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;
- [ ] a multiple-employer plan; or
- [X] 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
PORTICO SYSTEMS 401(K) PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2000

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

518 E. TOWNSHIP LINE ROAD
SUITE 100
BLUE BELL, PA 19422

2b Employer Identification Number (EIN)
23-2892557

2c Sponsor's telephone number
215-358-3738

2d Business code (see instructions)
541519

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.	10/12/2011	EDMUND MOORE, JR.
	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")

PORTICO SYSTEMS, INC.

518 E. TOWNSHIP LINE ROAD
SUITE 100
BLUE BELL, PA 19422

3b Administrator's EIN: 23-2892557

3c Administrator's telephone number: 215-358-3738

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**	124
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**	135
b	Retired or separated participants receiving benefits	**6b**	2
c	Other retired or separated participants entitled to future benefits	**6c**	23
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	160
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	160
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	107
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	18
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:

2E 2F 2G 2J 2K 3D

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	**B** Three-digit plan number (PN) ▶	
PORTICO SYSTEMS 401(K) PLAN		001

C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)
PORTICO SYSTEMS, INC.	23-2892557

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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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)

ASCENSUS

11-3665754

(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?
12 15 37 60		6170	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [X]

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

WEALTH ADVISORY GROUP, INC.

23-2739506

(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?
26 27		39188	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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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
PORTICO SYSTEMS 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
PORTICO SYSTEMS, INC.

D Employer Identification Number (EIN)
23-2892557

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	3822	
(2) Participant contributions	1b(2)	23565	
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	357500	394795
(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)	159693	99134
(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)	3161542	4704048
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

			(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	3706122	5197977
	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	3706122	5197977

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)	171068	
	(B) Participants	2a(1)(B)	763314	
	(C) Others (including rollovers)	2a(1)(C)	21858	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		956240
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
	(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)	7777	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		7777
	(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)	75048	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		75048
	(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)		0

		(a) Amount	(b) Total
2b **(5)** Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(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)		563100
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		1602165
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	65307	
(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)		65307
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: **(1)** Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)	5810	
(3) Investment advisory and management fees	2i(3)	39187	
(4) Other	2i(4)	6	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		45003
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		110310
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		1491855
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) [ ] Unqualified **(2)** [ ] Qualified **(3)** [X] 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: PARENTEBEARD LLC **(2)** EIN: 23-2932984

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		663674
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		2000000
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			

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
PORTICO SYSTEMS 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
PORTICO SYSTEMS, INC.

D Employer Identification Number (EIN)
23-2892557

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): 45-0404698

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):

Portico Systems 401(k) Plan

Financial Statements and
Supplemental Schedules

December 31, 2010 and 2009

Portico Systems 401(k) Plan

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December 31, 2010 and 2009

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ParenteBeard

Independent Auditors' Report

Participants and Plan Administrator
Portico Systems 401(k) Plan

We were engaged to audit the accompanying statement of net assets available for benefits of the Portico Systems 401(k) Plan (the "Plan") as of December 31, 2010 and the related statement of changes in net assets available for benefits for the year then ended, and the supplemental schedules of: (1) Schedule H, line 4(a) – Schedule of Delinquent Participant Contributions and (2) Schedule H, line 4(i) – Schedule of Assets (Held at End of Year) as of December 31, 2010. These financial statements and supplemental schedules are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA"), the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information discussed in Note 3, which was certified by Ascensus, a Frontier 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 a certification from the trustee as of 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 that we did not audit, we are unable to, and do not, express an opinion on the accompanying 2010 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 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 ERISA.

We have compiled the accompanying statement of net assets available for benefits as of December 31, 2009 in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants.

A compilation is limited to presenting in the form of financial statements information that is representation of management. We have not audited or reviewed the accompanying statement of net assets available for benefits as of December 31, 2009 and, accordingly, do not express an opinion or any other form of assurance on it.

ParenteBeard LLC

Philadelphia, Pennsylvania
October 11 , 2011

Portico Systems 401(k) Plan

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

	2010 (Audited)	2009 (Complied)
Assets		
Investments, at fair value	$ 5,098,843	$ 3,519,042
Receivables:		
Participant contribution	-	23,565
Employer contribution	-	3,822
Notes receivable from participants	99,134	159,693
Total receivables	99,134	187,080
Total assets	5,197,977	3,706,122
Liabilities	-	-
Net Assets Available for Benefits	$ 5,197,977	$ 3,706,122

See notes to financial statements

Portico Systems 401(k) Plan

Statement of Changes in Net Assets Available for Benefits
Years Ended December 31, 2010

Additions to Net Assets Attributed to		
Investment income:		
Net appreciation in fair value of investments	$	552,823
Interest and dividends		85,325
Net investment income		638,148
Interest income on notes receivables from participants		7,777
Contributions:		
Participants		762,969
Employer		171,413
Rollovers		21,858
Total contributions		956,240
Total additions to net assets		1,602,165
Deductions from Net Assets Attributed to		
Benefits paid to participants		65,307
Administrative expenses		45,003
Total deductions from net assets		110,310
Net increase in net assets		1,491,855
Net Assets Available for Benefits, Beginning of Year		3,706,122
Net Assets Available for Benefits, Ending of Year	$	5,197,977

See notes to financial statements

1. Description of the Plan

The following description of the Portico Systems 401(k) Plan (the "Plan") provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan that covers substantially all employees of Portico Systems of Delaware, Inc. (the "Company") who have attained the age of 21. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

The Plan evaluated subsequent events for the recognition or disclosure through October 11, 2011, the date the financial statements were available to be issued.

