

<div>Form 5500</div> <div>Department of the Treasury Internal Revenue Service</div> <div>Department of Labor Employee Benefits Security Administration</div> <div>Pension Benefit Guaranty Corporation</div>	<div>Annual Return/Report of Employee Benefit Plan</div> <div>This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), and 6058(a) of the Internal Revenue Code (the Code).</div> <div>▶ Complete all entries in accordance with the instructions to the Form 5500.</div>	<div>OMB Nos. 1210-0110 1210-0089</div> <div>2009</div> <div>This Form is Open to Public Inspection</div>
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Part I	Annual Report Identification Information
For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009	
A	This return/report is for: <div><div>☐ a multiemployer plan;</div><div>☒ a single-employer plan;</div><div>☐ a multiple-employer plan; or</div><div>☐ a DFE (specify) ____</div></div>
B	This return/report is: <div><div>☐ the first return/report;</div><div>☐ the final return/report;</div><div>☐ an amended return/report;</div><div>☐ a short plan year return/report (less than 12 months).</div></div>
C	If the plan is a collectively-bargained plan, check here. ▶ ☐
D	Check box if filing under: <div><div>☐ Form 5558;</div><div>☐ automatic extension;</div><div>☐ the DFVC program;</div><div>☐ special extension (enter description)</div></div>

Part II	Basic Plan Information—enter all requested information	
1a	Name of plan NETEZZA CORPORAION 401(K) PLAN	1b Three-digit plan number (PN) ▶ 001
		1c Effective date of plan 01/01/2001
2a	Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) NETEZZA CORPORATION 200 CROSSING BLVD. FRAMINGHAM, MA 01702 SUITE 500 FRAMINGHAM, MA 01702	2b Employer Identification Number (EIN) 04-3527320 2c Sponsor's telephone number 508-665-5719 2d Business code (see instructions) 541512

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	07/29/2010	PATRICK J. SCANNELL
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") NETEZZA CORPORATION 200 CROSSING BLVD. FRAMINGHAM, MA 01702	3b Administrator's EIN 04-3527320 3c Administrator's telephone number 508-665-5719
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4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
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5 Total number of participants at the beginning of the plan year	5	334
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6 Number of participants as of the end of the plan year (welfare plans complete only lines 6a , 6b , 6c , and 6d).		
a Active participants.....	6a	349
b Retired or separated participants receiving benefits.....	6b	0
c Other retired or separated participants entitled to future benefits.....	6c	38
d Subtotal. Add lines 6a , 6b , and 6c	6d	387
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	0
f Total. Add lines 6d and 6e	6f	387
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	280
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	18

7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	
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8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
 2E 2F 2G 2J 2K 3E

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:

9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- (1) ☒ **R** (Retirement Plan Information)
 (2) ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
 (3) ☐ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

- (1) ☒ **H** (Financial Information)
 (2) ☐ **I** (Financial Information – Small Plan)
 (3) ☐ **A** (Insurance Information)
 (4) ☒ **C** (Service Provider Information)
 (5) ☒ **D** (DFE/Participating Plan Information)
 (6) ☐ **G** (Financial Transaction Schedules)

<div>SCHEDULE C</div> <div>(Form 5500)</div> <div>Department of the Treasury Internal Revenue Service</div> <div>Department of Labor Employee Benefits Security Administration</div> <div>Pension Benefit Guaranty Corporation</div>	<div>Service Provider Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>▶ File as an attachment to Form 5500.</div>	OMB No. 1210-0110
		2009
		This Form is Open to Public Inspection.

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

<div>A</div> Name of plan NETEZZA CORPORTAION 401(K) PLAN	<div>B</div> Three-digit plan number (PN) ▶ 001
<div>C</div> Plan sponsor's name as shown on line 2a of Form 5500 NETEZZA CORPORATION	<div>D</div> Employer Identification Number (EIN) 04-3527320

Part I

Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1

Information on Persons Receiving Only Eligible Indirect Compensation

a

Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).....

☒ Yes

☐ No

b

If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b)	Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
BANK OF AMERICA, N.A.	
94-1687665	

(b)	Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation
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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

MERRILL LYNCH, PIERCE, FENNER AND S

13-5674085

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 52 56 59 60 62 63 72	RECORDKEEPER	1305	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN;
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN;
c Position:	
d Address:	e Telephone:

Explanation:

a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
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103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110
		2009
		This Form is Open to Public Inspection

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009		
A Name of plan NETEZZA CORPORTAION 401(K) PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 NETEZZA CORPORATION	D Employer Identification Number (EIN) 04-3527320	

Part I Asset and Liability Statement			
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		5
(2) U.S. Government securities.....	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other.....	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	158870	170853
(9) Value of interest in common/collective trusts.....	1c(9)	455752	1095495
(10) Value of interest in pooled separate accounts.....	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	7659846	13909657
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	8274468	15176010

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j	50872	
k Total liabilities (add all amounts in lines 1g through 1j)	1k	50872	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	8223596	15176010
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Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income**a Contributions:**

		(a) Amount	(b) Total
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)		
(B) Participants	2a(1)(B)	3096627	
(C) Others (including rollovers)	2a(1)(C)	351468	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		3448095

b Earnings on investments:**(1) Interest:**

(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	7	
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	7896	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		7903

(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	192485	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		192485

(3) Rents	2b(3)		
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(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		2441
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		3432967
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		7083891

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	658063	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		658063
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		41228
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	1305	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		1305
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		700596

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		6383295
l Transfers of assets:			
(1) To this plan.....	2l(1)		569119
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☐ Unqualified (2) ☐ Qualified (3) ☒ Disclaimer (4) ☐ Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? ☒ Yes ☐ No

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: YOSHIDA & SOKOLSKI, P.C.

(2) EIN: 04-3014517

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

- 4** CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete 4j and 4l. MTIAs also do not complete 4l.

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....		X	
e Was this plan covered by a fidelity bond?.....	X		1000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

- 5a** Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?
If yes, enter the amount of any plan assets that reverted to the employer this year ☐ Yes ☒ No Amount:

- 5b** If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)

5b(2) EIN(s)

5b(3) PN(s)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2009
		This Form is Open to Public Inspection.

