Form 5500

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Signature of DFE

Annual Return/Report of Employee Benefit Plan

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).

> ▶ Complete all entries in accordance with the instructions to the Form 5500.

OMB Nos. 1210-0110 1210-0089

2010

					Inspection	ublic
Part I	Annual Report Iden	tification Information				
For cale	ndar plan year 2010 or fiscal p	olan year beginning 01/01/2010		and ending 12/31/2	2010	
A This	return/report is for:	a multiemployer plan;	a multip	ole-employer plan; or		
		X a single-employer plan;	a DFE	(specify)		
B This	return/report is:	the first return/report;	the fina	I return/report;		
		an amended return/report;	a short	plan year return/report (less th	nan 12 months).	
C If the	plan is a collectively-bargaine	ed plan, check here				
	k box if filing under:	Form 5558;	_	tic extension;	the DFVC program;	
2 0.100	K BOX II IIIII g GIIGOI.	special extension (enter des	ш	,		
Part	II Rasic Plan Inform	nation—enter all requested informa				
	ne of plan	ilation—enter all requested informa	ation		1b Three-digit plan	001
	TIUM 401(K) PLAN				number (PN) ▶	001
					1c Effective date of pl	an
					01/01/2002	
	i sponsor's name and addres: ress should include room or s	s (employer, if for a single-employer	plan)		2b Employer Identification Number (EIN)	ation
`	FIUM CORPORATION	suite 110.)			91-2105883	
2c Sponsor's telephone					ne	
	number					
10500 N	E 8TH STREET	10500 NE	8TH STREET		425-519-7787	
SUITE 1	300 UE, WA 98004	SUITE 13	00 IE, WA 98004		2d Business code (seinstructions)	е
BELLEVOE, WA 90004			L, WA 30004		541512	
Courtier	. A manalty far the late or in		rt will be seened	d unless researchle source i	a actablished	
	· · ·	complete filing of this return/report enalties set forth in the instructions,				dulaa
		as the electronic version of this return		•	. , ,	
SIGN	Filed with authorized/valid ele	ectronic signature.	08/03/2011	GEORGIA TABISH		
HERE	Signature of plan adminis	trator	Date	Enter name of individual s	igning as plan administrator	
	Olynatale of plan adminis		Date	Enter name of marviadars	igning do plan daministrator	
SIGN						
HERE	Signature of employer/pla	n sponsor	Date	Enter name of individual s	igning as employer or plan sp	onsor
	Orginature of employer/pla		Duic	Enter name of marvidual s	igning as employer or plan sp	0.1301
SIGN						
LEDE						

Date

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

Form 5500 (2010) v.092307.1

Enter name of individual signing as DFE

Form 5500 (2010) Page **2**

	Plan administrator's name and address (if same as plan sponsor, enter "SareVEN SALTA	me")	l l	ministrator's EIN 2105883
	00 NE 8TH STREET SUITE 1300 LLEVUE, WA 98004	nu	ministrator's telephone mber 5-519-7700	
4	If the name and/or EIN of the plan sponsor has changed since the last return the plan number from the last return/report:	n/report filed for this plan, enter the name, EIN	and	4b EIN
а	Sponsor's name			4c PN
5	Total number of participants at the beginning of the plan year		5	506
6	Number of participants as of the end of the plan year (welfare plans complet	te only lines 6a , 6b , 6c , and 6d).		
			_	
а	Active participants		. 6a	275
b	Retired or separated participants receiving benefits		. 6b	0
_			C	454
C	Other retired or separated participants entitled to future benefits		. 6с	154
d	Subtotal. Add lines 6a, 6b, and 6c		. 6d	429
e	Deceased participants whose beneficiaries are receiving or are entitled to re	eceive benefits	. 6e	0
f	Total. Add lines 6d and 6e		. 6f	429
g	Number of participants with account balances as of the end of the plan year complete this item)		. 6g	282
h	Number of participants that terminated employment during the plan year with less than 100% vested		. 6h	17
7	Enter the total number of employers obligated to contribute to the plan (only		7	
	If the plan provides pension benefits, enter the applicable pension feature of 2E 2F 2G 2J 2K 2T 3D the plan provides welfare benefits, enter the applicable welfare feature code			
9a	Plan funding arrangement (check all that apply)	9b Plan benefit arrangement (check all that	at apply)	
	 (1) Insurance (2) Code section 412(e)(3) insurance contracts (3) Trust (4) General assets of the sponsor 	(1) Insurance (2) Code section 412(e)(3) (3) X Trust (4) General assets of the specific content of the		e contracts
10	Check all applicable boxes in 10a and 10b to indicate which schedules are a		ber attac	hed. (See instructions)
а	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	b General Schedules (1) H (Financial Inform (2) I (Financial Inform (3) A (Insurance Inform (4) C (Service Provide (5) D (DFE/Participati	nation – s mation) er Inform	ation)

SCHEDULE C (Form 5500)

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

Service Provider Information

File as an attachment to Form 5500.

OMB No. 1210-0110

2010

This Form is Open to Public Inspection.

Pension Benefit Guaranty Corporation				inspection.
For calendar plan year 2010 or fiscal plan year beginning 01/01/2010		and ending 12/31/2	2010	
A Name of plan	В	Three-digit		001
ASCENTIUM 401(K) PLAN		plan number (PN)	•	001
	÷			
C Plan sponsor's name as shown on line 2a of Form 5500	D	Employer Identificatio	n Number (E	EIN)
ASCENTIUM CORPORATION		91-2105883		
Part I Service Provider Information (see instructions)				
Tarri ocivice i iovidei information (see matructions)				
You must complete this Part, in accordance with the instructions, to report the information re or more in total compensation (i.e., money or anything else of monetary value) in connection plan during the plan year. If a person received only eligible indirect compensation for which answer line 1 but are not required to include that person when completing the remainder of the complete of the com	n with the	h services rendered to t plan received the requi	he plan or th	ne person's position with the
1 Information on Persons Receiving Only Eligible Indirect Compensat	ion			
a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of the	nis P	art because they receiv	ed only eligi	
indirect compensation for which the plan received the required disclosures (see instructions	for c	lefinitions and condition	s)	Yes No
b If you answered line 1a "Yes," enter the name and EIN or address of each person providing received only eligible indirect compensation. Complete as many entries as needed (see inst			r the service	providers who
(b) Enter name and EIN or address of person who provided you dis	clos	ures on eligible indirect	compensati	on
(b) Enter name and EIN or address of person who provided you dis	clos	ure on eligible indirect	compensatio	on
(b) Enter name and EIN or address of person who provided you dis	clos	ures on eligible indirect	compensati	on
(b) Enter name and EIN or address of person who provided you dis	clos	ures on eligible indirect	compensati	on

