

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). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 2010 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2010 or fiscal plan year beginning <u>01/01/2010</u> and ending <u>12/31/2010</u>	
A This return/report is for:	<input type="checkbox"/> a multiemployer plan; <input type="checkbox"/> a multiple-employer plan; or <input checked="" type="checkbox"/> a single-employer plan; <input type="checkbox"/> a DFE (specify) ____
B This return/report is:	<input type="checkbox"/> the first return/report; <input type="checkbox"/> the final return/report; <input checked="" type="checkbox"/> an amended return/report; <input type="checkbox"/> a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	<input type="checkbox"/>
D Check box if filing under:	<input checked="" type="checkbox"/> Form 5558; <input type="checkbox"/> automatic extension; <input type="checkbox"/> the DFVC program; <input type="checkbox"/> special extension (enter description)

Part II	Basic Plan Information —enter all requested information				
1a Name of plan <u>401(K) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>12/29/1994</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>12/29/1994</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>12/29/1994</u>					
2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) <u>MAGNETIC ANALYSIS CORP.</u> <u>103 FAIRVIEW PARK DR.</u> <u>ELMSFORD, NY 10523</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>11-1888380</u></td> </tr> <tr> <td>2c Sponsor's telephone number <u>914-530-2000</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>334500</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>11-1888380</u>	2c Sponsor's telephone number <u>914-530-2000</u>	2d Business code (see instructions) <u>334500</u>	
2b Employer Identification Number (EIN) <u>11-1888380</u>					
2c Sponsor's telephone number <u>914-530-2000</u>					
2d Business code (see instructions) <u>334500</u>					

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.	01/09/2012	THOMAS GANNALO
	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

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

Form 5500 (2010)
v.092307.1

3a Plan administrator's name and address (if same as plan sponsor, enter "Same")

MAGNETIC ANALYSIS CORP.

103 FAIRVIEW PARK DR.
ELMSFORD, NY 10523**3b** Administrator's EIN

11-1888380

3c Administrator's telephone number

914-530-2000

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**

129

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**

105

b Retired or separated participants receiving benefits.....**6b**

3

c Other retired or separated participants entitled to future benefits.....**6c**

26

d Subtotal. Add lines **6a**, **6b**, and **6c**.....**6d**

134

e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....**6e**

1

f Total. Add lines **6d** and **6e**.....**6f**

135

g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....**6g**

123

h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....**6h**

0

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 2T 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) ☒

Trust

(4) ☐

General assets of the sponsor

9b Plan benefit arrangement (check all that apply)(1) ☐

Insurance

(2) ☐

Code section 412(e)(3) insurance contracts

(3) ☒

Trust

(4) ☐

General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)**a Pension Schedules**(1) ☒**R** (Retirement Plan Information)(2) ☐**MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary(3) ☐**SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary**b General Schedules**(1) ☒**H** (Financial Information)(2) ☐**I** (Financial Information - Small Plan)(3) ☐**A** (Insurance Information)(4) ☒**C** (Service Provider Information)(5) ☐**D** (DFE/Participating Plan Information)(6) ☐**G** (Financial Transaction Schedules)

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information 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.	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 401(K) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION	B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 MAGNETIC ANALYSIS CORP.	
D Employer Identification Number (EIN) 11-1888380	

Part I	Service Provider Information (see instructions)
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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 FIDELITY INV INST OPS CO 04-2647786

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

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

(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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
<p>(d) Enter name and EIN (address) of source of indirect compensation</p> <p>ARTISAN MID CAP VAL - BOSTON FINANC</p> <p>04-2526037</p>		
<p>(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.</p> <p>0.40%</p>		
<p>(a) Enter service provider name as it appears on line 2</p> <p>FIDELITY INVESTMENTS INSTITUTIONAL</p>		
<p>(b) Service Codes (see instructions)</p> <p style="text-align: center;">60</p>		
<p>(c) Enter amount of indirect compensation</p> <p style="text-align: center;">0</p>		
<p>(d) Enter name and EIN (address) of source of indirect compensation</p> <p>RS PARTNERS A - BOSTON FINANCIAL DA</p> <p>04-2526037</p>		
<p>(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.</p> <p>0.55%</p>		
<p>(a) Enter service provider name as it appears on line 2</p>		
<p>(b) Service Codes (see instructions)</p>		
<p>(c) Enter amount of indirect compensation</p>		
<p>(d) Enter name and EIN (address) of source of indirect compensation</p>		
<p>(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.</p>		

