See Form 990, Part X, II	ne 15.	
(a) Descri		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line		
Part X Other Liabilities. See Form 990, Part 2	X, line 25.	
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)		

additional information

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	7,096,274
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	7,196,013
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-99,739
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	0
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-99,739
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	7,134,532
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
Ь	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	38,258
3	Subtract line 2e from line 1	3	7,096,274
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	7,096,274
Par	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per R	leturn
1	Total expenses and losses per audited financial statements	₁	7,234,271
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	38,258
3	Subtract line 2e from line 1	3	7,196,013
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
ь	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	7,196,013
Pai	t XIV Supplemental Information		· · ·
	which the mark to accord the decomposition of the Doublit Line 2.5 and 0. Doublit Line 1 and 4. Doublit Line 2.5	13.4 - 1.	11 121.

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

Ident if ier Return Reference **Explanation** DESCRIPTION OF UNCERTAIN PART X CERES ACCOUNTS FOR THE EFFECT OF ANY UNCERTAIN TAX POSITIONS UNDER FIN 48 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 THOSE 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 CERES HAS IDENTIFIED ITS TAX STATUS AS A TAX EXEMPT ENTITY AS ITS ONLY SIGNIFICANT TAX POSITION AND HAS DETERMINED THAT SUCH TAX POSITION DOES NOT RESULT IN AN UNCERTAINTY REQUIRING RECOGNITION CERES IS NOT CURRENTLY UNDER EXAMINATION BY ANY TAXING JURISDICTION ITS FEDERAL AND STATE INCOME TAX RETURNS ARE GENERALLY OPEN FOR EXAMINATION FOR THE PAST THREE YEARS FOLLOWING THE DATE OF FILING THE RELATED RETURN

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

DLN: 93493206004241

OMB No 1545-0047

2010

SCHEDULE F (Form 990)

Department of the Treasury

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

Statement of Activities Outside the United States

Open to Public

Internal Revenue Service Name of the organization

Employer identification nu

	ES INC				Employer ident	ii ication number
					22-3053747	
Pa	"Yes" to Form 990, Pa			he United States. (Complete if the organiz	ation answered
1	For grantmakers. Does the assistance, the grantees' el the grants or assistance?.	organization n igibility for the	naıntaın record grants or assı	stance, and the selec	tion criteria used to awa	
2	For grant makers. Describe in P United States	art V the organiz	zatıon's procedu	res for monitoring the us	se of grant funds outside th	ne
3	Activites per Region (Use Part	: V ıf addıtıonal s	pace is needed)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e.g.,	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	NORTH AMERICA	1	1	PROGRAM SERVICES	AS THE VICE PRESIDENT OF CORPORATE PROGRAMS FOR CERES, ANDREA MOFFAT WORKS WITH A RANGE OF 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 ISSUES	67,883
		1				

0

3a Sub-total

to Part I

 $\boldsymbol{b}\,$ Total from continuation sheets

67,883

0

Part	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete If the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ▶ ☐ Use Part V if additional space is needed.										
	a) Name of rganization	(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 nun tax-exempt by	hber of recipie the IRS, or fo	ent organizations lis or which the grante	ted above that are i e or counsel has pro	ecognized as chari ovided a section 50:	ties by the foreign of 1(c)(3) equivalency	country, recognized letter	 as . ▶			
3	Enter total nun	nber of other o	organizations or en	tities					(Form 990) 2010		

Part III	Grants and Ot	her Assistance to	Individuals	Outside the Unit	ed States. Complete	ıf the organızatıon a	nswered "Yes" to Form 9	990, Part IV, line 16.
	Use Part V if ad	ditional space is ne-	eded.					

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash	(g) Description of non-cash	(h) Method of valuation
					assistance	assistance	(book, FMV, appraisal, other)
			<u> </u>			1	
			<u>. </u>		!		
			<u>. </u>				
			<u> </u>		!		
			<u> </u>		!		
			<u> </u>		!		
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			1		,		

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	<u>\</u>	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	ᅜ	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	ᅜ	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	굣	Νo

Schedule F (Form 990) 2010

information. Identifier	ReturnReference	Explanation
14011111101	T. G.	Explanation

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DLN: 93493206004241

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Compensation Information

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

CERES INC 22-3053747 **Questions Regarding Compensation** Yes Νo Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No." complete Part III to explain **1**b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Written employment contract Compensation survey or study Independent compensation consultant Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment from the organization or a related organization? 4a Νo 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo Participate in, or receive payment from, an equity-based compensation arrangement? 4c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? 5a Νo 5b Any related organization? Νo If "Yes," to line 5a or 5b, describe in Part III For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? Νo Any related organization? 6Ь Νo If "Yes," to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Yes Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Νo If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53 4958-6(c)?

