Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

A This return/report is for:
- [ ] a multiemployer plan;
- [X] a multiple-employer plan; or
- [ ] a single-employer plan;
- [ ] a DFE (specify) ____

B This return/report is:
- [ ] the first return/report;
- [ ] the final return/report;
- [ ] an amended return/report;
- [ ] a short plan year return/report (less than 12 months).

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [ ]

D Check box if filing under:
- [X] Form 5558;
- [ ] automatic extension;
- [ ] the DFVC program;
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
INFOR GLOBAL SOLUTIONS 401(K) PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 09/01/2002

2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.)
INFOR GLOBAL SOLUTIONS MICHIGAN, INC.

13560 MORRIS ROAD
SUITE 4100
ALPHARETTA, GA 30004

13560 MORRIS ROAD
SUITE 4100
ALPHARETTA, GA 30004

2b Employer Identification Number (EIN) 38-3489088

2c Sponsor's telephone number 678-319-8817

2d Business code (see instructions) 541511

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.	10/11/2011	MARLON ATLOW
	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")
INFOR GLOBAL SOLUTIONS MICHIGAN, INC.

13560 MORRIS ROAD
SUITE 4100
ALPHARETTA, GA 30004

3b Administrator's EIN
38-3489088

3c Administrator's telephone number
678-319-8817

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

5	Total number of participants at the beginning of the plan year	**5**	4702
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**	3235
b	Retired or separated participants receiving benefits	**6b**	36
c	Other retired or separated participants entitled to future benefits	**6c**	1384
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	4655
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	5
f	Total. Add lines **6d** and **6e**	**6f**	4660
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	3809
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	82
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
2F 2G 2J 2K 2R 2T 3D 3H

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)	X	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)	X	Trust
(4)		General assets of the sponsor

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

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2010** **This Form is Open to Public Inspection.**

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

A Name of plan
INFOR GLOBAL SOLUTIONS 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
INFOR GLOBAL SOLUTIONS MICHIGAN, INC.

D Employer Identification Number (EIN)
38-3489088

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).. . . . . [X] 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

FID.INV.INST.OPS.CO.

04-2647786

(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)

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(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?
64 37 65 71 60	RECORDKEEPER	21906	Yes [X] No [ ]	Yes [X] 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?	(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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
AM CENT SM COMP INV - AMERICAN CENT 44-0619208	0.35%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
ARTISAN MID CAP INV - BOSTON FINANC 04-2526037	0.40%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
BLKRK MIDCAP VAL IS - PNC GLOBAL IN 04-2871943	0.25%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
LD ABBETT MIDCPVAL P - DST SYSTEMS, 43-1581814	0.45%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUT	60	0

(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.
T ROWE PRICE NEW ERA	4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	3.00

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUT	60	0

(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.
PRUDENTIAL JENNISON NATURAL RESOURC	100 MULBERRY STREET GATEWAY CNTR 3 NEWARK, NJ 07102	0.10% + 12.00

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

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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:

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

2010

This Form is Open to Public Inspection

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

A Name of plan
INFOR GLOBAL SOLUTIONS 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
INFOR GLOBAL SOLUTIONS MICHIGAN, INC.

D Employer Identification Number (EIN)
38-3489088

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	0	264
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)	16934242	16947390
(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)	0	638719
(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)	2288944	2684615
(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)	159600729	190730325
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	0	-376

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(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	178823915	211000937
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			
l Net assets (subtract line 1k from line 1f)	1l	178823915	211000937

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)	3471	
(B) Participants	2a(1)(B)	18297049	
(C) Others (including rollovers)	2a(1)(C)	432403	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		18732923
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	3369	
(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)	149543	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		152912
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	1225	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	3219139	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		3220364
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	269232	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	268454	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		778

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	38228	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		38228
(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)		22986978
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		45132183
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	12932371	
(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)		12932371
f Corrective distributions (see instructions)	2f		1481
g Certain deemed distributions of participant loans (see instructions)	2g		-405
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)	22102	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		22102
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		12955549
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		32176634
l Transfers of assets:			
(1) To this plan	2l(1)		388
(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) [X] 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)? [X] Yes [ ] No

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

(1) Name: WINDHAM BRANNON P.C (2) EIN: 58-1763439

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.)	4a	X		51430
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.)	4b		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.)	4c		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.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		10000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		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?	4g		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?	4h		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.)	4i	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.)	4j		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?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		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.	4n		X	

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)

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

2010

This Form is Open to Public Inspection.