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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 <div style="border: 1px solid black; padding: 5px; font-size: 1.2em; font-weight: bold;">2010</div> This Form is Open to Public Inspection
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For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010		
A Name of plan 401(K) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 MAGNETIC ANALYSIS CORP.	D Employer Identification Number (EIN) 11-1888380	

Part I Asset and Liability Statement			
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	3593758	3698596
(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)		
(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)	11182345	13181787
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	14776103	16880383

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 through 1j)	1k	0	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	14776103	16880383
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Part II Income and Expense Statement

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

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	288561	
(B) Participants	2a(1)(B)	608132	
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		896693
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	838	
(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)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		838
(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)	165617	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		165617
(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)		

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		1454555
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		2517703

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	413026	
(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)		413026
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)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	397	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		397
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		413423

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		2104280
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) ☒ Disclaimer (4) ☐ Adverse

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

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

(1) Name: MCGLADREY & PULLEN LLP

(2) EIN: 41-1944416

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
4a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....		X	
4b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....		X	
4c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
4d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....		X	
4e Was this plan covered by a fidelity bond?.....	X		500000
4f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
4h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
4i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	X		
4j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....		X	
4k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		X	
4l Has the plan failed to provide any benefit when due under the plan?		X	
4m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		X	
4n 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.		X	

- 5a** Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?

If yes, enter the amount of any plan assets that reverted to the employer this year ☐ Yes ☒ No Amount:

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

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2010 This Form is Open to Public Inspection.
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For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

A Name of plan <u>401(K) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>MAGNETIC ANALYSIS CORP.</u>	D Employer Identification Number (EIN) <u>11-1888380</u>

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	<u>0</u>
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>04-6568107</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3	

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

Part III	Amendments
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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.....	<input type="checkbox"/> Increase	<input type="checkbox"/> Decrease	<input type="checkbox"/> Both	<input type="checkbox"/> No
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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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11 a Does the ESOP hold any preferred stock?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

Schedule R (Form 5500) 2010
v.092308.1

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

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

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

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

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

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

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

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

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

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

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

a Enter the percentage of plan assets held as:
 Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate item 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____

401(K) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION

Financial Report
December 31, 2010

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Independent Auditor's Report

To the 401(k) Profit Sharing Plan Committee
Magnetic Analysis Corporation
Elmsford, New York

We were engaged to audit the accompanying Statements of Net Assets Available for Benefits of the 401(k) Profit Sharing Plan of Magnetic Analysis Corporation (the "Plan") as of December 31, 2010 and 2009, and the related Statement of Changes in Net Assets Available for Benefits for the year ended December 31, 2010, and the supplemental schedule of assets (held at end of year) as of December 31, 2010. These financial statements and supplemental schedule are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the United States Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified or provided by the Fidelity Management Trust Company, the Trustee of the Plan, except for comparing such information to the related information included in the financial statements and supplemental schedule. We have been informed by the Plan Administrator that the Trustee holds the Plan's assets and executes transactions. The Plan Administrator has obtained certifications from the Trustee regarding the completeness and accuracy of the information summarized in Note 3 that was provided to the Plan Administrator by the Trustee as of and for the year ended December 31, 2010, and as of December 31, 2009.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and schedule taken as a whole. The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified or provided 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 United States Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

McGladrey & Pullen, LLP

Stamford, Connecticut
October 12, 2011

401(k) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2010 and 2009

	2010	2009
Assets		
Investments at fair value (Notes 3 and 4)	\$ 16,880,384	\$ 14,776,103
Receivables		
Employer discretionary contribution receivable	38,933	135,442
Net assets available for benefits	\$ 16,919,317	\$ 14,911,545

See Notes to Financial Statements.