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

A Name of plan <u>NETEZZA CORPORTAION 401(K) PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>NETEZZA CORPORATION</u>	D Employer Identification Number (EIN) <u>04-3527320</u>

Part I	Distributions
---------------	----------------------

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	<u>0</u>
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>22-3513863</u> <u>94-1687665</u> Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3	

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part)
----------------	--

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.....	☐ Yes	☐ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year	6a		
b Enter the amount contributed by the employer to the plan for this plan year	6b		
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c		
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes	☐ No	☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?.....	☐ Yes	☐ No	☐ N/A

Part III	Amendments
-----------------	-------------------

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box(es). If no, check the "No" box.....	☐ Increase	☐ Decrease	☐ Both	☐ No
--	-----------------------------------	-----------------------------------	-------------------------------	-----------------------------

Part IV	ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
----------------	---

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?.....	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

Schedule R (Form 5500) 2009
v.092308.1

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

- 14** Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	14a	
b The plan year immediately preceding the current plan year	14b	
c The second preceding plan year	14c	

- 15** Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	15a	
b The corresponding number for the second preceding plan year	15b	

- 16** Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	16a	
b If item 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	16b	

- 17** If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

- 18** If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

- 19** If the total number of participants is 1,000 or more, complete items (a) through (c)

- a** Enter the percentage of plan assets held as:

Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

- b** Provide the average duration of the combined investment-grade and high-yield debt:

☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

- c** What duration measure was used to calculate item 19(b)?

☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

**NETEZZA CORPORATION
401(k) PLAN**

FINANCIAL STATEMENTS

**FOR THE YEARS ENDED
DECEMBER 31, 2009 AND 2008**

NETEZZA CORPORATION 401(k) PLAN

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Yoshida & Sokolski, P.C.

CERTIFIED PUBLIC ACCOUNTANTS

INDEPENDENT AUDITORS' REPORT

To the Netezza Corporation 401(k) Plan Committee
Marlboro, Massachusetts

We were engaged to audit the financial statements of Netezza Corporation 401(k) Plan (the "Plan") as of December 31, 2009 and 2008, and for the years then ended, and the supplemental schedules as of and for the years ended December 31, 2009 as listed in the accompanying table of contents. These financial statements and supplemental schedules are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employment Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Bank of America, N.A., the Trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedules. We have been informed by the Plan administrator that the Trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained certifications from the Trustees as of and for the years ended December 31, 2009 and 2008, that the information provided to the Plan administrator by the Trustees is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedules taken as a whole. The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified by the Trustees, have been audited by us in accordance with generally accepted auditing standards accepted in the United States of America, and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

A handwritten signature in black ink, reading 'Yoshida & Sokolski, P.C.', with a large, stylized initial 'Y'.

July 21, 2010

NETEZZA CORPORATION 401(k) PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR PLAN BENEFITS

DECEMBER 31, 2009 AND 2008

	<u>2009</u>	<u>2008</u>
ASSETS		
INVESTMENTS AT FAIR VALUE		
Investment securities	\$ 13,909,662	\$ 7,659,846
Investment common collective trust	1,176,686	529,253
Participant loans receivable	<u>170,853</u>	<u>158,870</u>
TOTAL INVESTMENTS AT FAIR VALUE	15,257,201	8,347,969
Adjustments from fair value to contract value for fully benefit responsive investment contracts	<u>(81,191)</u>	<u>(73,501)</u>
TOTAL INVESTMENTS	15,176,010	8,274,468
RECEIVABLES		
Employee contributions receivable	<u>-</u>	<u>48,800</u>
TOTAL ASSETS	15,176,010	8,323,268
LIABILITIES		
Due to Merrill Lynch	<u>-</u>	<u>50,872</u>
NET ASSETS AVAILABLE FOR PLAN BENEFITS	<u><u>\$ 15,176,010</u></u>	<u><u>\$ 8,272,396</u></u>

NETEZZA CORPORATION 401(k) PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR PLAN BENEFITS

FOR THE YEARS ENDED DECEMBER 31, 2009 AND 2008

	<u>2009</u>	<u>2008</u>
CONTRIBUTIONS:		
Participant contributions	\$ 3,047,827	\$ 2,598,604
Rollover contributions	920,587	856,683
TOTAL CONTRIBUTIONS	3,968,414	3,455,287
ADDITIONS TO NET ASSETS ATTRIBUTED TO:		
Interest and dividend income	210,519	303,757
Net unrealized gains of investment securities	3,118,355	-
Net realized gains of investment securities	314,612	-
TOTAL ADDITIONS	3,643,486	303,757
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Net unrealized (losses) of Investment common collective trust	(7,690)	(73,501)
Net unrealized (losses) of investment securities	-	(4,310,730)
Net realized (losses) of investment securities	-	(156,977)
Administrative expenses	(1,305)	(850)
Distributions to participants	(699,291)	(594,654)
TOTAL DEDUCTIONS	(708,286)	(5,136,712)
NET INCREASE (DECREASE) IN NET ASSETS	6,903,614	(1,377,668)
NET ASSETS AVAILABLE FOR PLAN BENEFITS - BEGINNING OF YEAR	8,272,396	9,650,064
NET ASSETS AVAILABLE FOR PLAN BENEFITS - END OF YEAR	<u>\$ 15,176,010</u>	<u>\$ 8,272,396</u>

NETEZZA CORPORATION 401(K) PLAN

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEARS ENDED DECEMBER 31, 2009 AND 2008

NOTE 1 DESCRIPTION OF THE PLAN

The following description of the Netezza Corporation 401(k) Plan (the "Plan") provides only general information. Participants should refer to the plan agreement or summary plan description for a more complete description of the Plan's provisions.