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

A Name of plan
INFOR GLOBAL SOLUTIONS 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
INFOR GLOBAL SOLUTIONS MICHIGAN, INC.

D Employer Identification Number (EIN)
38-3489088

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** 0

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): 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 plan year. **3**

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section of 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**

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):

---

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):

Infor Global Solutions, Inc.

Financial Statements

December 31, 2010 and 2009

Infor Global Solutions, Inc.

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December 31, 2010 and 2009

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WINDHAM BRANNON

WINDHAM BRANNON

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INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator of
Infor Global Solutions, Inc.

We were engaged to audit the accompanying statements of net assets available for benefits of Infor Global Solutions, Inc. (the Plan) as of December 31, 2010 and 2009, the related statement of changes in net assets available for benefits for the year ended December 31, 2010, the supplemental schedule H, line 4i – schedule of assets (held at end of year) as of December 31, 2010 and the supplemental schedule H, line 4a – schedule of delinquent participant contributions for the year ended December 31, 2010. These financial statements and 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 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 information referred to in Note 3, 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 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 trustee as of and for the years ended December 31, 2010 and 2009, that the information provided to the plan administrator by the trustee 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 trustee, have been audited by us in accordance with auditing standards generally accepted in the United States 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.

Windham Brannon, P.C.
Certified Public Accountants

October 5, 2011

Infor Global Solutions, Inc.

Statements of Net Assets Available for Benefits
December 31, 2010 and 2009

	2010	2009
Assets		
Cash	**$ 264**	$ -
Investments		
Mutual funds:		
Target date funds	**64,036,668**	57,093,582
Large cap funds	**51,859,918**	42,869,926
Mid cap funds	**19,244,217**	13,669,101
International funds	**19,015,886**	18,063,321
Bond index funds	**16,589,000**	14,499,122
Small cap funds	**11,785,415**	7,906,806
Real estate funds	**8,123,631**	5,498,871
Money market funds	**16,165,158**	16,934,243
Self-directed brokerage accounts	**1,496,165**	-
Total investments	**208,316,058**	176,534,972
Receivables		
Participant contributions	**590,506**	-
Notes receivable from participants	**2,684,615**	2,288,944
Total receivables	**3,275,121**	2,288,944
Net assets available for benefits	**$ 211,591,443**	$ 178,823,916

The accompanying notes are an integral part of these financial statements.

Infor Global Solutions, Inc.

Statement of Changes in Net Assets Available for Benefits
For the Year Ended December 31, 2010

Additions	
Investment income:	
Net change in fair value of mutual funds	$ 26,199,713
Net change in fair value of self-directed brokerage accounts	47,591
Interest on money market funds	3,206
Total investment income	26,250,510
Interest on notes receivable from participants	149,543
Contributions:	
Participants	18,887,555
Rollovers	432,403
Total contributions	19,319,958
Total additions	45,720,011
Deductions	
Benefits paid to participants	12,930,382
Participant transaction fees	22,102
Total deductions	12,952,484
Net increase	32,767,527
Net assets available for benefits	
Beginning of year	178,823,916
End of year	$ 211,591,443

The accompanying notes are an integral part of these financial statements.

1. Description of Plan

The following description of the Infor Global Solutions, Inc. employee benefit plan (the Plan) provides only general information. Participants should refer to the Plan document, copies of which are available from the plan administrator, for a complete description of the Plan's provisions.