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	(b) Enter name and EIN or address of person	n who provided you disclosures on eligible indi	rect compensation
	(b) Enter name and EIN or address of person	n who provided you disclosures on eligible indi	rect compensation
1	(b) Enter name and EIN or address of person	n who provided you disclosures on eligible indi	rect compensation
	(b) Enter name and EIN or address of person	n who provided you disclosures on eligible indi	rect compensation
	(b) Enter name and EIN or address of person	n who provided you disclosures on eligible indi	rect compensation
	(b) Enter name and EIN or address of person	n who provided you disclosures on eligible indi	rect compensation
	(b) Enter name and EIN or address of person	n who provided you disclosures on eligible indi	irect compensation
	(b) Enter name and EIN or address of person	n who provided you disclosures on eligible indi	irect compensation

i age J

answered	I "yes" to line 1a above	e, complete as many e	entries as needed to list ea	r Indirect Compensation ch person receiving, directly or the plan or their position with the	indirectly, \$5,000 or more in to	otal compensation
		(a) Enter name and EIN or	address (see instructions)		
04-2647786	INVESTMENTS INSTI	TUTIONAL				
(b) Service Code(s)	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?	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?
64 37 65	RECORDKEEPER	19628	Yes 🖺 No 🗌	Yes 🖺 No 🗍	0	Yes X 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?	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)	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?	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

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		(a) Enter name and EIN or	address (see instructions)			
(b) Service Code(s)	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?	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 No	Yes No		Yes No No	
(a) Enter name and EIN or address (see instructions)							
(b) Service Code(s)	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?	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	(d) Enter direct compensation paid by the plan. If none,	(e) Did service provider receive indirect compensation? (sources	(f) Did indirect compensation include eligible indirect compensation, for which the	(g) Enter total indirect compensation received by service provider excluding	(h) Did the service provider give you a formula instead of	

other than plan or plan

sponsor)

Yes No

plan received the required

disclosures?

Yes No

person known to be

a party-in-interest

enter -0-.

eligible indirect

compensation for which you answered "Yes" to element

(f). If none, enter -0-.

an amount or

estimated amount?

Yes No

Part I Service Provider Information (continued)		
3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compen or provides contract administrator, consulting, custodial, investment advisory, investment may questions for (a) each source from whom the service provider received \$1,000 or more in increase provider gave you a formula used to determine the indirect compensation instead of an amomany entries as needed to report the required information for each source.	anagement, broker, or recordkeepindirect compensation and (b) each so	g services, answer the following burce for whom the service
(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	formula used to determine	compensation, including any the service provider's eligibility 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	formula used to determine	compensation, including any the service provider's eligibility 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	formula used to determine	compensation, including any the service provider's eligibility the indirect compensation.

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Schedule C (Form 5500) 2010

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Pa	art II Service Providers Who Fail or Refuse to P					
4	this Schedule.	ovide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete is 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			

Schedule C (Form 5500) 2010	

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Pa	art III	Termination Information on Accountants and Enrolled A (complete as many entries as needed)	Actuaries (see instructions)
а	Name:	·	b EIN:
С	Positio	n:	
d	Addres	s:	e Telephone:
Ex	planatior		
a	Name:		b EIN:
C	Positio	n:	D LIN.
d	Addres		e Telephone:
-	7.00.00	-	Total state of the
Ex	planatior		
_^	,		
а	Name:		b EIN:
С	Positio	n:	
d	Addres		e Telephone:
			·
Ex	planatior	:	
а	Name:		b EIN;
С	Positio	n:	
d	Addres	s:	e Telephone:
Ex	planatior	:	
			1.
<u>a</u>	Name:		b EIN;
<u>c</u>	Positio		
d	Addres	S:	e Telephone:
	nlonatic:		
ΕX	planatior		

SCHEDULE H (Form 5500)

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

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

2010

This Form is Open to Public

Pension Benefit Guaranty Corporation	ilent to Form .	3300.				Inspecti	ion
For calendar plan year 2010 or fiscal plan year beginning 01/01/2010		and	endir	g 12/31/20)10		
A Name of plan			В	Three-digit			
ASCENTIUM 401(K) PLAN				plan numbe	er (PN)	<u> </u>	001
C Plan sponsor's name as shown on line 2a of Form 5500			D	Employer Ide	entificat	tion Number	(EIN)
ASCENTIUM CORPORATION							
				91-2105883			
Part I Asset and Liability Statement							
1 Current value of plan assets and liabilities at the beginning and end of the plan							
the value of the plan's interest in a commingled fund containing the assets of n							
lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance benefit at a future date. Round off amounts to the nearest dollar. MTIAs, C							
and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. Se	e instructions.			'			
Assets		(a) B	eginn	ing of Year		(b) End	d 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)			6863	394		572724
(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)			689	972		38958
(9) Value of interest in common/collective trusts	1c(9)						
(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)			72943	358		7820570

1c(14)

1c(15)

(14) Value of funds held in insurance company general account (unallocated

contracts).....

		г		
1d	Employer-related investments:		(a) Beginning of Year	(b) End of Year
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
е	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	8049724	8432252
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets	•		
I	Net assets (subtract line 1k from line 1f)	11	8049724	8432252

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) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)		
(B) Participants	2a(1)(B)	1242892	
(C) Others (including rollovers)	2a(1)(C)	120420	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2)	2a(3)		1363312
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	115	
(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)	3459	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		3574
(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)	111528	
(D) Total dividends. Add lines 2b(2)(A), (B), and (C)	2b(2)(D)		111528
(3) Rents	2b(3)		
(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)		

_		
Pan	Δ	
ıay		•

		(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)		
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(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)		973304
C Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		2451718
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	2049488	
(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)		2049488
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)			
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	0:(4)		
(2) Contract administrator fees	0:(0)		
(3) Investment advisory and management fees	2:(2)		
(4) Other		19702	
(5) Total administrative expenses. Add lines 2i(1) through (4)	0'(5)		19702
Total expenses. Add all expense amounts in column (b) and enter total	2:		2069190
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		382528
I Transfers of assets:			
(1) To this plan	2l(1)		
	21(2)		
(2) From this plan	21(2)		
Part III Accountant's Opinion			
3 Complete lines 3a through 3c if the opinion of an independent qualified public attached.	c accountant is attache	ed to this Form 5500. Comple	te line 3d if an opinion is not
\boldsymbol{a} The attached opinion of an independent qualified public accountant for this p	lan is (see instructions	3):	
(1) Unqualified (2) Qualified (3) Disclaimer (4	Adverse		
$oldsymbol{b}$ Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.1	03-8 and/or 103-12(d)	?	X Yes No
c Enter the name and EIN of the accountant (or accounting firm) below:			
(1) Name: MOSS ADAMS	(2)	EIN: 91-0189318	
d The opinion of an independent qualified public accountant is not attached be (1) This form is filed for a CCT, PSA, or MTIA. (2) It will be att		n 5500 pursuant to 29 CFR 2	520.104-50.