General

The Plan, a defined contribution plan with a Section 401(k) cash or deferred feature, of Netezza Corporation (the "Company") was established effective January 1, 2001 to provide a systematic savings plan and retirement benefits for eligible employees ("participants"). The Plan is administered by Netezza Corporation, which is responsible for the Plan's compliance with the reporting and disclosure requirements of the Employee Retirement Income Security Act of 1974 (ERISA). Employees become eligible for participation in the Plan upon attaining age 21 and may enter the Plan immediately upon hire.

Recently Adopted Accounting Policies

The Plan has adopted certain provisions of ASC 820 which were issued during April 2009. This issuance provides additional guidance for estimating fair value when the volume and level of activity for the asset or liability have significantly decreased in relation to normal market activity for the asset or liability, as well as guidance on identifying circumstances that indicate a transaction is not orderly. ASC 820 also requires annual disclosure of the inputs and valuation techniques used to measure fair value and a discussion of changes in valuation techniques and related inputs, if any during the period, and definitions of each major category of equity and debt securities, as described in ASC 320, *Investments - Debt and Equity Securities*. The Plan adopted the aforementioned aspects of ASC 820 on December 31, 2009; such adoption did not have a material impact on the Plan's financial statements.

In May 2009, the Plan adopted FASB ASC 855, Subsequent Events, that established requirements for the accounting and disclosure of events that occur after the balance sheet date, but before the financial statements are issued or available to be issued. The adoption of this guidance had no impact on the Plan's financial statements.

In June 2009, the FASB issued FASB ASC 105 (ASC 105) *Generally Accepted Accounting Principles*. This guidance establishes the FASB ASC as the Source of authoritative accounting principles recognized by the FASB to be applied by nongovernmental entities in the preparation of financial statements in conformity with GAAP. ASC 105 is effective for financial statements issued for annual periods ending after September 15, 2009. The Plan has adopted ASC 105 on December 31, 2009 and has updated its referencing for all accounting standards in these financial statements.

NETEZZA CORPORATION 401(K) PLAN

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEARS ENDED DECEMBER 31, 2009 AND 2008

NOTE 1 DESCRIPTION OF THE PLAN (CONTINUED)

Recently Adopted Accounting Policies (Continued)

In September 2009, The FASB issued Accounting Standards Update No. 2009-12 (ASU 2009-12), *Fair Value Measurements and Disclosures: Investments In Certain Entities That Calculate Net Asset per Share* (or its equivalent) which amended ASC 820-10 *Fair Value Measurements and Disclosures-Overall*. ASU 2009-12 expands the required disclosures for certain investments with a reported net asset value. ASU 2009-12 permits, as a practical expedient, an entity holding investments in certain entities that calculate net asset value per share or its equivalent for which the fair value is not readily determinable, to measure the fair value of such investments on the basis of that net asset value per share of its equivalent without adjustment. The ASU requires enhanced disclosures about the nature and risks of investments with its scope. Such disclosures include the nature of any restrictions on an investor's ability to redeem its investments at the measurement date, any unfunded commitments, and the investment strategies of the investee. The Plan has adopted ASU 2009-12 on a prospective basis for the year ended December 31, 2009.

Recent Accounting Pronouncements

In January 2010, the FASB issued ASU No. 2010-06 (ASU 2010-06) *Improving Disclosures About Fair Value Measurements* which provides amendments to ASC 820 that will provide more robust disclosures regarding the different classes of assets measured at fair value, valuation techniques and inputs used, transfers of assets and liabilities between the levels of the fair value hierarchy, and activity in the level 3 measurements. Certain new disclosures and clarifications of existing disclosures prescribed by ASU 2010-06 are effective for annual reporting periods beginning after December 31, 2009. Disclosures regarding purchases, sales, issuances and settlements in the roll-forward of activities in level 3 are effective for fiscal years beginning after December 15, 2010. The Plan has adopted this guidance on January 1, 2010 and will include the new disclosures prospectively, as required.

Investment Options

In 2009 eligible employees directed contributions in any of the following investment funds, which are managed by Bank of America, N.A. (the "Trustee"):

Merrill Lynch Retirement Preservation Trust	Synthetic ML 1-5 Year US Corporate Government Index
JPMorgan Core Bond Fund A	Lipper Bond/Fixed Income
Jennison Natural Resources FD	Lipper Global Natural Resources Funds Average
Blackrock HI Sc Opp A	Lipper Health/Biotechnology Funds Average
Van Kampen Small Cap Growth A	Lipper Small-Cap Growth Funds Average
Van Kampen Small Cap Growth GM	Lipper Small-Cap Growth Funds Average
Fidelity Adv Lev Comp Stck T	Lipper Mid-Cap Value Funds Average
Fidelity Adv Lev Comp Sk T Gm	Lipper Mid-Cap Value Funds Average

NETEZZA CORPORATION 401(K) PLAN

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEARS ENDED DECEMBER 31, 2009 AND 2008

NOTE 1 DESCRIPTION OF THE PLAN (CONTINUED)

Investment Options (Continued)