General

The Plan is a defined contribution plan. All employees of Infor Global Solutions (Michigan), Inc. and its subsidiaries (the Company or Sponsor), except temporary employees and employees under 21 years of age, are eligible to participate in the Plan. Eligible employees may enter the Plan on the first day of each month. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

As of January 1, 2010, the Plan was amended to add Softbrands Manufacturing as a qualified employer. The Company intends to merge the Softbrands Manufacturing 401(k) Plan in the Plan in 2011.

Contributions

Each participant may make pre-tax contributions of up to 60% of eligible compensation as defined by the Plan, not to exceed a maximum of $16,500 in 2010, plus an additional $5,500 catch-up contribution for participants age 50 or older. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans (rollovers).

The Company may make a discretionary matching contribution based on a percentage of each participant's deferral, which is determined annually. No matching contributions were made in 2010.

Participant Accounts

Each participant's account is credited with the participant's contribution, rollovers, the Company's contribution and earnings on the investments of their accounts, and is charged with specific transaction fees. Participants direct the investment of their accounts into various investment options offered by the Plan. The Company currently offers twenty-five mutual funds, two money market funds, and a self-directed brokerage account as investment options for participants. Participants may change their investment options on a daily basis. A participant is entitled to the benefit that can be provided from the participant's vested account. Approximately 37% of participants are no longer employees of the company.

Vesting

Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Company's contribution is based on years of credited service. A participant is vested in annual increments of 20% for each year of service and is 100% vested after five years of service.

Matching contributions from prior employers of merged plans are 100% vested.

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 the vested balance of their account. The loans are secured by the balance in the participant's account and must bear a reasonable rate of interest. During the year ended December 31, 2010, loans had fixed rates ranging from 4.5% to 10.5% for the term of the loan, not to exceed 5 years or 10 years if used for the purchase of a primary residence. Principal and interest are paid through payroll deductions.

Payment of Benefits

At the time of death, disability, termination of service or retirement, the participant or their beneficiary may receive payment of the vested interest in their account in the form of a lump-sum distribution. The participant's contribution may also be withdrawn for certain hardship situations.

Forfeited Accounts

At December 31, 2010 and 2009, forfeited non-vested accounts totaled $197,230 and $99,732, respectively. These accounts are first used to reduce future Company contributions and then to pay administrative expenses of the Plan. During the year ended December 31, 2010, no forfeitures were used to reduce Company contributions or to pay administrative expenses.

Administrative Expenses

Administrative fees of the Plan may be allocated to participants, paid through forfeitures, or paid by the Sponsor. Participant transaction fees are charged directly to the participant.

2. Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are presented on the accrual basis of accounting.

Use of Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

Valuation of Investments

The Plan's investments are stated 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 5 for a discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Net change in fair value of investments includes realized and unrealized gains and losses on those investments and interest and dividends on mutual funds and investments in the self-directed brokerage accounts.

Notes Receivable from Participants

Participant loans are carried at their outstanding balance. Interest income is recognized when received. Participant loans were classified as investments in the prior year, but have been classified as notes receivable in these financial statements in accordance with a recent change in accounting principles generally accepted in the United States.

Payment of Benefits

Benefits are recorded when paid.

Subsequent Events

The Plan evaluates events occurring subsequent to the date of the financial statements in determining the accounting for and disclosure of transactions and events that affect the financial statements. Subsequent events have been evaluated through October 5, 2010, which is the date the financial statements were available to be issued.

3. Information Certified by the Trustee

All information regarding investments and notes receivable from participants disclosed in the accompanying financial statements and supplemental schedules, including investments held and notes receivable from participants at December 31, 2010 and 2009, net change in fair value of investments and interest income for the year ended December 31, 2010, was obtained or derived from information supplied to the plan administrator and certified as complete and accurate by Fidelity Management Trust Company (Fidelity), the Plan's trustee.