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Pa	art IV Compliance Question	ns						
4		Part IV. MTIAs, 103-12 IEs, and GIAs j and 4l. MTIAs also do not complete		4f, 4g,	4h, 4k, 4	m, 4n, or 5	j.	
	During the plan year:				Yes	No	Amo	unt
а	period described in 29 CFR 2510.	he plan any participant contributions w 3-102? Continue to answer "Yes" for a ons and DOL's Voluntary Fiduciary Co	ny prior year failures	4a		X		
b	close of the plan year or classified secured by participant's account b	d income obligations due the plan in o during the year as uncollectible? Disr alance. (Attach Schedule G (Form 55	egard participant loans 00) Part I if "Yes" is	4b		X		
С	Were any leases to which the plan	was a party in default or classified du (Form 5500) Part II if "Yes" is checker	ring the year as	4c		X		
d	reported on line 4a. Attach Schedu	ctions with any party-in-interest? (Do ule G (Form 5500) Part III if "Yes" is		4d		X		
е	Was this plan covered by a fidelity	bond?		4e	X			500000
f	Did the plan have a loss, whether	or not reimbursed by the plan's fidelity	bond, that was caused	4f		X		
~	•	e current value was neither readily de		41				
g	•	ndependent third party appraiser?		4g		X		
h	,	contributions whose value was neithe arket nor set by an independent third p	,	4h		X		
i	•	nvestment? (Attach schedule(s) of assurirements.)	-	4i	X			
j	value of plan assets? (Attach sche	ies of transactions in excess of 5% of edule of transactions if "Yes" is checke ments.)	d, and	4j		X		
k		tributed to participants or beneficiaries of the PBGC?		4k		X		
ı	Has the plan failed to provide any	benefit when due under the plan?		41		X		
m	If this is an individual account plan	, was there a blackout period? (See ir	structions and 29 CFR	4m		X		
n		the "Yes" box if you either provided the notice applied under 29 CFR 2520.10		4n		X		
5a		n been adopted during the plan year or a assets that reverted to the employer this y		Yes	No X	Amour	ıt:	
5b	If, during this plan year, any asset transferred. (See instructions.)	s or liabilities were transferred from thi	s plan to another plan(s)	, ident	fy the pla	n(s) to wh	ich assets or liabi	lities were
	5b(1) Name of plan(s)					5b(2) EIN	(s)	5b(3) PN(s)

SCHEDULE R (Form 5500)

Employee Benefits Security Administration Possion Renefit Guaranty Cornoration

This schedule is required to be filed under section 104 and 4065 of the Department of the Treasury Internal Revenue Service Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). Department of Labor

File as an attachment to Form 5500.

Retirement Plan Information

OMB No. 1210-0110

2010

This Form is Open to Public Inspection.

	Perision Benefit Guaranty Corporation					
For	r calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and	ending	12/31/20	010		
	Name of plan CENTIUM 401(K) PLAN	p	ree-digit lan numbe PN)	er •	001	
	Plan sponsor's name as shown on line 2a of Form 5500	D En	nployer Ide	entificati	ion Number (EII	N)
ASC	CENTIUM CORPORATION		91-210588	33		
	art I Distributions					
All	references to distributions relate only to payments of benefits during the plan year.			1		
1	Total value of distributions paid in property other than in cash or the forms of property specified in the instructions		1			0
2	Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries du payors who paid the greatest dollar amounts of benefits):	iring the ye	ear (if more	e than t	wo, enter EINs	of the two
	EIN(s): 04-6568107					
	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	ne nlan				
·	year	•	3			
Р	Funding Information (If the plan is not subject to the minimum funding requirements ERISA section 302, skip this Part)	of section	of 412 of	the Inte	rnal Revenue C	Code or
4	Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?		П	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: More	nth	Da	У	Year _	
	If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the re	emainder				
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)		6с			
	If you completed line 6c, skip lines 8 and 9.			I		
7	Will the minimum funding amount reported on line 6c be met by the funding deadline?		П	Vaa	Пы	□ N/A
			Ш	Yes	No	N/A
8	If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure pro	oviding				
	automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator	•	П	Yes	□No	□ N/A
	with the change?		Ш		Ш	
Pa	art 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 hox(es), If no, check the "No" hox		\Box	256	Both	No
	pox(es), if no, check the INO pox	ease	Decre	asc		
Pa	box(65). If no, chock the 140 box		ш		ue Code	
Pa	ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975 skip this Part.		ш		ue Code,	
Pa	art IV ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975	5(e)(7) of the	ne Interna	Reven		No
	ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975 skip this Part.	o(e)(7) of the	ne Interna empt loan	Reven	Yes	No No
10	ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975 skip this Part. Were unallocated employer securities or proceeds from the sale of unallocated securities used to rep	oay any ex	empt loan	??	Yes	

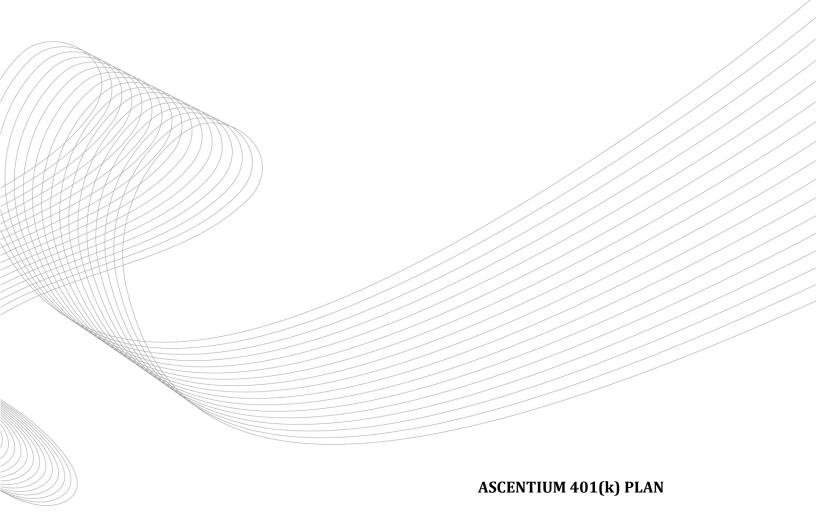
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Schedule R (Form 5500) 2010

Par	t V	Additional Information for Multiemployer Defined Benefit Pension Plans
13	Ente	er the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in
		ars). 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
	е	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
	е	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
	е	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 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
1	е	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 amplayor
	a b	Name of contributing employer EIN C Dollar amount contributed by employer
	<u>บ</u> 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
	е	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):
	_	No contribution and con
	a b	Name of contributing employer 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
,	e	and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month Day Year 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)

Page .

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 makemployer contribution during the current plan year to:	ke an				
	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, ch supplemental information to be included as an attachment.					
P	art VI Additional Information for Single-Employer and Multiemployer Defined Benefi	t Pens	ion Plans			
18	8 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					
	Effective duration Macaulay duration Modified duration Other (specify):					



Report of Independent Auditors and Financial Statements with Supplemental Schedule

December 31, 2010 and 2009

MOSS-ADAMS LLP

Certified Public Accountants | Business Consultants

Acumen. Agility. Answers.

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REPORT OF INDEPENDENT AUDITORS

To the Plan Administrator Ascentium 401(k) Plan

We were engaged to audit the accompanying statements of net assets available for benefits of Ascentium 401(k) Plan as of December 31, 2010 and 2009, and the related statement of changes in net assets available for benefits for the year ended December 31, 2010, and the supplemental schedule of Schedule H, Line 4(i) - Schedule of Assets (Held At End of Year) as of December 31, 2010. These financial statements and supplemental schedule 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 Employee 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 investment information summarized in Note 8, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing such information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that the trustee holds Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of December 31, 2010 and 2009, and for the year ended December 31, 2010, that the information provided to the plan administrator by the trustee is complete and accurate.