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

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

Note. The sum of columns (B)(1)-(111) 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	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) MINDY LUBBER	(1) (11)	171,480 0	10,000 0		. ,	16,603 0	205,429 0	0
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

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

Ident if ier	Return Reference	Explanation
	7	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

Schedule J (Form 990) 2010

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As Filed Data -

DLN: 93493206004241

Employer identification number

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WORLDWIDE

SCHEDULE O (Form 990 or 990-EZ)

Name of the organization

Department of the Treasury
Internal Revenue Service

CERES INC

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010

Open to Public Inspection

22-3053747 Identifier **Explanation** Return Reference FORM 990. **ORGANIZATION** CERES' MISSION IS TO INTEGRATE SUSTAINABILITY INTO CAPITAL MARKETS FOR THE HEALTH OF THE MISSION PART III, PLANET AND ITS PEOPLE CERES IS KNOWN FOR ITS UNIQUE ABILITY TO BRING DIVERSE GROUPS **STATEMENT** LINE 1 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 MOBILIZES ENGAGEMENT OF INVESTORS IN THIS EFFORT THROUGH THE INVESTOR NETWORK ON CLIMATE RISK IN 2010, CERES LAUNCHED THE 21ST CENTURY CORPORATION THE CERES ROADMAP FOR SUSTAINABILITY, A PROGRAM THAT LAYS OUT 20 KEY EXPECTATIONS RELATED TO GOVERNANCE, STAKEHOLDER ENGAGEMENT, DISCLOSURE AND

PERFORMANCE IN 1995 CERES HELPED FOUND THE GLOBAL REPORTING INITIATIVE, NOW THE DE-FACTO STANDARD FOR REPORTING ENVIRONMENTAL AND SOCIAL PERFORMANCE OF 1,500 COMPANIES

ldentifier	Return Reference	Explanation
DECREASE IN CONTRIBUTIONS AND GRANTS	FORM 990, PART I, LINE 8 CONTRIBUTIONS AND GRANTS	CERES REPORTS INCOME ON THE 990 ACCORDING TO GENERALLY ACCEPTED ACCOUNTING PRINCIPLES, WHICH REQUIRE GRANTS AND GIFTS BE REPORTED IN INCOME IN THE YEAR RECEIVED, REGARDLESS OF WHETHER RESTRICTIONS APPLY THE \$7,103,785 REPORTED AS INCOME IN THE PRIOR YEAR WAS IN PART A RESULT OF RECEIVING SEVERAL LARGE MULTIPLE YEAR GRANTS, MUCH OF WHICH IS BEING RELEASED (EARNED) IN SUBSEQUENT YEARS

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		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

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		OUR ACCOUNTING AND AUDITING FIRM SENDS THE ORGANIZATION A QUESTIONNAIRE TO FILL OUT FOR PREPARING THE FORM 990 THIS QUESTIONNAIRE IS PREPARED AND REVIEWED BY THE FINANCE TEAM THEN, OUR ACCOUNTING AND 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 MEETS WITH THE AUDITORS TO REVIEW AND ACCEPT THE 990 AFTERWARDS THE 990 IS FILED

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION HAS A WRITTEN CONFLICT OF INTEREST POLICY AS PART OF THE BOARD TRAINING, WHEN JOINING THE CERES BOARD, THE NEW BOARD MEMBER IS PROVIDED WITH THE CERES BOARD POLICIES WHICH 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 MAY EXIST WITH THE ORGANIZATION ONCE A YEAR, THE BOARD MEMBERS ARE PROVIDED THIS CIS FORM TO FILL OUT ALSO, AS PART OF THE GOVERNANCE COMPLIANCE THE BOARD MEMBERS ARE REQUIRED TO INFORM TO ANY OF THE BOARD CO-CHAIRS OF CERES OF ANY MATERIAL CHANGE THAT DEVELOPS DURING THE YEAR IN THE INFORMATION CONTAINED IN THE FOREGOING STATEMENT

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15A	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 (SALARY SURVEY STUDIES)

Identifier	Return Reference	Explanation	
	FORM 990, PART VI, SECTION C, LINE 19	THE FORM 990 AND ANNUAL REPORT ARE AVAILABLE AT HTTP //WWW CERES ORG/ABOUT-US/FINANCIALS 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 WEBSITE	

ldentifier	Return Reference	Explanation
DOES THE ORGANIZATION HAVE A COMMITTEE THAT ASSUMES OVERSIGHT OF AUDIT?	FORM 990, PART XI, LINE 2C FINANCIAL STATEMENTS & REPORTING	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