American Cap World Gr & Inc R3	Lipper Global Multi-Cap Value Average
American Growth Fd of Amer R3	Lipper Multi-Cap Growth Funds Average
American Grth Fd of Amer R3 Gm	Lipper Multi-Cap Growth Funds Average
Jennison Mid Cap Growth FD	Lipper Mid-Cap Value Funds Average
Jennison Mid Cap Growth FD GM	Lipper Mid-Cap Value Funds Average
ING Global Real Estate Fd Cl A	Lipper Global Real Estate Funds Average
AIM Trimark Small Co Fd Cl A	Lipper Small-Cap Core Funds Average
AIM Trimark Small Co Fd A Gm	Lipper Small-Cap Core Funds Average
American Cent Gov BD FD ADV CL	Lipper Bond/Fixed Income
American Cent Gov BD FD ADV GM	Lipper Bond/Fixed Income
Henderson Gbl Cl A	Lipper Global Science/Technology Funds Average
Janus Adviser Forty Fd A	Lipper Large-Cap Growth Funds Average
Janus Overseas FD CL A	Lipper Equity/Stock
Janus Overseas FD CL A GM	Lipper Equity/Stock
American Funds 2010 Target	Lipper Mixed -Asset Target 2010 Funds Average
American Funds 2020 Target	Lipper Mixed -Asset Target 2020 Funds Average
American Funds 2030 Target	Lipper Mixed -Asset Target 2030 Funds Average
American Funds 2040 Target	Lipper Mixed -Asset Target 2040 Funds Average
Thornburg International	Lipper International Large-Cap Growth Average
Thornburg International GM	Lipper International Large-Cap Growth Average
Blackrock Eq Dividend A	Lipper Equity Income Funds Average
Blackrock Eq Dividend A GM	Lipper Equity Income Funds Average
Loomis Sayles Strategic Incm A	Lipper Multi-Sector Income Funds Average
Loomis Sayles Strategic Incm A Gm	Lipper Multi-Sector Income Funds Average
Oppenheimer Intl Bd Fd Cl A	Lipper International Income Funds Average
Blackrock S&P 500 Index I	Lipper S&P 500 Index Objective Funds Average
Blackrock Intl Opp A	Lipper International Multi-Cap Core Average
Van Kampen Equity & Income A	Lipper Mixed-Asset Target Alloc Growth Funds Average

Contributions

Each year, participants may contribute up to 100 percent of pretax annual compensation, as defined in the Plan. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans. Participants direct the investment of their contributions into various investment options offered by the Plan. The Plan currently offers 36 mutual funds as investment options for participants. The Company may make discretionary matching and/or discretionary profit sharing contributions at the option of the Company's board of directors which are credited to participants' accounts who are employed by the Employer as of the last day of the contribution period for

NETEZZA CORPORATION 401(K) PLAN

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEARS ENDED DECEMBER 31, 2009 AND 2008

NOTE 1 **DESCRIPTION OF THE PLAN (CONTINUED)**

Contributions (Continued)

matching contributions and on the last day of the Plan year for profit sharing contributions. Contributions are subject to certain limitations. No employer matching or profit sharing contributions were made for 2009 or 2008.

Participant Accounts

Each participant's account is credited with the participant's contribution and allocations of (a) the Company's contribution and (b) Plan earnings, and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately vested in their voluntary contributions and rollover contributions plus actual earnings thereon. Vesting in the remainder of their accounts is based on years of continuous service. A participant becomes 100% vested according to the following schedule:

<u>Years of Service for Vesting</u>	<u>Percentage</u>
Less than 1	0
1	25
2	50
3	75
4	100

Forfeiture

Forfeitures as of the last day of the Plan year are used to offset future Company match contributions. At December 31, 2009 and 2008, there were no forfeited employer contributions available to offset future Company match contributions.

Benefits and Withdrawals

On termination of service due to death, disability, or retirement, a participant may elect to receive either a lump-sum amount equal to the value of the participant's vested interest in his or her account, or annual installments. For termination of service for other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution. Hardship withdrawals are permitted.

NETEZZA CORPORATION 401(K) PLAN

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEARS ENDED DECEMBER 31, 2009 AND 2008

NOTE 1 ***DESCRIPTION OF THE PLAN (CONTINUED)***

Participant Loans

Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50 percent of their account balance, whichever is less. The loans are secured by the balance in the participant's account and bear interest at rates ranging from 4.25% to 7%. Principal and interest is paid ratably through semi-monthly payroll deductions.

NOTE 2 ***SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES***

Basis of Presentation

The financial statements of the Plan have been prepared under the accrual basis of accounting.

Investment contracts held by a defined-contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the plan. The Statement of Net Assets Available for Benefits presents the fair value of the investment contracts as well as the adjustment of the fully benefit-responsive investment contracts from fair value to contract value. The Statement of Changes in Net Assets Available for Benefits is prepared on a contract value basis.

Administrative Expenses

Loan administration fees are paid by the Plan participants. Trustee and third-party administration fees are paid by the Plan. All other expenses incurred in the administration of the Plan are paid by the Company, the Plan sponsor. During the years ended December 31, 2009 and 2008, the Company paid \$ - and \$1,551 in administrative expenses respectively.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. (See Note 4 for discussion on fair value measurements).

NETEZZA CORPORATION 401(K) PLAN

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEARS ENDED DECEMBER 31, 2009 AND 2008

NOTE 2 *SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)*

Investment Valuation and Income Recognition (Continued)

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Payment of Benefits

Benefits are recorded when paid.

Operating Expenses

All expenses of maintaining the Plan are paid by the Company.

Use of Estimates

The preparation of the Plan's financial statements in conformity with generally accepted accounting principles requires the Plan administrator to make significant estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities at the date of the financial statements. Actual results could differ from those estimates.

Risks and Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks, such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near-term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

NOTE 3 *INVESTMENTS*

Our audit has been limited with respect to the following amounts related to investment assets as of December 31, 2009 and 2008 and investment income for the years ended December 31, 2009 and 2008, certified by the Trustees as being complete and accurate.

NETEZZA CORPORATION 401(K) PLAN

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEARS ENDED DECEMBER 31, 2009 AND 2008

NOTE 3 **INVESTMENTS (CONTINUED)**

The following presents investments that represent 5 percent or more of the Plan's net assets at the beginning of the year:

	<i>December 31,</i> 2009	<i>December 31,</i> 2008
American Growth Fd of Amer R3	\$ 1,480,971	\$ 1,039,371
Merrill Lynch Retirement Preservation Trust	1,127,431	529,253
Fidelity Adv Lev Comp Stck T	1,083,345	569,895
Blackrock Eq Dividend A	990,733	653,524
Thornburg International	949,997	634,497
AIM Trimark Small CO FD CL A	879,686	-
Blackrock S&P 500 Index I	833,168	486,003
Jennison Natural Resources FO	645,060	-
Janus Forty FD CL A	620,476	-
Loomis Sayles Strategic INCMA	618,073	-
Van Kampen Equity & Income A	552,348	-
Henderson GBL CL A	512,619	-
American Funds 2020 Target	420,495	-

NOTE 4 **FAIR VALUE MEASUREMENTS**

Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820, *Fair Value Measurements and Disclosures*, provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurement) and the lowest priority to unobservable inputs (level 3 measurements).