Because of the significance of the information we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedule taken as a whole. The form and content of the information included in the financial statements and supplemental schedule, other than that derived from information certified by the trustee, have been audited by us in accordance with auditing standards generally 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.

Mese adams LLP

Seattle, Washington July 25, 2011



ASCENTIUM 401(k) PLAN STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS DECEMBER 31, 2010 AND 2009

	2010	2009
ASSETS		
Investments, at fair value		
Mutual funds	\$ 7,820,570	\$ 7,294,358
Money market fund	572,724	686,394
Notes receivable from participants	38,958_	68,972
NET ASSETS AVAILABLE FOR BENEFITS	\$ 8,432,252	\$ 8,049,724

ASCENTIUM 401(k) PLAN STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS YEAR ENDED DECEMBER 31, 2010

ADDITIONS	
Investment income	
Net appreciation in fair value of investments	\$ 973,304
Dividends	111,528
Interest	115
	1,084,947
Interest income on notes receivable from participants	3,459
Contributions	
Participant	1,242,892
Rollovers	120,420
	1,363,312
Total additions	2,451,718
DEDUCTIONS	
Benefits paid to participants	2,049,488
Administrative expenses	19,702
Total deductions	2,069,190
NET INCREASE	382,528
NET ASSETS AVAILABLE FOR BENEFITS	
Beginning of year	8,049,724
End of year	\$ 8,432,252

Note 1 - Description of the Plan

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

General - The Plan is a defined contribution plan covering substantially all employees of Ascentium Corporation (the Company), except for those employees whose retirement benefits are the subject of collective bargaining. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

During 2010, an operating division of the Company was sold, resulting in the affected employees leaving the Plan. As a result of the reduction in work force associated with the sale of this division, the Company determined that the Plan met the criteria for a partial plan termination. As a result, each participant who was affected by the partial plan termination became fully vested in their account balances.

Eligibility - Employees of the Company are eligible to participate on the date they are hired and have attained the age of 18. Employees may enter the Plan on the first day of the month falling on or after the date they become eligible.

Contributions - Participants may elect to contribute up to 75% of eligible compensation to the Plan each year. Participants may also contribute amounts representing rollovers from other qualified plans. The Company may make discretionary matching and profit sharing contributions to the Plan. Matching contributions are based on a specified percentage of employee deferral contributions. Profit sharing contributions are based on the compensation of the participants. There were no employer matching or profit sharing contributions for the year ended December 31, 2010. Contributions are subject to regulatory limitations.

Vesting - Participants are fully vested in their salary deferral contributions plus actual earnings thereon. Vesting in the Company's contributions is based on years of service. A participant is 33%, 67%, and 100% vested after 1, 2, and 3 years of service, respectively.

Payment of Benefits - On termination of service, a participant may elect to receive either a lump-sum amount equal to the value of the participant's vested account balance or installments as defined by the plan agreement.

Participant Accounts - Each participant's account is credited with the participant's contribution and allocation of the Company's contributions and earnings. 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.

Forfeitures - Forfeitures are the nonvested portion of a participant's account that is lost upon termination of employment. Forfeitures are retained in the Plan and used to pay administrative expenses or to reduce the Company's contributions. At December 31, 2010 and 2009, forfeited accounts totaled \$3,655 and \$13,027, respectively. During the year ended December 31, 2010, forfeitures totaling \$15,301 were used to pay administrative expenses of the Plan.

Note 1 - Description of the Plan (Continued)

Notes Receivable from Participants - Participants may borrow from their accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. Generally, the term of the loan may not exceed five years, unless the loan is to purchase a personal residence. The loans are secured by the balance in the participant's account and bear interest at a rate equal to available market financing rates. Principal and interest are paid ratably through payroll deductions. Interest rates on outstanding loans range from 5% to 6% with various maturities through April 2017.

Plan Termination - Although it has not expressed any intent to do so, the Company has the right to terminate the Plan subject to the provisions of ERISA. If the Plan is terminated, amounts allocated to a participant's account become fully vested.

Note 2 - Summary of Significant Accounting Policies

Basis of Accounting - The financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America, using the accrual method of accounting.

Use of Estimates - The preparation of financial statements in conformity with generally accepted accounting principles requires the use of estimates and assumptions that may affect certain amounts and disclosures. Accordingly, actual results could differ from those estimates.

Recent Accounting Pronouncement - In September 2010, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update No. 2010-25, *Plan Accounting-Defined Contribution Pension Plans* (ASU 2010-25) which amends existing guidance by requiring participant loans to be classified as notes receivable from participants, which are segregated from plan investments and measured at their unpaid principal balance plus any accrued but unpaid interest. The amendments to the Accounting Standards Codification included in ASU 2010-25 are effective for fiscal years ending after December 15, 2010. The Plan has adopted this guidance effective December 31, 2010 and has reclassified participant loans of \$38,958 and \$68,972 for the years ended December 31, 2010 and 2009, respectively, from investments to notes receivable from participants.

Investment Valuation - Investments are stated at fair value as certified by Fidelity Management Trust Company (the Trustee). Fair value is the price that would be received to sell an asset or paid to transfer a liability (i.e., the "exit price") in an orderly transaction between market participants at the measurement date. See Note 4 for discussion of fair value measurements.

Income Recognition - Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Interest income is recorded on the accrual basis. The net appreciation in fair value of investments consists of both the realized gains or losses and the unrealized appreciation and depreciation of those investments.

Payment of Benefits - Benefits are recorded when paid.

Note 2 - Summary of Significant Accounting Policies (Continued)

Expenses - Administrative expenses are paid by the Company. Certain recordkeeping and transaction fees are paid by the Plan.

Subsequent Events - The Plan has evaluated subsequent events through July 25, 2011, which is the date the financial statements were available to be issued.

Note 3 - Investments

Investments representing 5% or more of net assets available for benefits consist of the following as of December 31:

	2010		2009	
Fidelity Diversified International Fund	\$	743,643	\$	788,910
Fidelity Retirement Money Market Portfolio		572,724		686,394
Fidelity Contrafund		514,349		493,232
Spartan Total Market Index Fund		447,791		*
Fidelity Growth Company Fund		*		423,051

^{*} Investment did not represent over 5% of net assets at December 31 of the respective year.

Note 4 - Fair Value Measurements

In accordance with authoritative guidance, the Plan classifies its investments based upon an established 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 are described below:

Level 1	Unadjusted quoted prices in active markets that are accessible at the measurement
	date for identical, unrestricted assets or liabilities;

Level 2	Quoted prices in markets that are not considered to be active or financial instruments
	without quoted market prices, but for which all significant inputs are observable,
	either directly or indirectly;

Level 3 Prices or valuations that require inputs that are both significant to the fair value measurement and unobservable.

A financial instrument's level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. There have been no changes in the methodologies used as of December 31, 2010 and 2009.