Contributions

Participants may elect to defer contribution amounts up to 100% of their compensation not to exceed limits in accordance with the Internal Revenue Code. Participants may designate all or a portion of their elective deferrals as Roth elective deferrals. Participants who have attained the age of 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from qualified defined benefit and defined contribution plans. The Company makes a discretionary Company contribution equal to a percentage of a participant's compensation or a discretionary dollar amount, the percentage or dollar amount to be determined by the Company on a uniform basis for all Participants. The Company's discretionary contributions for 2010 was equal to 25% up to 10% of the participant's deferrals. Participants direct all contributions into various investment options offered by the Plan. Contributions are subject to certain limitations.

Contributions to the Plan from employees are recorded in the period that payroll deductions are made from the Plan participants.

Participant Accounts

Each participant's account is credited with the participant's contributions and rollover contributions, (a) the Company's contributions and (b) Plan earnings, and charged with an allocation of administrative expenses. Earnings are allocated based on the ratio of a participant's account invested in a particular investment option to all participants' investments in that option. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately vested in their elective contributions plus actual earnings thereon. The Company's contributions to the participant's accounts vest as follows: 20% after one year of service, 40% after two years of service, 60% after three years of service, 80% after four years of service, and 100% after five years of service.

1. Description of the Plan (Continued)

Notes Receivable from Participants

Participants may borrow up to the lesser of $50,000 or 50% of the vested portion of their account balance, with a minimum loan of $1,000. No more than two notes may be outstanding at any time. The notes are required to be repaid within five years, except for notes to purchase a primary residence, which can be repaid over an extended term. Interest rates on the notes are determined by the plan administrator. The rates for notes outstanding range between 4.25% and 8.75% at December 31, 2010. Principal and interest is paid ratably through bi-weekly payroll deductions. The notes are secured by the participant's account balance in the Plan. Notes receivable are stated at their unpaid principal balance plus accrued unpaid interest.

Payment of Benefits

Upon termination of service for any reason, a participant is eligible to receive the vested interest in his or her account in a lump-sum amount or rollover the vested balance into a specified qualifying account. All distributions are subject to the applicable provisions of the plan document. Benefits are also available to participants for hardship situations as defined in the Plan and in-service distributions are available for participants who have reaches age 59 ½.

2. Summary Of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared under the accrual method of accounting.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

The Plan's investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 5 for a discussion of fair value measurements.

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

2. Summary Of Significant Accounting Policies (Continued)

Forfeited Accounts

When terminations of participation in the Plan occur, the nonvested portion of the participant accounts, as defined, represents a forfeiture. Forfeitures may be used to pay administrative expenses and/or reduce future Company contributions. Forfeitures of $19,833 were used to reduce Company contributions in 2010. Forfeited nonvested amounts available for use totaled $2,575 and $1,495 at December 31, 2010 and 2009, respectively.

Administrative Expenses

The Company pays certain administrative expenses of the Plan. Any administrative expenses not paid by the Company are paid out of plan assets.

Payment of Benefits

Benefit payment to participants are recorded when paid.

Accounting Standards

In January 2010, the Financial Accounting Standards Board ("FASB") issued Accounting Standards Update No. 2010-06 "Fair Value Measurements and Disclosures: Improving Disclosures about Fair Value Measurements", ("ASU 2010-06"), which provides a greater level of disaggregated information and more robust disclosures about valuation techniques and inputs to fair value measurements, transfers in and out of Levels 1 and 2, and the separate presentation of information in Level 3 reconciliations on a gross basis rather than net. New disclosures and clarifications of existing disclosures are effective for interim and annual reporting periods beginning after December 15, 2009, Level 3 disclosures are effective for fiscal years beginning after December 15, 2010. Adoption of ASU 2010-06 had no material impact on the Plan's financial statements but expanded disclosures about certain fair value measurements.

In September 2010, FASB issued Accounting Standards Update No. 2010-25 "Plan Accounting-Defined Contribution Pension Plans: Reporting Loans to Participants by Defined Contribution Pension Plans," ("ASU 2010-25"), which clarifies how loans to participants should be classified and measured by participant defined contribution pension benefit plans. Loans are required 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. ASU 2010-25 is applied retrospectively to all prior periods presented effective for fiscal years ending after December 15, 2010. The Plan adopted ASU 2010-25 and has presented loans to participants in accordance with this guidance as of December 31, 2010 and 2009.