The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

Level 1	Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.
Level 2	Inputs to the valuation methodology include <ul style="list-style-type: none">• quoted prices for similar assets or liabilities in active markets;

NETEZZA CORPORATION 401(K) PLAN

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEARS ENDED DECEMBER 31, 2009 AND 2008

NOTE 4

FAIR VALUE MEASUREMENTS (CONTINUED)

- | | |
|-------------------|---|
| Level 2
(Cont) | <ul style="list-style-type: none">• quoted prices for identical or similar assets or liabilities in inactive markets;• inputs other than quoted prices that are observable for the asset or liability;• inputs that are derived principally from or corroborated by observable market data by correlation or other means. |
|-------------------|---|

If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the assets or liability.

-
- | | |
|---------|---|
| Level 3 | Inputs to the valuation methodology are unobservable and significant to the fair value measurement. |
|---------|---|
-

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for asset measured at fair value. There have been no changes in the methodologies used at December 31, 2009 and 2009.

Guaranteed Investment Contracts

Investments in Guaranteed Investment Contracts ("GICs") include traditional GICs (issued by an insurance company and relying on the credit worthiness of the general account), Separate Account GICs (issued by an insurance company and relying on the credit worthiness of the Separate Account) and Synthetic GICs which are a combination of a portfolio of securities plus a wrapper contract issued by a financially responsible third-party (typically a financial institution); herein collectively referred to as Investment Contracts. Contract value (cost plus accrued interest) is the relevant measurement attribute for that portion of the net assets that are fully benefit-responsive investment contracts provided the Trust is established as part of one or more qualified employer-sponsored defined contribution Plans. Because the Trust's contracts are fully benefit-responsive and because the Trust has been established for the collective investment of one or more qualified employer-sponsored defined contribution plans, the Trust values its investments at contract value. Contract value is considered the relevant measurement attribute because that is the amount participants in the Trust would receive if they were to initiate permitted transactions under the term of the underlying defined contribution plan.

NETEZZA CORPORATION 401(K) PLAN

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEARS ENDED DECEMBER 31, 2009 AND 2008

NOTE 4 ***FAIR VALUE MEASUREMENTS (CONTINUED)***

Wrapper Contracts

Synthetic GIC wrapper values are valued by the difference between the sum of the present values of wrap fees based on replacement costs received from the wrap providers at the statement date and the sum of present values of wrap fees based on actual fees at the beginning of the plan year.

Mutual Funds

Investments in mutual funds are valued at the mutual fund's closing net asset value per share on the day of valuation.

Other Assets

Other assets of the Plan consist of bonds, money market instruments, swap agreements, asset-backed and mortgage backed securities and are valued as follows:

Bond investments are valued on the basis of the last available bid prices or current market quotations provided by dealers or pricing services. Pricing services may use certain information with respect to transactions based on various relationships in the market place.

Money market instruments are valued at amortized cost.

Swap agreements are valued utilizing quotes received daily by the Trust's pricing service or through brokers which are determined using daily swap curves and trades of the underlying securities.

The fair value of asset-backed and mortgage-backed securities is estimated based on models that consider the estimated cash flows of each tranche of the entity, establish a benchmark yield and develop an estimated tranche specific to the benchmark yield based on their unique attributes.

Participant Loans

Participant loans are valued at amortized cost, which approximates fair value.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

NETEZZA CORPORATION 401(K) PLAN

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEARS ENDED DECEMBER 31, 2009 AND 2008

NOTE 4 *FAIR VALUE MEASUREMENTS (CONTINUED)*

Participant Loans (Continued)

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2009 and 2008:

<i>Investments at Fair Value as of December 31, 2009</i>				
	<i>Level 1</i>	<i>Level 2</i>	<i>Level 3</i>	<i>Total</i>
Mutual funds	\$ 13,909,662	\$ -	\$ -	\$ 13,909,662
Guaranteed investment contract	84	1,041,020		1,041,104
Other assets	-	51,380	-	51,380
Participant loans	-	-	170,853	170,853
Wrapper contract	-	-	3,012	3,012
Total assets at fair value	<u>\$ 13,909,746</u>	<u>\$ 1,092,399</u>	<u>\$ 173,865</u>	<u>\$ 15,176,010</u>

<i>Investments at Fair Value as of December 31, 2008</i>				
	<i>Level 1</i>	<i>Level 2</i>	<i>Level 3</i>	<i>Total</i>
Mutual funds	\$ 7,659,846	\$ -	\$ -	\$ 7,659,846
Guaranteed investment contract	-	336,646	-	336,646
Other assets	-	117,584	-	117,584
Participant loans	-	-	158,870	158,870
Wrapper contract	-	-	1,522	1,522
Total assets at fair value	<u>\$ 7,659,846</u>	<u>\$ 454,230</u>	<u>\$ 160,392</u>	<u>\$ 8,274,468</u>

Level 3 Gains and Losses

The following table sets forth a summary of changes in the fair value of the Plan's level 3 assets for the years ended December 31, 2009 and 2008:

Level 3 Assets *Year Ended December 31, 2009*

	<i>Wrapper Contract</i>	<i>Participant Loans</i>
Balance, beginning of year	\$ 1,522	\$ 158,870
New participant loans	-	121,500
Change in unrealized appreciation (depreciation) and net transfers	1,490	-
Participant loan repayments	-	(109,517)
Balance, end of year	<u>\$ 3,012</u>	<u>\$ 170,853</u>

NETEZZA CORPORATION 401(K) PLAN

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEARS ENDED DECEMBER 31, 2009 AND 2008

NOTE 4 **FAIR VALUE MEASUREMENTS (CONTINUED)**

Level 3 Gains and Losses (Continued)

*Level 3 Assets
Year Ended December 31, 2008*

	<i>Wrapper Contract</i>	<i>Participant Loans</i>
Balance, beginning of year	\$ -	\$ 62,223
New participant loans	-	124,826
Change in unrealized appreciation (depreciation) and net transfers	1,522	-
Participant loan repayments	-	(28,179)
Balance, end of year	<u>\$ 1,522</u>	<u>\$ 158,870</u>

NOTE 5 **GUARANTEED INVESTMENT CONTRACT**

In 2008, the Plan entered into a fully benefit-responsive investment contract with Bank of America, N.A. within the Common Collective Trust named Retirement Preservation Trust ("Trust").