4. Investments

Investments at December 31, 2010 and 2009 that represent 5% or more of the Plan's net assets are as follows:

	2010	2009
Mutual Funds:		
Fidelity Diversified International	**$ 18,997,891**	$ 18,063,321
Fidelity *Contrafund* ®	**17,317,905**	13,813,766
Fidelity US Bond Index	**16,589,000**	14,499,122
Fidelity Freedom 2020	**15,369,252**	13,379,444
Artisan Mid Cap Investment	**15,001,907**	10,142,188
Fidelity Freedom 2025	**12,664,213**	11,469,280
Fidelity Small Cap Discovery	**11,676,762**	*
Fidelity Freedom 2030	**10,847,766**	9,268,384
Fidelity Retirement Money Market Portfolio	**16,164,860**	16,933,945

* Investment is less than 5% of the Plan's net assets

Certain Plan investments are shares of money market and mutual funds managed by Fidelity. Fidelity is the trustee as defined by the Plan and, therefore, transactions in these investments qualify as party- in-interest transactions.

Investments are exposed to various risks, such as market, interest rate, and credit risks. It is at least reasonably possible that changes in their fair value will occur in the near term and that such changes could materially affect participants' account balances.

5. Fair Value Measurements

The Financial Accounting Standards Board established a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value into three levels. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities, and the lowest priority to unobservable inputs. The three levels of the fair value hierarchy are described as follows:

Level 1 – unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access

Level 2 – quoted market prices for similar assets or liabilities in active markets, 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, or inputs that are derived principally from or corroborated by observable market data by correlation or other means

Level 3 – unobservable inputs

Observable inputs are those based on market data obtained from sources independent of the Plan, and unobservable inputs reflect the Plan's own assumptions based on the best information available. The input levels are not necessarily an indication of the risk or liquidity associated with financial instruments at that level.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2010 and 2009.

Investments in money market accounts, mutual funds, and common stocks are valued at quoted market prices for the identical security in an active market and are considered to be Level 1 assets.

The investments at December 31, 2010 and 2009 are comprised of the following:

	2010	2009
	Level 1	
Mutual funds	**$ 190,654,735**	$ 159,600,729
Money market accounts	**16,165,158**	16,934,243
Self-directed brokerage accounts:		
Cash	**781,856**	-
Common stock	**638,719**	-
Mutual funds	**75,590**	-
Total	**$ 208,316,058**	$ 176,534,972

6. 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 will become fully vested in their employer contributions.

7. Tax Status

The Plan is a prototype plan created by Fidelity, the Plan administrator. The Internal Revenue Service has determined and informed Fidelity by a letter dated March 31, 2008, that the prototype is designed in accordance with the applicable requirements of the Internal Revenue Code (IRC). Although the Plan has not received an individual determination letter and has been amended, the Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and has no income subject to unrelated business income tax. Therefore, no provision for income taxes has been included in the Plan's financial statements. The Plan's income tax returns for the past three years are subject to examination by taxing authorities and may change upon examination.

8. Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements to the Form 5500:

	2010
Net assets available for benefits per the financial statements	**$ 211,591,443**
Less: Current year contributions receivable	**(590,506)**
Net assets available for benefits per the Form 5500	**$ 211,000,937**

The following is a reconciliation of the net increase in net assets available for benefits per the financial statements to the Form 5500:

Net increase in net assets available for benefits per the financial statements	**$ 32,767,527**
Less: Current year contributions receivable	**(590,506)**
Net increase in net assets available for benefits per the Form 5500	**$ 32,177,021**

Contributions receivable are not included in the net assets available for benefits on the Form 5500.

Infor Global Solutions, Inc.