3. Information Certified by Trustee

The plan administrator has elected the method of compliance as permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA for 2010. Accordingly, Ascensus, a Frontier Trust Company, the trustee, has certified to the completeness and accuracy of all investments reported in the accompanying statement of net assets available for benefits as of December 31, 2010 and the supplemental Schedule H, Line 4(i) – Schedule of Assets (Held at End of Year) at December 31, 2010, and the related investment activity reported in the statement of changes in net assets available for benefits for the years ended December 31, 2010.

4. Investments

The following investments represent 5% or more of the Plan's net assets at December 31, 2010 and 2009.

	2010	2009
Money Market Fund:		
DWS Money Market Series Premium S	$ 394,795	$ 357,500
Mutual Funds:		
Vanguard 500 Index Fund	742,385	508,732
Gabelli Small Cap Growth Fund	502,326	351,525
Apline International Real Estate Y	470,712	366,161
Fidelity Advisor Leveraged Comp Stock A	325,378	*
Franklin Mutual Global Discovery Fund A	298,691	245,997
Alliance Bernstein Intl Growth Fd A	294,585	200,178

* Investment does not represent 5% or more of plan's net assets.

During 2010, the Plan's investments in mutual funds (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value by $552,823.

5. Fair Value Measurements

The Plan measures on a recurring basis its investments at fair value in accordance with FASB codification "Fair Value Measurements and Disclosures," which provides the framework for measuring fair value. That framework provides fair value hierarchy used to classify the inputs used in measuring fair value. That hierarchy prioritizes the inputs used in determining valuations into three levels. The levels of fair value hierarchy are as follows:

Level 1 – Inputs to the valuation methodology are unadjusted quoted prices in active markets that are accessible to the Plan for identical assets. These generally provide the most reliable evidence and are used to measure fair value whenever available.

Level 2 – Inputs to the valuation methodology include significant inputs, other than Level 1 inputs, that are observable either directly or indirectly for substantially the full term of the asset through corroboration with observable market data. Level 2 inputs include quoted market prices in active markets for similar assets, quoted market prices in markets that are not active for identical or similar assets, and other observable inputs.

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

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

The following tables summarize the assets measured by level, within the fair value hierarchy at fair value on a recurring basis for the Plan as of December 31, 2010 and 2009:

	December 31, 2010 Fair Value Measurement Using	
	Quoted Prices in Active Market for Identical Assets Level 1	Assets at Fair Value
Mutual funds:		
Equity fund	$ 1,128,638	$ 1,128,638
Index funds	888,415	888,415
Growth funds	1,022,151	1,022,151
International funds	787,232	787,232
Fixed income funds	275,789	275,789
Balanced funds	150,950	150,950
Lifecycle funds	450,873	450,873
Total mutual funds	4,704,048	4,704,048
Money market fund	394,795	394,795
Total	$ 5,098,843	$ 5,098,843

5. Fair Value Measurements (Continued)

	December 31, 2009 Fair Value Measurement Using	
	Quoted Prices in Active Market for Identical Assets Level 1	Assets at Fair Value
Mutual funds:		
Equity fund	$ 729,880	$ 729,880
Index funds	535,777	535,777
Growth funds	715,415	715,415
International funds	612,158	612,158
Fixed income funds	204,579	204,579
Balanced funds	98,933	98,933
Target funds	264,800	264,800
Total mutual funds	3,161,542	3,161,542
Money market fund	357,500	357,500
Total	$ 3,519,042	$ 3,519,042

The 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.

Mutual funds and the money market fund are valued at net asset value ("NAV") of shares held by the Plan at year end. NAV is the price used to sell the investment on the open market.

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

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 the ERISA. In the event of the Plan's termination, participants will become 100% vested in their Company contributions.

7. Income Tax Status

The Plan adopted a Volume submitter 401(k) profit sharing plan with Karr Barth Pension Administration, Inc. which the Internal Revenue Service determined and informed the volume submitter plan author by letter, dated March 31, 2008, that the volume submitter plan was acceptable under Section 401 of the Internal Revenue Code for use by employers for the benefit of their employees. Although the Plan has been amended since receiving this letter, the plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the Internal Revenue Code.

Accounting principles generally accepted in the United States of America requires the Plan to evaluate tax positions taken by the Plan and recognize a tax liability if the organization has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The plan administrator has analyzed the tax positions taken by the plan and has concluded that as of December 31, 2010, there are no uncertain positions taken, or expected to be taken, that would require recognition of a liability or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2007.

8. Related Party Transactions

The Plan issues notes to its participants which are secured by participants' account balance. Transactions in such notes qualify as party-in-interest transactions and are exempt from the prohibited transaction rules. Administrative expenses are paid to Ascensus, a Frontier Trust Company, for services performed which also qualify as party-in-interest transactions.

Certain administrative functions of the Plan are performed by employees of the Company. No such employee receives compensation from the Plan.