Traditional GICs are designed to provide a fixed return on principal invested for a specified period of time. The issuer of a GIC is generally an insurance company or bank. The issuer accepts a deposit from the Trust and purchases investments which are held by the issuer. The issuer is contractually obligated to repay the principal and interest at the stated coupon rate to the Trust, and guarantees liquidity at contract value prior to maturity for allowable participant withdrawals. The investments underlying a Synthetic GIC are owned by the Trust and consist of a portfolio of underlying assets owned by the Trust and a wrap contract issued by a financially responsible third party. The issuer of the wrap contract provided for unscheduled withdrawals from the contract at contract value in order to fund the permitted withdrawals. Synthetic GICs provide for a variable interest crediting rate which typically resets on a quarterly basis, the issuer of the wrap contract provides assurance that future adjustments to the crediting rate cannot result in an interest crediting rate less than zero. The Trust allows participants daily access to their funds.

NETEZZA CORPORATION 401(K) PLAN

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEARS ENDED DECEMBER 31, 2009 AND 2008

NOTE 5 ***GUARANTEED INVESTMENT CONTRACT (CONTINUED)***

The interest crediting for each investment contract is determined by the current market yield of the underlying investments adjusted for the difference between contract value and fair value of the securities generally taken over the contract value and the duration of the securities. The key factors that could potentially influence future credit ratings include: changes to market interest rates, changes in the market value of securities, changes in the duration or weighted average life of securities and deposits or withdrawals. All investment contracts have a zero percent minimum interest crediting.

The average yield earned by the Trust at December 31, 2009 and 2008 was 2.35% and 9.49%. This average yield was calculated by dividing the annualized earnings of all investments in the Trust on the last day of the year by the fair value of all investments in the Trust. The average yield earned by the Trust with an adjustment to reflect the actual interest rate credited to participants in the Trust at December 31, 2009 and 2008 was 2.57% and 4.10%. This average yield was calculated by dividing the annualized earnings credited to participants in the Trust on the last day of the year by the fair value of all investments in the Trust.

The existence of certain conditions can limit the Trust's ability to transact at the contract value with the issuers of its investment contracts. As of December 31, 2009 and 2008, the occurrence of an event outside the normal operation of the Trust which would cause a withdrawal from an investment contract was not considered to be probable. To the extent a unit holder suffers a tax disqualification, under normal circumstances it is anticipated that liquid assets would be available to satisfy the redemption of such unit holder's interest in the Trust without the need to access investment contracts.

The issuer may terminate a benefit responsive contract with the Trust as a result of a failure of the Trust to comply with contractual requirements, a material misrepresentation of the Trust, failure to remain a group trust qualified under the Internal Revenue Code, or a merger or termination of the Trust. Upon such an event that remains unresolved, the issuer may terminate at a settlement amount other than the contract value.

NOTE 6 ***TAX STATUS***

The IRS has determined and informed the Company by letter dated October 9, 2003, that the Plan and related trust are designed in accordance with the applicable sections of the Internal Revenue Code ("IRC") and as a result is exempt from income taxes. The Plan administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable provisions of the IRS. Therefore, no provision for income taxes has been included in the Plan's financial statements.

NETEZZA CORPORATION 401(K) PLAN

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEARS ENDED DECEMBER 31, 2009 AND 2008

NOTE 7 *PLAN TERMINATION*

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become 100 percent vested in their employer contributions.

NOTE 8 *PARTY-IN-INTEREST*

The records of the Plan indicate no party-in-interest transactions, which are prohibited by the Employee Retirement Income Security Act of 1974 (Section 406) and for which no statutory or administrative exemption exists. In addition, loans to participants (employees of the Company) qualify as party-in-interest transactions.

NOTE 9 *RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500*

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2009 and 2008, to Form 5500:

	<u>2009</u>	<u>2008</u>
Net assets available for benefits per the financial statements	\$15,176,010	\$8,272,396
Less: employee contributions receivable	<u>-</u>	<u>(48,800)</u>
Net assets available for benefit per Form 5500	<u>\$15,176,010</u>	<u>\$8,223,596</u>

The following is a reconciliation of participant contributions per the financial statements for the years ended December 31, 2009 and 2008, to Form 5500:

	<u>2009</u>	<u>2008</u>
Participant contributions per the financial statements	\$3,047,827	\$2,598,604
Less: amount of participant contributions receivable at end of year	-	(48,800)
Plus: amount of participant contributions receivable at beginning of year	<u>48,800</u>	<u>58,116</u>
Participant contributions per Form 5500	<u>\$3,096,627</u>	<u>\$ 2,071,372</u>

The amount allocated to participant contributions as an employee receivable is recorded on the financial statements but has not been included on the Form 5500.

NETEZZA CORPORATION 401(K) PLAN

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEARS ENDED DECEMBER 31, 2009 AND 2008

NOTE 9 **RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500 (CONTINUED)**

The following is a reconciliation of total additions to net assets per the financial statements for the years ended December 31, 2009 and 2008 to total income per the Form 5500:

	<u>2009</u>	<u>2008</u>
Total additions per the financial statements	\$7,611,900	\$3,759,044
Less: net investment loss from common collective trust	(7,690)	(73,501)
Less: net unrealized (loss) from registered investment companies.	-	(4,310,730)
Less: net realized (loss) from registered investments companies.	-	(156,977)
Less: amount of transfers into the Plan	(569,119)	-
Less: amount of participant contributions receivable at end of year	-	(48,800)
Plus: amount of participant contribution receivable at beginning of year.	<u>48,800</u>	<u>58,116</u>
Total income per Form 5500	<u>\$7,083,891</u>	<u>\$ 772,848</u>

NOTE 10 **SUBSEQUENT EVENTS**

The Plan has evaluated subsequent events through July 21, 2010 the date which the financial statements were issued, none were noted for the Plan year ending December 31, 2009.