401(k) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Year Ended December 31, 2010

Additions to Net Assets Attributable to:

Investment Income (Note 3)

Interest and dividends	\$ 166,455
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Net appreciation in fair value of investments	1,454,556
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Total investment income	<u>1,621,011</u>
--------------------------------	------------------

Contributions

Employer discretionary	38,933
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Employer matching	153,119
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Participant	608,132
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Total contributions	<u>800,184</u>
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Total additions	<u>2,421,195</u>
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Deductions from Net Assets Attributable to:

Benefits paid to participants	413,026
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Administrative expenses	397
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Total deductions	<u>413,423</u>
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Net increase	2,007,772
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Net Assets Available for Benefits

Beginning of year	14,911,545
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End of year	<u><u>\$ 16,919,317</u></u>
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See Notes to Financial Statements.

401(k) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION

NOTES TO FINANCIAL STATEMENTS December 31, 2010 and 2009

Note 1. Plan Description

The following description of the 401(k) Profit Sharing Plan of Magnetic Analysis Corporation (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 established for the benefit of the employees of Magnetic Analysis Corporation (the "Company" or "Sponsor"). The Plan and Trust of which it is a part are intended to satisfy all of the requirements for a qualified retirement plan under the appropriate provisions of the Internal Revenue Code ("IRC") and similar state tax laws. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Fidelity Management Trust Company acts as the Trustee, Custodian, and Recordkeeper of the Plan (hereafter referred to as Trustee).

Eligibility: Employees of the Sponsor who have completed six consecutive months of service with the Company become eligible to participate in the Plan. Employees enter the Plan on the following January 1.

Contributions and vesting: Participants may make pre-tax salary deferral contributions designated as 401(k) contributions up to a maximum of 60% of compensation up to a maximum pre-tax limit of \$16,500 in 2010. Beginning January 1, 2002, the Plan provides that participants who are projected to be age 50 or older by the end of a calendar year and who are making deferral contributions to the Plan may also make a catch-up contribution of up to \$5,500 in 2010. Participants may also make after-tax contributions up to a maximum of 15% of their annual base compensation if they have not exceeded the limitation set by Internal Revenue Service. Participants are 100% vested in their contributions.

The Company matches 50% of each participant's contribution up to 5% of the participant's compensation. The matching contribution of the Company vests at 20% per year (after two complete years of service) for each year of participation in the Plan. Amounts forfeited by participants who terminate before they are fully vested are used to offset plan expenses and/or reduce future employer contributions.

In addition to the matching contribution, the Company may also make discretionary contributions based on a percentage of pre-tax profits, as defined, up to a maximum of 15% of the total base compensation of all participants. To be eligible to receive an employer discretionary contribution, a participant must be employed by the Company on the last day of the Plan year. Company contributions vest at a rate of 20% per participant service year (after two complete years of service). Amounts forfeited by participants who terminate before they are fully vested are used to offset plan expenses and/or reduce future employer contributions.

Participant investment options: Participants are allowed to invest in a variety of investment choices as more fully described in the Plan's literature. Participants may change their allocation on a daily basis.

Participant accounts: A separate account is maintained for each participant. Company contributions and net investment income are allocated as follows:

(i) Company discretionary contributions are allocated to each eligible participant based upon the relationship of his/her annual compensation to the total compensation of all participants. Annual additions to a participant's account may not exceed the lesser of \$40,000 or 100% of the participant's annual compensation.

Net investment income (loss) is allocated daily to each participant's account on a proportional basis according to their account balances so that each account bears its proportionate share of the income or loss.

Payment of benefits: Upon termination of service, retirement, death or disability, a participant may elect lump sum or installment distribution from the Plan. Hardship withdrawals are not permitted. In-service withdrawals of after-tax contributions are permitted.

401(k) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION

NOTES TO FINANCIAL STATEMENTS, Continued December 31, 2010 and 2009

Expenses of the plan: The Plan's administrative expenses are paid by either the Plan or the Plan's Sponsor as provided by the Plan document.

Forfeitures: At December 31, 2010 and 2009, forfeited non-vested participant accounts total \$10,515 and \$10,496, respectively. These accounts, when available, will be used to offset plan expenses and/or reduce future employer contributions.

Note 2. Significant Accounting Policies

The Plan's significant accounting policies are as follows:

Basis of accounting: The accompanying financial statements of the Plan are prepared on the accrual basis of accounting.