9. Risks and Uncertainties

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

10. Delinquent Participant Contributions

For the year ended December 31, 2010, the Company did not remit participant contributions to the Plan on a timely basis as defined by the Department of Labor's Rules and Regulations for Reporting and Delinquent Participant Contributions Disclosure under ERISA. Untimely remittances are identified on the schedule of delinquent contributions, which totaled $663,674 for the year ended December 31,2010.

The Company has calculated lost earnings related to the untimely remittances and allocated earnings to the participants accordingly. The aggregate amount of lost earnings totaled $493 for the Plan year ended December 31, 2010 and was remitted to the Plan on September 9, 2011.

Portico Systems 401(k) Plan

EIN: 23-2892557 Plan Number: 001
Schedule H, Line 4(a) Delinquent Participant Contributions
December 31, 2010

Participant Contributions Transferred Late to the Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected VFCP and PTE 2002-51
	Contributions not Corrected	Contributions Outside of VFCP	Contributions Pending Correction in VFCP	
$ 663,674 *	$ -	$ 663,674 *	$ -	$ -

* All remittances have been made to the Plan and include participant loans amounts.

Portico Systems 401(k) Plan

EIN: 23-2892557 Plan Number: 001
Schedule H, Line 4(i) – Schedule of Assets (Held at End of Year)
December 31, 2010

(a)	(b) IDENTITY OF ISSUE	(c) DESCRIPTION OF INVESTMENT	(d) COST	(e) CURRENT VALUE
	Money Market Fund	DWS Money Market Series Premium S	N/R	$ 394,795
	Mutual Funds	Alliance Bernstein Intl Growth Fd A	N/R	294,585
		Alpine International Real Estate Y	N/R	470,712
		American Fund new Economy Fund R4	N/R	94,656
		American Funds 2015 Tdate R4	N/R	53,109
		American Funds 2020 Tdate R4	N/R	41,099
		American Funds 2025 Tdate R4	N/R	95,652
		American Funds 2030 Tdate R4	N/R	154,643
		American Funds 2035 Tdate R4	N/R	16,714
		American Funds 2040 Tdate R4	N/R	70,548
		American Funds 2045 Tdate R4	N/R	3,628
		American Funds 2050 Tdate R4	N/R	15,480
		American Funds Fundamental Invest R4	N/R	190,321
		Columbia Marsico 21st Century Fund Z	N/R	250,844
		Columbia Mid Cap Value Fund A	N/R	57,902
		Columbia Seligman Comm and Infor A	N/R	76,255
		Columbia Small Cap Value II A	N/R	42,757
		Columbia Value and Restructuring	N/R	168,212
		Dreyfus Strategic Value A	N/R	75,226
		Fidelity Advisor Leveraged Comp Stock A	N/R	325,378
		Franklin Mutual Global Discovery Fund A	N/R	298,691
		Gabelli Small Cap Growth Fund	N/R	502,326
		Loomis Sayles Investment Grade Bond Fd A	N/R	200,218
		Lord Abbett Small Cap Blend Fund A	N/R	75,725
		Oakmark Equity & Income Fund Cl I	N/R	16,969
		Principle MidCap S&P 400 Index Inst	N/R	91,922
		Principle Smallcap S&P 600 Index Inst	N/R	54,108
		Sentinel Government Securities A	N/R	75,571
		Thomburg Core Growth Fund R3	N/R	130,583
		Vanguard 500 Index Fund	N/R	742,385
		Vanguard International Fund	N/R	17,829
*	Participant Loans	Loans with interest ranging from 4.25% to 8.75%		99,134
				$ 5,197,977

* A party-in-interest as defined by ERISA
N/R - participant directed investment, cost not required to be reported

See notes to financial statements

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;
- [ ] a multiple-employer plan; or
- [x] 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 PORTICO SYSTEMS 401(k) PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2000

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

518 E. TOWNSHIP LINE ROAD
SUITE 100
BLUE BELL PA 19422

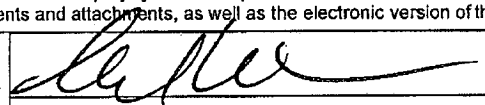
2b Employer Identification Number (EIN) 23-2892557

2c Sponsor's telephone number (215)358-3738

2d Business code (see instructions) 541519

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		10/5/11	EDMUND MOORE, JR.
	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") SAME	**3b** Administrator's EIN	
	3c Administrator's telephone number	

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**		124
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**		135
b Retired or separated participants receiving benefits	**6b**		2
c Other retired or separated participants entitled to future benefits	**6c**		23
d Subtotal. Add lines **6a, 6b,** and **6c**	**6d**		160
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**		0
f Total. Add lines **6d** and **6e**	**6f**		160
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**		107
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**		18
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**		

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:

2E 2F 2G 2J 2K 3D

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)		**9b** Plan benefit arrangement (check all that apply)	
(1)	[ ] Insurance	(1)	[ ] Insurance
(2)	[ ] Code section 412(e)(3) insurance contracts	(2)	[ ] Code section 412(e)(3) insurance contracts
(3)	[X] Trust	(3)	[X] Trust
(4)	[ ] General assets of the sponsor	(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		**b General Schedules**	
(1)	[X] **R** (Retirement Plan Information)	(1)	[X] **H** (Financial Information)
(2)	[ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2)	[ ] **I** (Financial Information – Small Plan)
		(3)	[ ] ___ **A** (Insurance Information)
		(4)	[X] **C** (Service Provider Information)
(3)	[ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(5)	[ ] **D** (DFE/Participating Plan Information)
		(6)	[ ] **G** (Financial Transaction Schedules)