Note 4 - Fair Value Measurements (Continued)

Shares of mutual funds are valued using the net asset value (NAV) provided by the administrator of the fund. The NAV is based on the value of the underlying assets owned by the fund, minus its liabilities, and then divided by the number of shares outstanding. The NAV is a quoted price in an active market and is classified within level 1 of the valuation hierarchy.

The money market fund is a public investment vehicle valued using \$1 for the NAV. The money market fund is classified within level 1 of the valuation hierarchy.

The following table discloses by level, the fair value hierarchy:

	Investments at Fair Value as of December 31, 2010				31, 2010	
	Level 1	Level 2		Level 3		Total
Mutual funds						
Growth funds	\$ 4,923,940	\$	-	\$	-	\$ 4,923,940
Target date funds	1,562,481		-		-	1,562,481
Fixed income funds	597,459		-	-		597,459
Index funds	586,051		-		-	586,051
Balanced funds	150,639		-		-	150,639
Money market fund	572,724		-		-	572,724
	\$ 8,393,294	\$		\$	-	\$ 8,393,294
	Investi	ments a	t Fair Valu	e as of De	ecember 3	31, 2009
	Level 1	Le	evel 2	Le	evel 3	Total
Mutual funds						
Growth funds	\$ 4,750,749	\$	-	\$	-	\$ 4,750,749
Target date funds	1,348,305		-		-	1,348,305
Fixed income funds	588,622		-		-	588,622
Index funds	482,143		-		-	482,143
Balanced funds	124,539		-		-	124,539
Money market fund	686,394		-		-	686,394
	\$ 7,980,752	\$		\$	-	\$ 7,980,752

Note 5 - Tax Status

The plan is based on a prototype defined contribution plan that received a favorable opinion letter from the Internal Revenue Service dated March 31, 2008, which stated that the prototype plan, as then designed, was in accordance with applicable sections of the Internal Revenue Code (IRC). Although the prototype plan and the Plan have been amended since receiving the opinion letter, the plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

Note 5 - Tax Status (Continued)

The FASB issued new guidance on accounting for uncertainty in income taxes (ASC 740-10). The Plan has adopted this new guidance and management has evaluated the Plan's tax position and concluded that the Plan had maintained its tax exempt status and had taken no uncertain tax position that requires adjustment to the financial statements. Therefore, no provision or liability for income taxes has been included in the financial statements.

Note 6 - Risks and Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks, such as interest rate, market volatility, and credit risks. It is reasonably possible, given the level of risk associated with investment securities, that changes in the near term could materially affect a participant's account balance and the amounts reported in the financial statements.

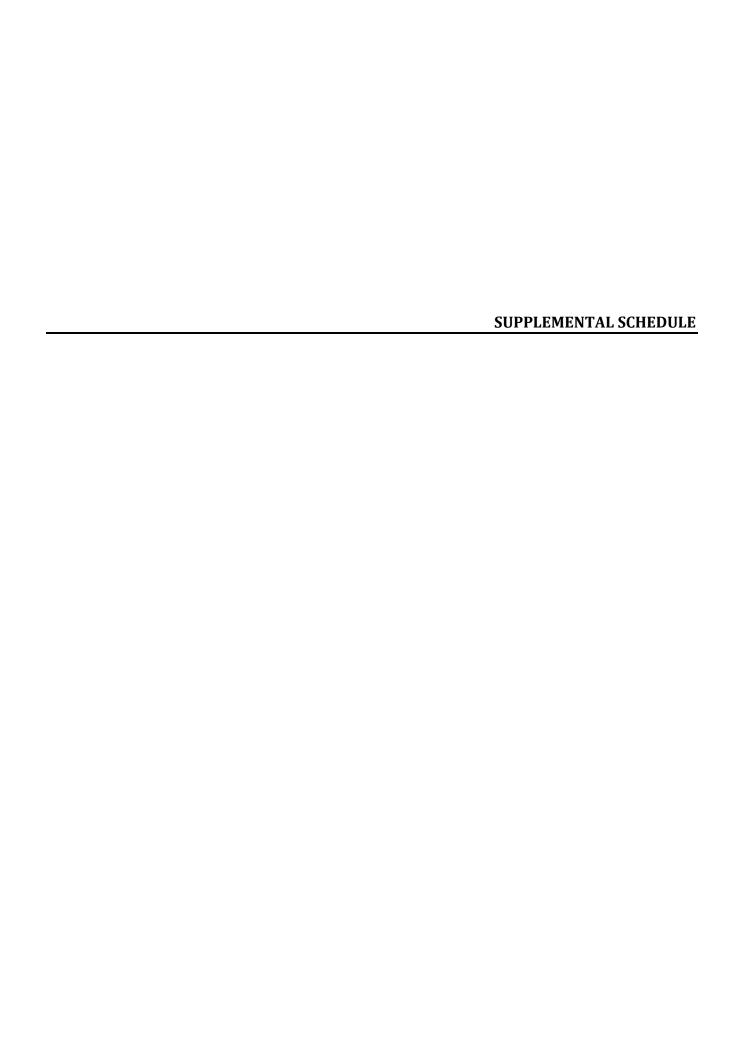
Note 7 - Party-In-Interest Transactions

Plan investments include shares of mutual funds managed by Fidelity Investments. The Trustee is an affiliate of Fidelity Investments and, therefore, transactions with these entities qualify as exempt party-in-interest transactions.

Note 8 - Information Certified by the Trustee

The following information included in the accompanying financial statements and supplemental schedule was obtained from data that has been prepared and certified as complete and accurate by the Trustee:

- Investments and notes receivable from participants reflected on the accompanying statements of net assets available for benefits as of December 31, 2010 and 2009.
- Investment income and interest income on notes receivable from participants reflected on the accompanying statement of changes in net assets available for benefits for the year ended December 31, 2010.
- Investments reflected on the supplemental schedule of assets (held at end of year).



ASCENTIUM 401(k) PLAN

EIN: 91-2105883

PLAN: 001

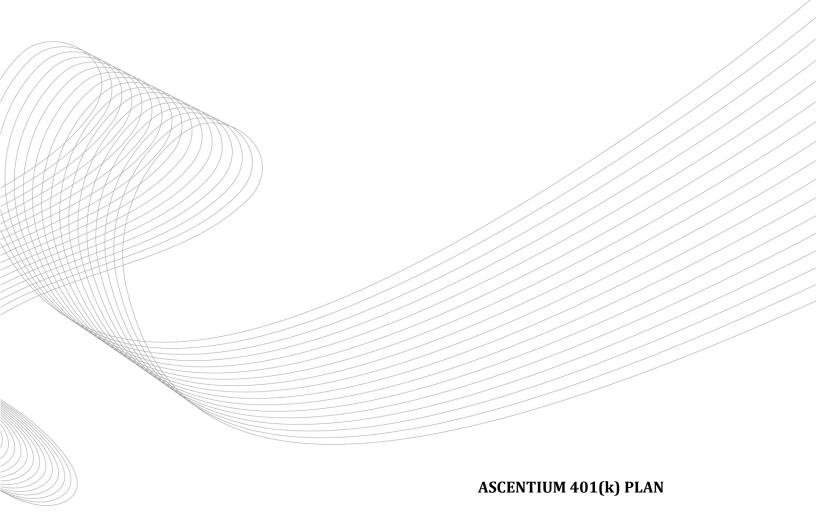
SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2010