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2010

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment	(e) Current Value
*	Fidelity	Fidelity Diversified International Fund	$ 18,997,891
*	Fidelity	Fidelity *Contrafund* ®	17,317,905
*	Fidelity	Fidelity US Bond Index Fund	16,589,000
*	Fidelity	Fidelity Retirement Money Market Portfolio	16,164,860
*	Fidelity	Fidelity Freedom 2020 Fund ®	15,369,252
	Artisan	Artisan Mid Cap Fund	15,001,907
*	Fidelity	Fidelity Freedom 2025 Fund ®	12,664,213
*	Fidelity	Fidelity Small Cap Discovery Fund	11,676,762
*	Fidelity	Fidelity Freedom 2030 Fund ®	10,847,766
*	Fidelity	Fidelity Equity-Income Fund	9,389,821
*	Fidelity	Fidelity Capital Appreciation Fund	9,341,153
*	Fidelity	Fidelity Dividend Growth Fund	8,595,902
*	Fidelity	Fidelity Real Estate Investment Portfolio	8,123,631
*	Fidelity	Fidelity Freedom 2015 Fund ®	7,371,863
	Spartan	Spartan ® 500 Index Fund	7,215,137
*	Fidelity	Fidelity Freedom 2035 Fund ®	5,259,351
*	Fidelity	Fidelity Freedom 2010 Fund ®	4,475,111
	Blackrock	Blackrock Mid-Cap Value Fund	4,242,310
*	Fidelity	Fidelity Freedom 2040 Fund ®	4,198,898
*	Fidelity	Fidelity Freedom Income Fund ®	1,141,820
*	Fidelity	Fidelity Freedom 2000 Fund ®	831,557
*	Fidelity	Fidelity Freedom 2005 Fund ®	777,394
*	Fidelity	Fidelity Freedom 2045 Fund ®	552,292
*	Fidelity	Fidelity Freedom 2050 Fund ®	547,151
	Spartan	Spartan ® External Market Index Fund	108,653
	Spartan	Spartan ® International Index Fund	17,995
*	Fidelity	Fidelity Retirement Government Money Market	298
	BrokerageLink	Self-directed brokerage accounts	1,496,165
*	Participant Loans	Interest rates ranging from 4.5% to 10.5%	2,684,615
	Investments as of December 31, 2010		$ 211,000,673

* Indicates a party-in-interest to the Plan

Infor Global Solutions, Inc.
Schedule H, Line 4a
Schedule of Delinquent Participant Contributions
For the Year Ended December 31, 2010

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions	Total Fully Corrected Under VFCP and PTE 2002-51
September 30, 2004	$ 51,430	$ 51,430

Infor Global Solutions, Inc.

Financial Statements

December 31, 2010 and 2009

Infor Global Solutions, Inc.

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INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator of
Infor Global Solutions, Inc.

We were engaged to audit the accompanying statements of net assets available for benefits of Infor Global Solutions, Inc. (the Plan) as of December 31, 2010 and 2009, the related statement of changes in net assets available for benefits for the year ended December 31, 2010, the supplemental schedule H, line 4i – schedule of assets (held at end of year) as of December 31, 2010 and the supplemental schedule H, line 4a – schedule of delinquent participant contributions for the year ended December 31, 2010. These financial statements and 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 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 information referred to in Note 3, 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 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 trustee as of and for the years ended December 31, 2010 and 2009, that the information provided to the plan administrator by the trustee 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 trustee, have been audited by us in accordance with auditing standards generally accepted in the United States 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.

Windham Brannon, P.C.
Certified Public Accountants

October 5, 2011

Infor Global Solutions, Inc.