Investment valuation and income recognition: Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for discussion of fair value measurements.

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

Use of estimates: The preparation of financial statements in conformity with generally accepted accounting principles requires the plan administrator to make estimates and assumptions that affect the reported amounts of net assets available for benefits and changes therein. Actual results could differ from those estimates.

Income taxes: Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan. Management evaluated the Plan's tax positions and concluded that the Plan had maintained its tax exempt status and had taken no uncertain tax positions that require recognition or disclosure in the financial statements. Therefore, no provision or liability for income taxes has been included in the financial statements. With few exceptions, the Plan is no longer subject to income tax examinations by the U.S. federal, state or local tax authorities for years before 2007.

Risks and uncertainties: The Plan provides for various investment options that may invest in equity, fixed income or other investment securities. These investment securities are exposed to various risks, such as interest rate, market and credit risks. Due to the level of risk and uncertainty associated with certain investment securities, it is possible that participants' account balances and the amounts reported in the Statements of Net Assets Available for Benefits and the Statement of Changes in Net Assets Available for Benefits could be materially affected in the near term.

Payment of benefits: Benefit payments to participants are recorded upon distribution.

Recently issued accounting pronouncements: In January 2010, the FASB issued an amendment "Fair Value Measurements and Disclosures – Improving Disclosures about Fair Value Measurements" (ASU 2010-06) which requires new disclosures and reasons for transfers of financial assets and liabilities between Levels 1 and 2. This amendment also clarifies that fair value measurement disclosures are required for each class of financial assets and liabilities, and disclosures about inputs and valuation techniques are required for both Level 2 and Level 3 measurements. It further clarifies that the reconciliation of Level 3 measurements should separately present purchases, sales, issuances, and settlements instead of netting these changes. The guidance is effective for periods beginning after December 15, 2009, except for the guidance related to Level 3 measurements, which is effective for periods beginning on or after December 15, 2010. The Plan adopted the required provision of ASU No. 2010-06 regarding transfers of financial assets between Level 1 and 2 in 2010, and there was no impact to the financial statements. The Plan intends to adopt the provision regarding Level 3 measurements in its 2011 financial statements.

401(k) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION

NOTES TO FINANCIAL STATEMENTS (Continued) December 31, 2010 and 2009

In May 2011, the FASB issued Accounting Standards Update (ASU) 2011-04, "Amendments to Achieve Common Fair Value Measurements and Disclosure Requirements in U.S. Generally Accepted Accounting Principles ("GAAP") and International Financial Reporting Standards ("IFRS") ("ASU 2011-04")." ASU 2011-04 amended FASB Accounting Standards Codification ("ASC") 820, "Fair Value Measurements and Disclosures," to converge the fair value measurement guidance in GAAP and IFRS. Some of the amendments clarify the application of existing fair value measurement requirements, while other amendments change a particular principle in ASC 820. In addition, ASU 2011-04 requires additional fair value disclosures. The amendments are to be applied prospectively and are effective for annual periods beginning after December 15, 2011. Plan management is currently evaluating the effect that the provisions of ASU 2011-04 will have on the Plan's financial statements.

Note 3. Information Certified and Provided by Fidelity Management Trust Company

The following is a summary of the investment information as of December 31, 2010 and 2009, and for the year ended December 31, 2010, included throughout the Plan's financial statements and supplemental schedule, that was prepared by or derived from information provided by the trustee and furnished to the Plan Administrator. The Plan Administrator has obtained certifications from the trustee that information provided to the Plan Administrator by the trustee related to the following investments is complete and accurate. Accordingly, as permitted by 29 CFR 2520.203-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan Administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to information which appears throughout the financial statements and supplemental schedule related to the following investments:

	December 31,	
	2010	2009
Investments at fair value:		
Money Market Funds		
Fidelity Retirement Money Market Fund	\$ 3,698,596 *	\$ 3,593,758 *
Mutual Funds:		
Fidelity Contrafund	3,365,883 *	3,034,522 *
Fidelity Magellan Fund	2,456,764 *	2,358,741 *
Fidelity Puritan Fund	1,263,526 *	1,048,874 *
Fidelity Asset Manager 50% Fund	906,496 *	755,831 *
Other investments certified by Fidelity Management Trust Company	5,189,119	3,984,377
Total investments	\$ 16,880,384	\$ 14,776,103

* Investments representing more than 5% of the Plan's net assets available for benefits as of December 31, 2010 or 2009.