Portico Systems 401(k) Plan

Financial Statements and
Supplemental Schedules

December 31, 2010 and 2009

Portico Systems 401(k) Plan

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December 31, 2010 and 2009

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ParenteBeard

Independent Auditors' Report

Participants and Plan Administrator
Portico Systems 401(k) Plan

We were engaged to audit the accompanying statement of net assets available for benefits of the Portico Systems 401(k) Plan (the "Plan") as of December 31, 2010 and the related statement of changes in net assets available for benefits for the year then ended, and the supplemental schedules of: (1) Schedule H, line 4(a) – Schedule of Delinquent Participant Contributions and (2) Schedule H, line 4(i) – Schedule of Assets (Held at End of Year) as of December 31, 2010. These financial statements and supplemental schedules are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA"), the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information discussed in Note 3, which was certified by Ascensus, a Frontier 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 a certification from the trustee as of 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 that we did not audit, we are unable to, and do not, express an opinion on the accompanying 2010 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 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 ERISA.

We have compiled the accompanying statement of net assets available for benefits as of December 31, 2009 in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants.

A compilation is limited to presenting in the form of financial statements information that is representation of management. We have not audited or reviewed the accompanying statement of net assets available for benefits as of December 31, 2009 and, accordingly, do not express an opinion or any other form of assurance on it.

ParenteBeard LLC

Philadelphia, Pennsylvania
October 11 , 2011

Portico Systems 401(k) Plan

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

	2010 (Audited)	2009 (Complied)
Assets		
Investments, at fair value	$ 5,098,843	$ 3,519,042
Receivables:		
Participant contribution	-	23,565
Employer contribution	-	3,822
Notes receivable from participants	99,134	159,693
Total receivables	99,134	187,080
Total assets	5,197,977	3,706,122
Liabilities	-	-
Net Assets Available for Benefits	$ 5,197,977	$ 3,706,122

See notes to financial statements

Portico Systems 401(k) Plan

Statement of Changes in Net Assets Available for Benefits
Years Ended December 31, 2010

Additions to Net Assets Attributed to		
Investment income:		
Net appreciation in fair value of investments	$	552,823
Interest and dividends		85,325
Net investment income		638,148
Interest income on notes receivables from participants		7,777
Contributions:		
Participants		762,969
Employer		171,413
Rollovers		21,858
Total contributions		956,240
Total additions to net assets		1,602,165
Deductions from Net Assets Attributed to		
Benefits paid to participants		65,307
Administrative expenses		45,003
Total deductions from net assets		110,310
Net increase in net assets		1,491,855
Net Assets Available for Benefits, Beginning of Year		3,706,122
Net Assets Available for Benefits, Ending of Year	$	5,197,977

See notes to financial statements

1. Description of the Plan

The following description of the Portico Systems 401(k) Plan (the "Plan") provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan that covers substantially all employees of Portico Systems of Delaware, Inc. (the "Company") who have attained the age of 21. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

The Plan evaluated subsequent events for the recognition or disclosure through October 11, 2011, the date the financial statements were available to be issued.

Contributions

Participants may elect to defer contribution amounts up to 100% of their compensation not to exceed limits in accordance with the Internal Revenue Code. Participants may designate all or a portion of their elective deferrals as Roth elective deferrals. Participants who have attained the age of 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from qualified defined benefit and defined contribution plans. The Company makes a discretionary Company contribution equal to a percentage of a participant's compensation or a discretionary dollar amount, the percentage or dollar amount to be determined by the Company on a uniform basis for all Participants. The Company's discretionary contributions for 2010 was equal to 25% up to 10% of the participant's deferrals. Participants direct all contributions into various investment options offered by the Plan. Contributions are subject to certain limitations.

Contributions to the Plan from employees are recorded in the period that payroll deductions are made from the Plan participants.

Participant Accounts

Each participant's account is credited with the participant's contributions and rollover contributions, (a) the Company's contributions and (b) Plan earnings, and charged with an allocation of administrative expenses. Earnings are allocated based on the ratio of a participant's account invested in a particular investment option to all participants' investments in that option. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately vested in their elective contributions plus actual earnings thereon. The Company's contributions to the participant's accounts vest as follows: 20% after one year of service, 40% after two years of service, 60% after three years of service, 80% after four years of service, and 100% after five years of service.