Statements of Net Assets Available for Benefits
December 31, 2010 and 2009

	2010	2009
Assets		
Cash	**$ 264**	$ -
Investments		
Mutual funds:		
Target date funds	**64,036,668**	57,093,582
Large cap funds	**51,859,918**	42,869,926
Mid cap funds	**19,244,217**	13,669,101
International funds	**19,015,886**	18,063,321
Bond index funds	**16,589,000**	14,499,122
Small cap funds	**11,785,415**	7,906,806
Real estate funds	**8,123,631**	5,498,871
Money market funds	**16,165,158**	16,934,243
Self-directed brokerage accounts	**1,496,165**	-
Total investments	**208,316,058**	176,534,972
Receivables		
Participant contributions	**590,506**	-
Notes receivable from participants	**2,684,615**	2,288,944
Total receivables	**3,275,121**	2,288,944
Net assets available for benefits	**$ 211,591,443**	$ 178,823,916

The accompanying notes are an integral part of these financial statements.

Infor Global Solutions, Inc.

Statement of Changes in Net Assets Available for Benefits
For the Year Ended December 31, 2010

Additions	
Investment income:	
Net change in fair value of mutual funds	$ 26,199,713
Net change in fair value of self-directed brokerage accounts	47,591
Interest on money market funds	3,206
Total investment income	26,250,510
Interest on notes receivable from participants	149,543
Contributions:	
Participants	18,887,555
Rollovers	432,403
Total contributions	19,319,958
Total additions	45,720,011
Deductions	
Benefits paid to participants	12,930,382
Participant transaction fees	22,102
Total deductions	12,952,484
Net increase	32,767,527
Net assets available for benefits	
Beginning of year	178,823,916
End of year	$ 211,591,443

The accompanying notes are an integral part of these financial statements.

1. Description of Plan

The following description of the Infor Global Solutions, Inc. employee benefit plan (the Plan) provides only general information. Participants should refer to the Plan document, copies of which are available from the plan administrator, for a complete description of the Plan's provisions.

General

The Plan is a defined contribution plan. All employees of Infor Global Solutions (Michigan), Inc. and its subsidiaries (the Company or Sponsor), except temporary employees and employees under 21 years of age, are eligible to participate in the Plan. Eligible employees may enter the Plan on the first day of each month. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

As of January 1, 2010, the Plan was amended to add Softbrands Manufacturing as a qualified employer. The Company intends to merge the Softbrands Manufacturing 401(k) Plan in the Plan in 2011.

Contributions

Each participant may make pre-tax contributions of up to 60% of eligible compensation as defined by the Plan, not to exceed a maximum of $16,500 in 2010, plus an additional $5,500 catch-up contribution for participants age 50 or older. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans (rollovers).

The Company may make a discretionary matching contribution based on a percentage of each participant's deferral, which is determined annually. No matching contributions were made in 2010.

Participant Accounts

Each participant's account is credited with the participant's contribution, rollovers, the Company's contribution and earnings on the investments of their accounts, and is charged with specific transaction fees. Participants direct the investment of their accounts into various investment options offered by the Plan. The Company currently offers twenty-five mutual funds, two money market funds, and a self-directed brokerage account as investment options for participants. Participants may change their investment options on a daily basis. A participant is entitled to the benefit that can be provided from the participant's vested account. Approximately 37% of participants are no longer employees of the company.

Vesting

Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Company's contribution is based on years of credited service. A participant is vested in annual increments of 20% for each year of service and is 100% vested after five years of service.

Matching contributions from prior employers of merged plans are 100% vested.

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 the vested balance of their account. The loans are secured by the balance in the participant's account and must bear a reasonable rate of interest. During the year ended December 31, 2010, loans had fixed rates ranging from 4.5% to 10.5% for the term of the loan, not to exceed 5 years or 10 years if used for the purchase of a primary residence. Principal and interest are paid through payroll deductions.

Payment of Benefits

At the time of death, disability, termination of service or retirement, the participant or their beneficiary may receive payment of the vested interest in their account in the form of a lump-sum distribution. The participant's contribution may also be withdrawn for certain hardship situations.

Forfeited Accounts

At December 31, 2010 and 2009, forfeited non-vested accounts totaled $197,230 and $99,732, respectively. These accounts are first used to reduce future Company contributions and then to pay administrative expenses of the Plan. During the year ended December 31, 2010, no forfeitures were used to reduce Company contributions or to pay administrative expenses.