(a)	(b) Identity of Issuer, borrower, lessor or similar party	(c) Description of Investment Including Maturity Date, Rate of Interest, Par Value, or Maturity Value	(d) Cost		(e) Current Value
*	Fidelity Diversified International Fund	Mutual Fund	**	\$	743,643
*	Fidelity Retirement Money Market Portfolio	Money Market Fund	**	•	572,724
*	Fidelity Contrafund	Mutual Fund	**		514,349
*	Spartan Total Market Index Fund	Mutual Fund	**		447,791
*	Fidelity Freedom 2030 Fund	Mutual Fund	**		383,614
*	Fidelity Growth Company Fund	Mutual Fund	**		376,458
*	Fidelity Mid Cap Stock Fund	Mutual Fund	**		375,642
*	Fidelity Blue Chip Growth Fund	Mutual Fund	**		372,775
*	Fidelity Value Fund	Mutual Fund	**		346,345
*	Fidelity Intermediate Bond Fund	Mutual Fund	**		336,116
*	Fidelity Freedom 2040 Fund	Mutual Fund	**		312,860
*	Fidelity Freedom 2020 Fund	Mutual Fund	**		299,714
*	Fidelity Freedom 2035 Fund	Mutual Fund	**		290,585
*	Fidelity Export and Multinational Fund	Mutual Fund	**		288,345
*	Fidelity Overseas Fund	Mutual Fund	**		213,307
*	Fidelity Low Price Stock Fund	Mutual Fund	**		212,944
*	Fidelity Real Estate Investment Fund	Mutual Fund	**		195,490
*	Fidelity Investment Grade Bond Fund	Mutual Fund	**		194,699
*	Fidelity Equity-Income II Fund	Mutual Fund	**		169,543
*	Fidelity Dividend Growth Fund	Mutual Fund	**		160,601
*	Fidelity Small Cap Value Fund	Mutual Fund	**		155,352
*	Fidelity Puritan Fund	Mutual Fund	**		150,639
*	Fidelity Value Strategies Fund	Mutual Fund	**		138,850
*	Spartan Extended Market Index Fund	Mutual Fund	**		138,260
*	Fidelity OTC Portfolio Fund	Mutual Fund	**		123,679
*	Fidelity Growth Strategies Fund	Mutual Fund	**		118,080
*	Fidelity Freedom 2050 Fund	Mutual Fund	**		103,120
*	Fidelity Large Cap Stock Fund	Mutual Fund	**		98,347
*	Fidelity Equity Income Fund	Mutual Fund	**		85,745
*	Fidelity Fifty Fund	Mutual Fund	**		85,623
*	Fidelity Fund	Mutual Fund	**		74,995
*	Fidelity Small Cap Discovery Fund	Mutual Fund	**		73,827
*	Fidelity Short Term Bond Fund	Mutual Fund	**		66,644
*	Fidelity Freedom 2045 Fund	Mutual Fund	**		62,155
*	Fidelity Freedom 2025 Fund	Mutual Fund	**		38,159
*	Fidelity Freedom 2000 Fund	Mutual Fund	**		29,777
*	Fidelity Freedom Income Fund	Mutual Fund	**		23,635
*	Fidelity Freedom 2015 Fund	Mutual Fund	**		9,689
*	Fidelity Freedom 2010 Fund	Mutual Fund	**		8,369
*	Fidelity Freedom 2005 Fund	Mutual Fund	**		804
*	Participant loans	Interest rates from 5% to 6%,			004
	i ai acipant ioans	maturing through April 2017	-		38,958
				\$	8,432,252

^{*} Represents a party-in-interest to the Plan.

^{**} Cost information has been omitted as these investments are participant directed.



Report of Independent Auditors and Financial Statements with Supplemental Schedule

December 31, 2010 and 2009

MOSS-ADAMS LLP

Certified Public Accountants | Business Consultants

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REPORT OF INDEPENDENT AUDITORS

To the Plan Administrator Ascentium 401(k) Plan

We were engaged to audit the accompanying statements of net assets available for benefits of Ascentium 401(k) Plan as of December 31, 2010 and 2009, and the related statement of changes in net assets available for benefits for the year ended December 31, 2010, and the supplemental schedule of Schedule H, Line 4(i) - Schedule of Assets (Held At End of Year) as of December 31, 2010. These financial statements and supplemental schedule 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 Employee 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 investment information summarized in Note 8, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing such information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that the trustee holds Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of December 31, 2010 and 2009, and for the year ended December 31, 2010, that the information provided to the plan administrator by the trustee is complete and accurate.

Because of the significance of the information we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedule taken as a whole. The form and content of the information included in the financial statements and supplemental schedule, other than that derived from information certified by the trustee, have been audited by us in accordance with auditing standards generally 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.

Mese adams LLP

Seattle, Washington July 25, 2011



ASCENTIUM 401(k) PLAN STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS DECEMBER 31, 2010 AND 2009

	2010	2009
ASSETS		
Investments, at fair value		
Mutual funds	\$ 7,820,570	\$ 7,294,358
Money market fund	572,724	686,394
Notes receivable from participants	38,958_	68,972
NET ASSETS AVAILABLE FOR BENEFITS	\$ 8,432,252	\$ 8,049,724

ASCENTIUM 401(k) PLAN STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS YEAR ENDED DECEMBER 31, 2010

ADDITIONS	
Investment income	
Net appreciation in fair value of investments	\$ 973,304
Dividends	111,528
Interest	115
	1,084,947
Interest income on notes receivable from participants	3,459
Contributions	
Participant	1,242,892
Rollovers	120,420
	1,363,312
Total additions	2,451,718
DEDUCTIONS	
Benefits paid to participants	2,049,488
Administrative expenses	19,702
Total deductions	2,069,190
NET INCREASE	382,528
NET ASSETS AVAILABLE FOR BENEFITS	
Beginning of year	8,049,724
End of year	\$ 8,432,252

Note 1 - Description of the Plan

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

General - The Plan is a defined contribution plan covering substantially all employees of Ascentium Corporation (the Company), except for those employees whose retirement benefits are the subject of collective bargaining. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

During 2010, an operating division of the Company was sold, resulting in the affected employees leaving the Plan. As a result of the reduction in work force associated with the sale of this division, the Company determined that the Plan met the criteria for a partial plan termination. As a result, each participant who was affected by the partial plan termination became fully vested in their account balances.

Eligibility - Employees of the Company are eligible to participate on the date they are hired and have attained the age of 18. Employees may enter the Plan on the first day of the month falling on or after the date they become eligible.

Contributions - Participants may elect to contribute up to 75% of eligible compensation to the Plan each year. Participants may also contribute amounts representing rollovers from other qualified plans. The Company may make discretionary matching and profit sharing contributions to the Plan. Matching contributions are based on a specified percentage of employee deferral contributions. Profit sharing contributions are based on the compensation of the participants. There were no employer matching or profit sharing contributions for the year ended December 31, 2010. Contributions are subject to regulatory limitations.