1. Description of the Plan (Continued)

Notes Receivable from Participants

Participants may borrow up to the lesser of $50,000 or 50% of the vested portion of their account balance, with a minimum loan of $1,000. No more than two notes may be outstanding at any time. The notes are required to be repaid within five years, except for notes to purchase a primary residence, which can be repaid over an extended term. Interest rates on the notes are determined by the plan administrator. The rates for notes outstanding range between 4.25% and 8.75% at December 31, 2010. Principal and interest is paid ratably through bi-weekly payroll deductions. The notes are secured by the participant's account balance in the Plan. Notes receivable are stated at their unpaid principal balance plus accrued unpaid interest.

Payment of Benefits

Upon termination of service for any reason, a participant is eligible to receive the vested interest in his or her account in a lump-sum amount or rollover the vested balance into a specified qualifying account. All distributions are subject to the applicable provisions of the plan document. Benefits are also available to participants for hardship situations as defined in the Plan and in-service distributions are available for participants who have reaches age 59 ½.

2. Summary Of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared under the accrual method of accounting.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

The Plan's investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 5 for a discussion of fair value measurements.

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

2. Summary Of Significant Accounting Policies (Continued)

Forfeited Accounts

When terminations of participation in the Plan occur, the nonvested portion of the participant accounts, as defined, represents a forfeiture. Forfeitures may be used to pay administrative expenses and/or reduce future Company contributions. Forfeitures of $19,833 were used to reduce Company contributions in 2010. Forfeited nonvested amounts available for use totaled $2,575 and $1,495 at December 31, 2010 and 2009, respectively.

Administrative Expenses

The Company pays certain administrative expenses of the Plan. Any administrative expenses not paid by the Company are paid out of plan assets.

Payment of Benefits

Benefit payment to participants are recorded when paid.

Accounting Standards

In January 2010, the Financial Accounting Standards Board ("FASB") issued Accounting Standards Update No. 2010-06 "Fair Value Measurements and Disclosures: Improving Disclosures about Fair Value Measurements", ("ASU 2010-06"), which provides a greater level of disaggregated information and more robust disclosures about valuation techniques and inputs to fair value measurements, transfers in and out of Levels 1 and 2, and the separate presentation of information in Level 3 reconciliations on a gross basis rather than net. New disclosures and clarifications of existing disclosures are effective for interim and annual reporting periods beginning after December 15, 2009, Level 3 disclosures are effective for fiscal years beginning after December 15, 2010. Adoption of ASU 2010-06 had no material impact on the Plan's financial statements but expanded disclosures about certain fair value measurements.

In September 2010, FASB issued Accounting Standards Update No. 2010-25 "Plan Accounting-Defined Contribution Pension Plans: Reporting Loans to Participants by Defined Contribution Pension Plans," ("ASU 2010-25"), which clarifies how loans to participants should be classified and measured by participant defined contribution pension benefit plans. Loans are required 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. ASU 2010-25 is applied retrospectively to all prior periods presented effective for fiscal years ending after December 15, 2010. The Plan adopted ASU 2010-25 and has presented loans to participants in accordance with this guidance as of December 31, 2010 and 2009.

3. Information Certified by Trustee

The plan administrator has elected the method of compliance as permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA for 2010. Accordingly, Ascensus, a Frontier Trust Company, the trustee, has certified to the completeness and accuracy of all investments reported in the accompanying statement of net assets available for benefits as of December 31, 2010 and the supplemental Schedule H, Line 4(i) – Schedule of Assets (Held at End of Year) at December 31, 2010, and the related investment activity reported in the statement of changes in net assets available for benefits for the years ended December 31, 2010.

4. Investments

The following investments represent 5% or more of the Plan's net assets at December 31, 2010 and 2009.

	2010	2009
Money Market Fund:		
DWS Money Market Series Premium S	$ 394,795	$ 357,500
Mutual Funds:		
Vanguard 500 Index Fund	742,385	508,732
Gabelli Small Cap Growth Fund	502,326	351,525
Apline International Real Estate Y	470,712	366,161
Fidelity Advisor Leveraged Comp Stock A	325,378	*
Franklin Mutual Global Discovery Fund A	298,691	245,997
Alliance Bernstein Intl Growth Fd A	294,585	200,178

* Investment does not represent 5% or more of plan's net assets.

During 2010, the Plan's investments in mutual funds (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value by $552,823.

5. Fair Value Measurements

The Plan measures on a recurring basis its investments at fair value in accordance with FASB codification "Fair Value Measurements and Disclosures," which provides the framework for measuring fair value. That framework provides fair value hierarchy used to classify the inputs used in measuring fair value. That hierarchy prioritizes the inputs used in determining valuations into three levels. The levels of fair value hierarchy are as follows:

Level 1 – Inputs to the valuation methodology are unadjusted quoted prices in active markets that are accessible to the Plan for identical assets. These generally provide the most reliable evidence and are used to measure fair value whenever available.

Level 2 – Inputs to the valuation methodology include significant inputs, other than Level 1 inputs, that are observable either directly or indirectly for substantially the full term of the asset through corroboration with observable market data. Level 2 inputs include quoted market prices in active markets for similar assets, quoted market prices in markets that are not active for identical or similar assets, and other observable inputs.