Administrative Expenses

Administrative fees of the Plan may be allocated to participants, paid through forfeitures, or paid by the Sponsor. Participant transaction fees are charged directly to the participant.

2. Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are presented on the accrual basis of accounting.

Use of Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

Valuation of Investments

The Plan's investments are stated 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 5 for a discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Net change in fair value of investments includes realized and unrealized gains and losses on those investments and interest and dividends on mutual funds and investments in the self-directed brokerage accounts.

Notes Receivable from Participants

Participant loans are carried at their outstanding balance. Interest income is recognized when received. Participant loans were classified as investments in the prior year, but have been classified as notes receivable in these financial statements in accordance with a recent change in accounting principles generally accepted in the United States.

Payment of Benefits

Benefits are recorded when paid.

Subsequent Events

The Plan evaluates events occurring subsequent to the date of the financial statements in determining the accounting for and disclosure of transactions and events that affect the financial statements. Subsequent events have been evaluated through October 5, 2010, which is the date the financial statements were available to be issued.

3. Information Certified by the Trustee

All information regarding investments and notes receivable from participants disclosed in the accompanying financial statements and supplemental schedules, including investments held and notes receivable from participants at December 31, 2010 and 2009, net change in fair value of investments and interest income for the year ended December 31, 2010, was obtained or derived from information supplied to the plan administrator and certified as complete and accurate by Fidelity Management Trust Company (Fidelity), the Plan's trustee.

4. Investments

Investments at December 31, 2010 and 2009 that represent 5% or more of the Plan's net assets are as follows:

	2010	2009
Mutual Funds:		
Fidelity Diversified International	**$ 18,997,891**	$ 18,063,321
Fidelity *Contrafund* ®	**17,317,905**	13,813,766
Fidelity US Bond Index	**16,589,000**	14,499,122
Fidelity Freedom 2020	**15,369,252**	13,379,444
Artisan Mid Cap Investment	**15,001,907**	10,142,188
Fidelity Freedom 2025	**12,664,213**	11,469,280
Fidelity Small Cap Discovery	**11,676,762**	*
Fidelity Freedom 2030	**10,847,766**	9,268,384
Fidelity Retirement Money Market Portfolio	**16,164,860**	16,933,945

* Investment is less than 5% of the Plan's net assets

Certain Plan investments are shares of money market and mutual funds managed by Fidelity. Fidelity is the trustee as defined by the Plan and, therefore, transactions in these investments qualify as party- in-interest transactions.

Investments are exposed to various risks, such as market, interest rate, and credit risks. It is at least reasonably possible that changes in their fair value will occur in the near term and that such changes could materially affect participants' account balances.

5. Fair Value Measurements

The Financial Accounting Standards Board established a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value into three levels. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities, and the lowest priority to unobservable inputs. The three levels of the fair value hierarchy are described as follows:

Level 1 – unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access

Level 2 – quoted market prices for similar assets or liabilities in active markets, 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, or inputs that are derived principally from or corroborated by observable market data by correlation or other means

Level 3 – unobservable inputs

Observable inputs are those based on market data obtained from sources independent of the Plan, and unobservable inputs reflect the Plan's own assumptions based on the best information available. The input levels are not necessarily an indication of the risk or liquidity associated with financial instruments at that level.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2010 and 2009.

Investments in money market accounts, mutual funds, and common stocks are valued at quoted market prices for the identical security in an active market and are considered to be Level 1 assets.

The investments at December 31, 2010 and 2009 are comprised of the following:

	2010	2009
	Level 1	
Mutual funds	**$ 190,654,735**	$ 159,600,729
Money market accounts	**16,165,158**	16,934,243
Self-directed brokerage accounts:		
Cash	**781,856**	-
Common stock	**638,719**	-
Mutual funds	**75,590**	-
Total	**$ 208,316,058**	$ 176,534,972

6. 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 will become fully vested in their employer contributions.