Vesting - Participants are fully vested in their salary deferral contributions plus actual earnings thereon. Vesting in the Company's contributions is based on years of service. A participant is 33%, 67%, and 100% vested after 1, 2, and 3 years of service, respectively.

Payment of Benefits - On termination of service, a participant may elect to receive either a lump-sum amount equal to the value of the participant's vested account balance or installments as defined by the plan agreement.

Participant Accounts - Each participant's account is credited with the participant's contribution and allocation of the Company's contributions and earnings. 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.

Forfeitures - Forfeitures are the nonvested portion of a participant's account that is lost upon termination of employment. Forfeitures are retained in the Plan and used to pay administrative expenses or to reduce the Company's contributions. At December 31, 2010 and 2009, forfeited accounts totaled \$3,655 and \$13,027, respectively. During the year ended December 31, 2010, forfeitures totaling \$15,301 were used to pay administrative expenses of the Plan.

Note 1 - Description of the Plan (Continued)

Notes Receivable from Participants - Participants may borrow from their accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. Generally, the term of the loan may not exceed five years, unless the loan is to purchase a personal residence. The loans are secured by the balance in the participant's account and bear interest at a rate equal to available market financing rates. Principal and interest are paid ratably through payroll deductions. Interest rates on outstanding loans range from 5% to 6% with various maturities through April 2017.

Plan Termination - Although it has not expressed any intent to do so, the Company has the right to terminate the Plan subject to the provisions of ERISA. If the Plan is terminated, amounts allocated to a participant's account become fully vested.

Note 2 - Summary of Significant Accounting Policies

Basis of Accounting - The financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America, using the accrual method of accounting.

Use of Estimates - The preparation of financial statements in conformity with generally accepted accounting principles requires the use of estimates and assumptions that may affect certain amounts and disclosures. Accordingly, actual results could differ from those estimates.

Recent Accounting Pronouncement - In September 2010, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update No. 2010-25, *Plan Accounting-Defined Contribution Pension Plans* (ASU 2010-25) which amends existing guidance by requiring participant loans to be classified as notes receivable from participants, which are segregated from plan investments and measured at their unpaid principal balance plus any accrued but unpaid interest. The amendments to the Accounting Standards Codification included in ASU 2010-25 are effective for fiscal years ending after December 15, 2010. The Plan has adopted this guidance effective December 31, 2010 and has reclassified participant loans of \$38,958 and \$68,972 for the years ended December 31, 2010 and 2009, respectively, from investments to notes receivable from participants.

Investment Valuation - Investments are stated at fair value as certified by Fidelity Management Trust Company (the Trustee). Fair value is the price that would be received to sell an asset or paid to transfer a liability (i.e., the "exit price") in an orderly transaction between market participants at the measurement date. See Note 4 for discussion of fair value measurements.

Income Recognition - Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Interest income is recorded on the accrual basis. The net appreciation in fair value of investments consists of both the realized gains or losses and the unrealized appreciation and depreciation of those investments.

Payment of Benefits - Benefits are recorded when paid.

Note 2 - Summary of Significant Accounting Policies (Continued)

Expenses - Administrative expenses are paid by the Company. Certain recordkeeping and transaction fees are paid by the Plan.

Subsequent Events - The Plan has evaluated subsequent events through July 25, 2011, which is the date the financial statements were available to be issued.

Note 3 - Investments

Investments representing 5% or more of net assets available for benefits consist of the following as of December 31:

	2010		 2009	
Fidelity Diversified International Fund	\$	743,643	\$ 788,910	
Fidelity Retirement Money Market Portfolio		572,724	686,394	
Fidelity Contrafund		514,349	493,232	
Spartan Total Market Index Fund		447,791	*	
Fidelity Growth Company Fund		*	423,051	

^{*} Investment did not represent over 5% of net assets at December 31 of the respective year.

Note 4 - Fair Value Measurements

In accordance with authoritative guidance, the Plan classifies its investments based upon an established 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 are described below:

Level 1	Unadjusted quoted prices in active markets that are accessible at the measurement
	date for identical, unrestricted assets or liabilities;

Level 2	Quoted prices in markets that are not considered to be active or financial instruments
	without quoted market prices, but for which all significant inputs are observable,
	either directly or indirectly;

Level 3 Prices or valuations that require inputs that are both significant to the fair value measurement and unobservable.

A financial instrument's level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. There have been no changes in the methodologies used as of December 31, 2010 and 2009.

Note 4 - Fair Value Measurements (Continued)

Shares of mutual funds are valued using the net asset value (NAV) provided by the administrator of the fund. The NAV is based on the value of the underlying assets owned by the fund, minus its liabilities, and then divided by the number of shares outstanding. The NAV is a quoted price in an active market and is classified within level 1 of the valuation hierarchy.

The money market fund is a public investment vehicle valued using \$1 for the NAV. The money market fund is classified within level 1 of the valuation hierarchy.

The following table discloses by level, the fair value hierarchy:

	Investments at Fair Value as of December 31, 2010						
	Level 1	Le	evel 2	Level 3		Total	
Mutual funds							
Growth funds	\$ 4,923,940	\$	-	\$	-	\$ 4,923,940	
Target date funds	1,562,481		-		-	1,562,481	
Fixed income funds	597,459		-		-	597,459	
Index funds	586,051		-		-	586,051	
Balanced funds	150,639		-		-	150,639	
Money market fund	572,724		-			572,724	
	\$ 8,393,294	\$		\$		\$ 8,393,294	
	Investi	ments a	t Fair Valu	e as of Do	ecember 3	31, 2009	
	Level 1	Le	evel 2	Level 3		Total	
Mutual funds							
Growth funds	\$ 4,750,749	\$	-	\$	-	\$ 4,750,749	
Target date funds	1,348,305		-		-	1,348,305	
Fixed income funds	588,622		-		-	588,622	
Index funds	482,143		-		-	482,143	
Balanced funds	124,539		-		-	124,539	
Money market fund	686,394		-		-	686,394	
	\$ 7,980,752	\$		\$	-	\$ 7,980,752	

Note 5 - Tax Status

The plan is based on a prototype defined contribution plan that received a favorable opinion letter from the Internal Revenue Service dated March 31, 2008, which stated that the prototype plan, as then designed, was in accordance with applicable sections of the Internal Revenue Code (IRC). Although the prototype plan and the Plan have been amended since receiving the opinion letter, the plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

Note 5 - Tax Status (Continued)

The FASB issued new guidance on accounting for uncertainty in income taxes (ASC 740-10). The Plan has adopted this new guidance and management has evaluated the Plan's tax position and concluded that the Plan had maintained its tax exempt status and had taken no uncertain tax position that requires adjustment to the financial statements. Therefore, no provision or liability for income taxes has been included in the financial statements.

Note 6 - Risks and Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks, such as interest rate, market volatility, and credit risks. It is reasonably possible, given the level of risk associated with investment securities, that changes in the near term could materially affect a participant's account balance and the amounts reported in the financial statements.