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

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

The following tables summarize the assets measured by level, within the fair value hierarchy at fair value on a recurring basis for the Plan as of December 31, 2010 and 2009:

	December 31, 2010 Fair Value Measurement Using	
	Quoted Prices in Active Market for Identical Assets Level 1	Assets at Fair Value
Mutual funds:		
Equity fund	$ 1,128,638	$ 1,128,638
Index funds	888,415	888,415
Growth funds	1,022,151	1,022,151
International funds	787,232	787,232
Fixed income funds	275,789	275,789
Balanced funds	150,950	150,950
Lifecycle funds	450,873	450,873
Total mutual funds	4,704,048	4,704,048
Money market fund	394,795	394,795
Total	$ 5,098,843	$ 5,098,843

5. Fair Value Measurements (Continued)

	December 31, 2009 Fair Value Measurement Using	
	Quoted Prices in Active Market for Identical Assets Level 1	Assets at Fair Value
Mutual funds:		
Equity fund	$ 729,880	$ 729,880
Index funds	535,777	535,777
Growth funds	715,415	715,415
International funds	612,158	612,158
Fixed income funds	204,579	204,579
Balanced funds	98,933	98,933
Target funds	264,800	264,800
Total mutual funds	3,161,542	3,161,542
Money market fund	357,500	357,500
Total	$ 3,519,042	$ 3,519,042

The 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.

Mutual funds and the money market fund are valued at net asset value ("NAV") of shares held by the Plan at year end. NAV is the price used to sell the investment on the open market.

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

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 the ERISA. In the event of the Plan's termination, participants will become 100% vested in their Company contributions.

7. Income Tax Status

The Plan adopted a Volume submitter 401(k) profit sharing plan with Karr Barth Pension Administration, Inc. which the Internal Revenue Service determined and informed the volume submitter plan author by letter, dated March 31, 2008, that the volume submitter plan was acceptable under Section 401 of the Internal Revenue Code for use by employers for the benefit of their employees. Although the Plan has been amended since receiving this letter, the plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the Internal Revenue Code.

Accounting principles generally accepted in the United States of America requires the Plan to evaluate tax positions taken by the Plan and recognize a tax liability if the organization has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The plan administrator has analyzed the tax positions taken by the plan and has concluded that as of December 31, 2010, there are no uncertain positions taken, or expected to be taken, that would require recognition of a liability or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2007.

8. Related Party Transactions

The Plan issues notes to its participants which are secured by participants' account balance. Transactions in such notes qualify as party-in-interest transactions and are exempt from the prohibited transaction rules. Administrative expenses are paid to Ascensus, a Frontier Trust Company, for services performed which also qualify as party-in-interest transactions.

Certain administrative functions of the Plan are performed by employees of the Company. No such employee receives compensation from the Plan.

9. Risks and Uncertainties

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

10. Delinquent Participant Contributions

For the year ended December 31, 2010, the Company did not remit participant contributions to the Plan on a timely basis as defined by the Department of Labor's Rules and Regulations for Reporting and Delinquent Participant Contributions Disclosure under ERISA. Untimely remittances are identified on the schedule of delinquent contributions, which totaled $663,674 for the year ended December 31,2010.

The Company has calculated lost earnings related to the untimely remittances and allocated earnings to the participants accordingly. The aggregate amount of lost earnings totaled $493 for the Plan year ended December 31, 2010 and was remitted to the Plan on September 9, 2011.

Portico Systems 401(k) Plan

EIN: 23-2892557 Plan Number: 001
Schedule H, Line 4(a) Delinquent Participant Contributions
December 31, 2010

Participant Contributions Transferred Late to the Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected VFCP and PTE 2002-51
	Contributions not Corrected	Contributions Outside of VFCP	Contributions Pending Correction in VFCP	
$ 663,674 *	$ -	$ 663,674 *	$ -	$ -

* All remittances have been made to the Plan and include participant loans amounts.

Portico Systems 401(k) Plan

EIN: 23-2892557 Plan Number: 001
Schedule H, Line 4(i) – Schedule of Assets (Held at End of Year)
December 31, 2010