7. Tax Status

The Plan is a prototype plan created by Fidelity, the Plan administrator. The Internal Revenue Service has determined and informed Fidelity by a letter dated March 31, 2008, that the prototype is designed in accordance with the applicable requirements of the Internal Revenue Code (IRC). Although the Plan has not received an individual determination letter and has been amended, the Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and has no income subject to unrelated business income tax. Therefore, no provision for income taxes has been included in the Plan's financial statements. The Plan's income tax returns for the past three years are subject to examination by taxing authorities and may change upon examination.

8. Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements to the Form 5500:

	2010
Net assets available for benefits per the financial statements	**$ 211,591,443**
Less: Current year contributions receivable	**(590,506)**
Net assets available for benefits per the Form 5500	**$ 211,000,937**

The following is a reconciliation of the net increase in net assets available for benefits per the financial statements to the Form 5500:

Net increase in net assets available for benefits per the financial statements	**$ 32,767,527**
Less: Current year contributions receivable	**(590,506)**
Net increase in net assets available for benefits per the Form 5500	**$ 32,177,021**

Contributions receivable are not included in the net assets available for benefits on the Form 5500.

Infor Global Solutions, Inc.

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2010

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment	(e) Current Value
*	Fidelity	Fidelity Diversified International Fund	$ 18,997,891
*	Fidelity	Fidelity *Contrafund* ®	17,317,905
*	Fidelity	Fidelity US Bond Index Fund	16,589,000
*	Fidelity	Fidelity Retirement Money Market Portfolio	16,164,860
*	Fidelity	Fidelity Freedom 2020 Fund ®	15,369,252
	Artisan	Artisan Mid Cap Fund	15,001,907
*	Fidelity	Fidelity Freedom 2025 Fund ®	12,664,213
*	Fidelity	Fidelity Small Cap Discovery Fund	11,676,762
*	Fidelity	Fidelity Freedom 2030 Fund ®	10,847,766
*	Fidelity	Fidelity Equity-Income Fund	9,389,821
*	Fidelity	Fidelity Capital Appreciation Fund	9,341,153
*	Fidelity	Fidelity Dividend Growth Fund	8,595,902
*	Fidelity	Fidelity Real Estate Investment Portfolio	8,123,631
*	Fidelity	Fidelity Freedom 2015 Fund ®	7,371,863
	Spartan	Spartan ® 500 Index Fund	7,215,137
*	Fidelity	Fidelity Freedom 2035 Fund ®	5,259,351
*	Fidelity	Fidelity Freedom 2010 Fund ®	4,475,111
	Blackrock	Blackrock Mid-Cap Value Fund	4,242,310
*	Fidelity	Fidelity Freedom 2040 Fund ®	4,198,898
*	Fidelity	Fidelity Freedom Income Fund ®	1,141,820
*	Fidelity	Fidelity Freedom 2000 Fund ®	831,557
*	Fidelity	Fidelity Freedom 2005 Fund ®	777,394
*	Fidelity	Fidelity Freedom 2045 Fund ®	552,292
*	Fidelity	Fidelity Freedom 2050 Fund ®	547,151
	Spartan	Spartan ® External Market Index Fund	108,653
	Spartan	Spartan ® International Index Fund	17,995
*	Fidelity	Fidelity Retirement Government Money Market	298
	BrokerageLink	Self-directed brokerage accounts	1,496,165
*	Participant Loans	Interest rates ranging from 4.5% to 10.5%	2,684,615
	Investments as of December 31, 2010		$ 211,000,673

* Indicates a party-in-interest to the Plan

Infor Global Solutions, Inc.
Schedule H, Line 4a
Schedule of Delinquent Participant Contributions
For the Year Ended December 31, 2010

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions	Total Fully Corrected Under VFCP and PTE 2002-51
September 30, 2004	$ 51,430	$ 51,430