SUPPLEMENTAL SCHEDULES



NETEZZA CORPORATION 401(k) PLAN

EIN 04-3527320 PN 001

SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT YEAR END)

DECEMBER 31, 2009

(a) <i>Party</i> <i>in Interest</i>	(b) <i>Identity of Issuer, Borrower or Similar Party</i>	(c) <i>Description of Investment including maturity date, rate of interest, collateral, par or maturity value</i>	(d) <i>Cost</i>	(e) <i>Current Value</i>
*	Merrill Lynch Retirement Preservation Trust		**	\$ 1,176,686
*	JPMorgan Core Bond Fund A		**	248,242
*	Jennison Natural Resources FD		**	645,060
*	Blackrock HI Sc Opp A		**	369,313
*	Van Kampen Small Cap Growth A		**	250,543
*	Van Kampen Small Cap Growth GM		**	30,842
*	Fidelity Adv Lev Comp Stck T		**	1,083,345
*	Fidelity Adv Lev Comp Sk T Gm		**	54,486
*	American Cap World Gr & Inc R3		**	196,856
*	American Growth Fd of Amer R3		**	1,480,971
*	American Grth Fd of Amer R3 Gm		**	148,267
*	Jennison Mid Cap Growth FD		**	132,465
*	Jennison Mid Cap Growth FD GM		**	44,903
*	ING Global Real Estate Fd CI A		**	140,936
*	AIM Trimark Small Co Fd CI A		**	879,686
*	AIM Trimark Small Co Fd A Gm		**	46,434
*	American Cent Gov BD FD ADV CL		**	219,631
*	American Cent Gov BD FD ADV GM		**	90,489
*	Henderson Gbl CI A		**	512,619
*	Janus Adviser Forty Fd A		**	620,476
*	Janus Overseas FD CL A		**	439,560
*	Janus Overseas FD CL A GM		**	96,428
*	Perkins Mid Cap Value FD CL A		**	18,102
*	American Funds 2010 Target		**	247,038
*	American Funds 2020 Target		**	420,496
*	American Funds 2030 Target		**	362,910
*	American Funds 2040 Target		**	324,537
*	Thornburg International		**	949,998
*	Thornburg International GM		**	79,106
*	Blackrock Eq Dividend A		**	990,733
*	Blackrock Eq Dividend A GM		**	184,968
*	Loomis Sayles Strategic Incm A		**	618,073
*	Loomis Sayles Strategic Incm A Gm		**	117,283
*	Oppenheimer Intl Bd Fd CI A		**	303,954
*	Blackrock S&P 500 Index I		**	833,168
*	Blackrock Intl Opp A		**	175,395
*	Van Kampen Equity & Income A		**	552,348
*	Participant loans			170,853
				<u>\$ 15,257,201</u>

* Party-in-interest

** Cost information is omitted for participant-directed investments.

NETEZZA CORPORATION 401(k) PLAN

EIN 04-3527320 PN 001

SCHEDULE H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS

FOR THE YEAR ENDED DECEMBER 31, 2009

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
<u>Identity of party involved</u>	<u>Description of asset (include interest rate and maturity in case of a loan)</u>	<u>Purchase price</u>	<u>Selling price</u>	<u>Lease rental</u>	<u>Expense incurred with transaction</u>	<u>Cost of asset</u>	<u>Current value of asset on transaction date</u>	<u>Net gain or (loss)</u>

The plan had no reportable transactions for 2009

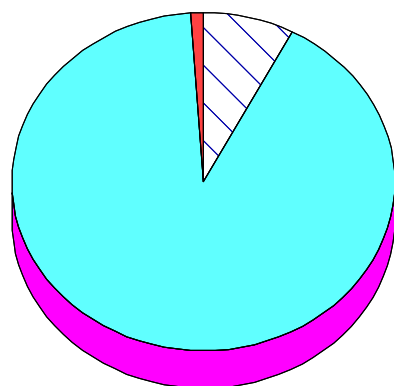
REVALUED STATEMENT OF ASSETS

FOR THE PERIOD 01/01/2009 - 12/31/2009

NETEZZA CORPORATION 401(K) PLAN

CONSOLIDATION

ALLOCATION OF PLAN ASSETS



COMMON / COLLECTIVE TRUSTS

MUTUAL FUNDS

LOANS

Investment Category	Shares/Units	Price/NAV	Cost/Book Value	Market Value	Difference
<u>COMMON / COLLECTIVE TRUSTS</u>					
ML RET PRESERVATION TRUST	1,127,430.8100	1.000	1,127,430.81	1,127,430.81	0.00
ML RET PRES TRUST GM	49,255.1800	1.000	49,255.18	49,255.18	0.00
TOTAL COMMON / COLLECTIVE			1,176,685.99	1,176,685.99	0.00
<u>MUTUAL FUNDS</u>					
JPMORGAN CORE BOND FUND A	22,344.0041	11.110	245,139.92	248,241.89	3,101.97
JENNISON NATURAL RESOURCES FD	14,287.0487	45.150	423,555.45	645,060.25	221,504.80
BLACKROCK HL SC OPP A	13,337.4079	27.690	293,307.15	369,312.82	76,005.67
VAN KAMPEN SMALL CAP GROWTH A	27,993.6179	8.950	217,125.46	250,542.88	33,417.42
VAN KAMPEN SMALL CAP GRTH GM	3,446.0785	8.950	26,765.08	30,842.40	4,077.32
FIDELITY ADV LEV COMP STCK T	39,712.0468	27.280	712,992.92	1,083,344.64	370,351.72
FIDELITY ADV LEV COMP SK T GM	1,997.2704	27.280	40,219.11	54,485.54	14,266.43