(a)	(b) IDENTITY OF ISSUE	(c) DESCRIPTION OF INVESTMENT	(d) COST	(e) CURRENT VALUE
	Money Market Fund	DWS Money Market Series Premium S	N/R	$ 394,795
	Mutual Funds	Alliance Bernstein Intl Growth Fd A	N/R	294,585
		Alpine International Real Estate Y	N/R	470,712
		American Fund new Economy Fund R4	N/R	94,656
		American Funds 2015 Tdate R4	N/R	53,109
		American Funds 2020 Tdate R4	N/R	41,099
		American Funds 2025 Tdate R4	N/R	95,652
		American Funds 2030 Tdate R4	N/R	154,643
		American Funds 2035 Tdate R4	N/R	16,714
		American Funds 2040 Tdate R4	N/R	70,548
		American Funds 2045 Tdate R4	N/R	3,628
		American Funds 2050 Tdate R4	N/R	15,480
		American Funds Fundamental Invest R4	N/R	190,321
		Columbia Marsico 21st Century Fund Z	N/R	250,844
		Columbia Mid Cap Value Fund A	N/R	57,902
		Columbia Seligman Comm and Infor A	N/R	76,255
		Columbia Small Cap Value II A	N/R	42,757
		Columbia Value and Restructuring	N/R	168,212
		Dreyfus Strategic Value A	N/R	75,226
		Fidelity Advisor Leveraged Comp Stock A	N/R	325,378
		Franklin Mutual Global Discovery Fund A	N/R	298,691
		Gabelli Small Cap Growth Fund	N/R	502,326
		Loomis Sayles Investment Grade Bond Fd A	N/R	200,218
		Lord Abbett Small Cap Blend Fund A	N/R	75,725
		Oakmark Equity & Income Fund Cl I	N/R	16,969
		Principle MidCap S&P 400 Index Inst	N/R	91,922
		Principle Smallcap S&P 600 Index Inst	N/R	54,108
		Sentinel Government Securities A	N/R	75,571
		Thomburg Core Growth Fund R3	N/R	130,583
		Vanguard 500 Index Fund	N/R	742,385
		Vanguard International Fund	N/R	17,829
*	Participant Loans	Loans with interest ranging from 4.25% to 8.75%		99,134
				$ 5,197,977

* A party-in-interest as defined by ERISA
N/R - participant directed investment, cost not required to be reported

See notes to financial statements

Portico Systems 401(k) Plan

EIN: 23-2892557 Plan Number: 001
Schedule H, Line 4(i) – Schedule of Assets (Held at End of Year)
December 31, 2010

(a)	(b) IDENTITY OF ISSUE	(c) DESCRIPTION OF INVESTMENT	(d) COST	(e) CURRENT VALUE
	Money Market Fund	DWS Money Market Series Premium S	N/R	$ 394,795
	Mutual Funds	Alliance Bernstein Intl Growth Fd A	N/R	294,585
		Alpine International Real Estate Y	N/R	470,712
		American Fund new Economy Fund R4	N/R	94,656
		American Funds 2015 Tdate R4	N/R	53,109
		American Funds 2020 Tdate R4	N/R	41,099
		American Funds 2025 Tdate R4	N/R	95,652
		American Funds 2030 Tdate R4	N/R	154,643
		American Funds 2035 Tdate R4	N/R	16,714
		American Funds 2040 Tdate R4	N/R	70,548
		American Funds 2045 Tdate R4	N/R	3,628
		American Funds 2050 Tdate R4	N/R	15,480
		American Funds Fundamental Invest R4	N/R	190,321
		Columbia Marsico 21st Century Fund Z	N/R	250,844
		Columbia Mid Cap Value Fund A	N/R	57,902
		Columbia Seligman Comm and Infor A	N/R	76,255
		Columbia Small Cap Value II A	N/R	42,757
		Columbia Value and Restructuring	N/R	168,212
		Dreyfus Strategic Value A	N/R	75,226
		Fidelity Advisor Leveraged Comp Stock A	N/R	325,378
		Franklin Mutual Global Discovery Fund A	N/R	298,691
		Gabelli Small Cap Growth Fund	N/R	502,326
		Loomis Sayles Investment Grade Bond Fd A	N/R	200,218
		Lord Abbett Small Cap Blend Fund A	N/R	75,725
		Oakmark Equity & Income Fund Cl I	N/R	16,969
		Principle MidCap S&P 400 Index Inst	N/R	91,922
		Principle Smallcap S&P 600 Index Inst	N/R	54,108
		Sentinel Government Securities A	N/R	75,571
		Thomburg Core Growth Fund R3	N/R	130,583
		Vanguard 500 Index Fund	N/R	742,385
		Vanguard International Fund	N/R	17,829
*	Participant Loans	Loans with interest ranging from 4.25% to 8.75%		99,134
				$ 5,197,977

* A party-in-interest as defined by ERISA
N/R - participant directed investment, cost not required to be reported

See notes to financial statements

10. Delinquent Participant Contributions

For the year ended December 31, 2010, the Company did not remit participant contributions to the Plan on a timely basis as defined by the Department of Labor's Rules and Regulations for Reporting and Delinquent Participant Contributions Disclosure under ERISA. Untimely remittances are identified on the schedule of delinquent contributions, which totaled $663,674 for the year ended December 31,2010.

The Company has calculated lost earnings related to the untimely remittances and allocated earnings to the participants accordingly. The aggregate amount of lost earnings totaled $493 for the Plan year ended December 31, 2010 and was remitted to the Plan on September 9, 2011.

Portico Systems 401(k) Plan

EIN: 23-2892557 Plan Number: 001
Schedule H, Line 4(a) Delinquent Participant Contributions
December 31, 2010

Participant Contributions Transferred Late to the Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected VFCP and PTE 2002-51
	Contributions not Corrected	Contributions Outside of VFCP	Contributions Pending Correction in VFCP	
$ 663,674 *	$ -	$ 663,674 *	$ -	$ -

* All remittances have been made to the Plan and include participant loans amounts.