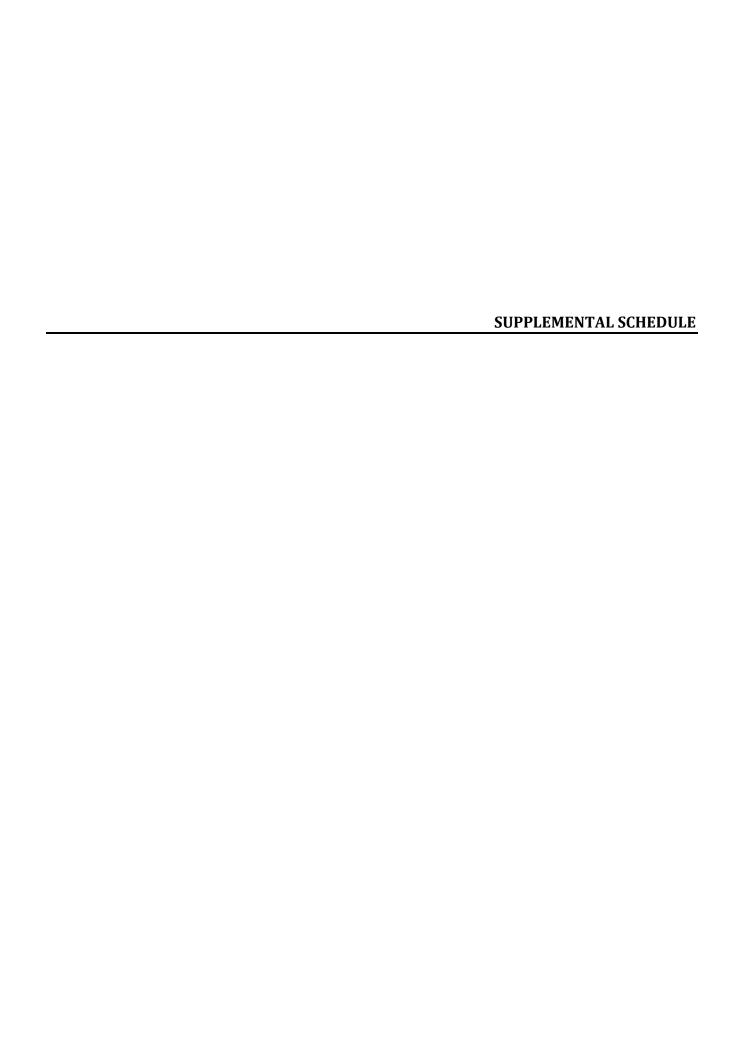
Note 7 - Party-In-Interest Transactions

Plan investments include shares of mutual funds managed by Fidelity Investments. The Trustee is an affiliate of Fidelity Investments and, therefore, transactions with these entities qualify as exempt party-in-interest transactions.

Note 8 - Information Certified by the Trustee

The following information included in the accompanying financial statements and supplemental schedule was obtained from data that has been prepared and certified as complete and accurate by the Trustee:

- Investments and notes receivable from participants reflected on the accompanying statements of net assets available for benefits as of December 31, 2010 and 2009.
- Investment income and interest income on notes receivable from participants reflected on the accompanying statement of changes in net assets available for benefits for the year ended December 31, 2010.
- Investments reflected on the supplemental schedule of assets (held at end of year).



ASCENTIUM 401(k) PLAN

EIN: 91-2105883

PLAN: 001

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

DECEMBER 31, 2010

(a)	(b) Identity of Issuer, borrower, lessor or similar party	Identity of Issuer, borrower, Maturity Date, Rate of Interest,		(e) Current Value	
*	Fidelity Diversified International Fund	Mutual Fund	**	\$	743,643
*	Fidelity Retirement Money Market Portfolio	Money Market Fund	**	•	572,724
*	Fidelity Contrafund	Mutual Fund	**		514,349
*	Spartan Total Market Index Fund	Mutual Fund	**		447,791
*	Fidelity Freedom 2030 Fund	Mutual Fund	**		383,614
*	Fidelity Growth Company Fund	Mutual Fund	**		376,458
*	Fidelity Mid Cap Stock Fund	Mutual Fund	**		375,642
*	Fidelity Blue Chip Growth Fund	Mutual Fund	**		372,775
*	Fidelity Value Fund	Mutual Fund	**		346,345
*	Fidelity Intermediate Bond Fund	Mutual Fund	**		336,116
*	Fidelity Freedom 2040 Fund	Mutual Fund	**		312,860
*	Fidelity Freedom 2020 Fund	Mutual Fund	**		299,714
*	Fidelity Freedom 2035 Fund	Mutual Fund	**		290,585
*	Fidelity Export and Multinational Fund	Mutual Fund	**		288,345
*	Fidelity Overseas Fund	Mutual Fund	**		213,307
*	Fidelity Low Price Stock Fund	Mutual Fund	**		212,944
*	Fidelity Real Estate Investment Fund	Mutual Fund	**		195,490
*	Fidelity Investment Grade Bond Fund	Mutual Fund	**		194,699
*	Fidelity Equity-Income II Fund	Mutual Fund	**		169,543
*	Fidelity Dividend Growth Fund	Mutual Fund	**		160,601
*	Fidelity Small Cap Value Fund	Mutual Fund	**		155,352
*	Fidelity Puritan Fund	Mutual Fund	**		150,639
*	Fidelity Value Strategies Fund	Mutual Fund	**		138,850
*	Spartan Extended Market Index Fund	Mutual Fund	**		138,260
*	Fidelity OTC Portfolio Fund	Mutual Fund	**		123,679
*	Fidelity Growth Strategies Fund	Mutual Fund	**		118,080
*	Fidelity Freedom 2050 Fund	Mutual Fund	**		103,120
*	Fidelity Large Cap Stock Fund	Mutual Fund	**		98,347
*	Fidelity Equity Income Fund	Mutual Fund	**		85,745
*	Fidelity Fifty Fund	Mutual Fund	**		85,623
*	Fidelity Fund	Mutual Fund	**		74,995
*	Fidelity Small Cap Discovery Fund	Mutual Fund	**		73,827
*	Fidelity Short Term Bond Fund	Mutual Fund	**		66,644
*	Fidelity Freedom 2045 Fund	Mutual Fund	**		62,155
*	Fidelity Freedom 2025 Fund	Mutual Fund	**		38,159
*	Fidelity Freedom 2000 Fund	Mutual Fund	**		29,777
*	Fidelity Freedom Income Fund	Mutual Fund	**		23,635
*	Fidelity Freedom 2015 Fund	Mutual Fund	**		9,689
*	Fidelity Freedom 2010 Fund	Mutual Fund	**		8,369
*	Fidelity Freedom 2005 Fund	Mutual Fund	**		804
*	Participant loans	Interest rates from 5% to 6%,			007
	i ai deipant ioans	maturing through April 2017	-		38,958
				\$	8,432,252

^{*} Represents a party-in-interest to the Plan.

^{**} Cost information has been omitted as these investments are participant directed.