REVALUED STATEMENT OF ASSETS

NETEZZA CORPORATION 401(K) PLAN

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FOR THE PERIOD 01/01/2009 - 12/31/2009

CONSOLIDATION

Investment Category	Shares/Units	Price/NAV	Cost/Book Value	Market Value	Difference
JANUS OVERSEAS FD CL A	10,345.0259	42.490	415,496.10	439,560.15	24,064.05
JANUS OVERSEAS FD CL A GM	2,269.4050	42.490	82,446.89	96,427.02	13,980.13
PERKINS MID CAP VALUE FD CL A	914.2652	19.800	16,721.73	18,102.45	1,380.72
AMERICAN BOND FD. OF AMERICA	0.0000	11.800	9.62	0.00	(9.62)
AMERICAN CAP WORLD GR & INC R3	5,805.2568	33.910	163,230.39	196,856.26	33,625.87
AMERICAN GROWTH FD OF AMER R3	54,993.3652	26.930	1,115,977.67	1,480,971.32	364,993.65
AMERICAN GRTH FD OF AMER R3 GM	5,505.6435	26.930	122,144.42	148,266.98	26,122.56
JENNISON MID CAP GROWTH FD	5,804.7915	22.820	118,435.40	132,465.34	14,029.94
JENNISON MID CAP GROWTH FD GM	1,967.7155	22.820	38,874.70	44,903.27	6,028.57
ING GLOBAL REAL ESTATE FD CL A	9,607.1028	14.670	119,189.28	140,936.20	21,746.92
AIM TRIMARK SMALL CO FD CL A	62,212.5925	14.140	551,875.13	879,686.06	327,810.93
AIM TRIMARK SMALL CO FD A GM	3,283.8455	14.140	31,532.37	46,433.58	14,901.21
AMERICAN CENT GOV BD FD ADV CL	20,021.0482	10.970	223,004.70	219,630.90	(3,373.80)
AMERICAN CENT GOV BD FD ADV GM	8,248.7993	10.970	92,915.64	90,489.33	(2,426.31)
HENDERSON GBL CL A	31,859.4943	16.090	341,272.79	512,619.26	171,346.47
JANUS FORTY FD CL A	19,450.6669	31.900	456,221.16	620,476.27	164,255.11
JANUS ADVISER INTERNATIONAL GR	0.0000	31.990	-133,600.91	0.00	133,600.91
JANUS ADVISER INTERNTNL GR GM	0.0000	31.990	-11,889.74	0.00	11,889.74
AMERICAN FUNDS 2010 TARGET	28,725.2688	8.600	218,789.41	247,037.31	28,247.90
AMERICAN FUNDS 2020 TARGET	49,880.8075	8.430	342,970.21	420,495.21	77,525.00
AMERICAN FUNDS 2030 TARGET	42,947.8989	8.450	296,472.04	362,909.75	66,437.71
AMERICAN FUNDS 2040 TARGET	38,225.6802	8.490	254,460.82	324,536.02	70,075.20
THORNBURG CORE GROWTH FD	0.0000	14.210	0.01	0.00	(0.01)



REVALUED STATEMENT OF ASSETS

NETEZZA CORPORATION 401(K) PLAN

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FOR THE PERIOD 01/01/2009 - 12/31/2009

CONSOLIDATION

Investment Category	Shares/Units	Price/NAV	Cost/Book Value	Market Value	Difference
THORNBURG CORE GROWTH FD GM	0.0000	14.210	0.01	0.00	(0.01)
THORNBURG INTERNATIONAL	38,430.3119	24.720	737,419.90	949,997.31	212,577.41
THORNBURG INTERNATIONAL GM	3,200.0849	24.720	65,305.98	79,106.10	13,800.12
BLACKROCK EQ DIVIDEND A	62,625.3409	15.820	836,345.98	990,732.89	154,386.91
BLACKROCK EQ DIVIDEND A GM	11,692.0003	15.820	159,134.27	184,967.44	25,833.17
LOOMIS SAYLES STRATEGIC INCM A	44,787.9058	13.800	496,240.91	618,073.10	121,832.19
LOOMIS SAYLES STRTGC INCM A GM	8,498.7418	13.800	99,410.90	117,282.64	17,871.74
OPPENHEIMER INTL BD FD CL A	47,492.8721	6.400	287,943.59	303,954.38	16,010.79
BLACKROCK S&P500 INDEX I	61,127.4792	13.630	677,679.92	833,167.54	155,487.62
GOLDMAN SACHS GOVT INC FD A	0.0000	15.070	8.15	0.00	(8.15)
GOLDMAN SACHS GOVT INC FD A GM	0.0000	15.070	29.15	0.00	(29.15)
BLACKROCK INTL OPP A	5,784.7928	30.320	153,195.17	175,394.92	22,199.75
FRANKLIN INCOME FUND	0.0000	2.070	0.03	0.00	(0.03)
VAN KAMPEN EQUITY & INCOME A	70,904.7137	7.790	462,933.28	552,347.72	89,414.44
TOTAL MUTUAL FUNDS			10,791,302.16	13,909,657.14	3,118,354.98
<u>LOANS</u>					
LOAN FUND	170,853.4300	1.000	170,853.43	170,853.43	0.00
INVESTMENT TOTAL			12,138,841.58	15,257,196.56	3,118,354.98
UNINVESTED CASH			0.00	0.00	0.00
ACCRUED INCOME			4.99	4.99	0.00
CASH			0.00	0.00	0.00

REVALUED STATEMENT OF ASSETS

NETEZZA CORPORATION 401(K) PLAN

FOR THE PERIOD 01/01/2009 - 12/31/2009

CONSOLIDATION

Investment Category	Shares/Units	Price/NAV	Cost/Book Value	Market Value	Difference
TOTAL ASSETS			12,138,846.57	15,257,201.55	3,118,354.98

The balance in the cash fund may be temporarily invested in the CMA Money Fund. Additional amounts not reported as cash may also be invested in the CMA Money Fund pending settlement of trades.