Fidelity Management Trust Company also certified the completeness and accuracy of \$1,454,556 of net appreciation in the fair value of investments and \$166,455 of interest and dividends related to the aforementioned investments for the year ended December 31, 2010.

Note 4. Fair Value Measurements

ASC 820, *Fair Value Measurements and Disclosures*, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under the FASB Codification are described below:

401(k) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION

NOTES TO FINANCIAL STATEMENTS, Continued December 31, 2010 and 2009

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

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

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

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

Mutual funds: Valued at the net asset value ("NAV") of shares held by the Plan at year end.

Money market funds: Valued at the NAV of units held by the Plan at year-end, which is generally intended to approximate one dollar per unit.

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

The following tables set forth, by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2010 and 2009.

Assets at Fair Value as of December 31, 2010				
	Level 1	Level 2	Level 3	Total
Money market	\$ -	\$ 3,698,596	\$ -	\$ 3,698,596
Intermediate bond	399,121	-	-	399,121
Large cap blend	1,186,301	-	-	1,186,301
Large cap growth	8,897,890	-	-	8,897,890
Large cap value	54,765	-	-	54,765
Mid cap blend	654,850	-	-	654,850
Mid cap growth	1,932,187	-	-	1,932,187
Mid cap value	56,674	-	-	56,674
Total investments at fair value	\$ 13,181,788	\$ 3,698,596	\$ -	\$ 16,880,384

401(k) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION

NOTES TO FINANCIAL STATEMENTS, Continued December 31, 2010 and 2009

	Assets at Fair Value as of December 31, 2009			
	Level 1	Level 2	Level 3	Total
Money market	\$ -	\$ 3,593,758	\$ -	\$ 3,593,758
Intermediate bond	327,046	-	-	327,046
Large cap blend	949,135	-	-	949,135
Large cap growth	8,352,243	-	-	8,352,243
Large cap value	55,358	-	-	55,358
Mid cap blend	356,341	-	-	356,341
Mid cap growth	966,862	-	-	966,862
Mid cap value	175,360	-	-	175,360
Total investments at fair value	\$ 11,182,345	\$ 3,593,758	\$ -	\$ 14,776,103

The following table sets forth additional disclosures of the Plan's investments whose fair value is estimated using NAV per share (or its equivalent) as of December 31, 2010 and 2009:

Investment	Fair Value		Unfunded Commitment	Redemption Frequency	Redemption Notice Period
	2010	2009			
Fidelity Retirement Money Market (a)	\$ 3,698,596	\$ 3,593,758	\$ -	Daily	None

(a) This category includes investments in a money market fund that seeks to provide a modest rate of return with minimal risk.

Note 5. Tax Status

Effective August 20, 2009, the Plan adopted a non-standardized form of a prototype plan sponsored by Fidelity Management and Research Company. The prototype plan received its latest determination letter dated March 31, 2008 as to the Plan's qualified status. The prototype plan determination letter has been relied upon by this Plan. Although the Plan has been amended since the prototype plan received the determination letter, the Plan Administrator believes that the Plan is designed and is currently being operating in compliance with the applicable requirements of the Internal Revenue Code.

Note 6. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event the Plan terminates, participants will become 100% vested in their accounts. Any unallocated assets of the Plan shall be allocated to participant accounts and distributed in single lump sum payments to each Participant in accordance with Plan provisions until all assets have been distributed by the Trustee.

Note 7. Party-in-Interest Transactions

Certain Plan investments are assets managed by the Trustee who is in benefit service alliance with Fidelity Retirement Services who is the record keeper as defined by the Plan. Therefore, these transactions qualify as party-in-interest transactions.

401(k) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION

NOTES TO FINANCIAL STATEMENTS, Continued December 31, 2010 and 2009

Note 8. Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2010 and 2009 to Form 5500:

	2010	2009
Net assets available for benefits per the financial statements	\$ 16,919,317	\$ 14,911,545
Less: Employer contributions receivable	(38,933)	(135,442)
Net assets available for benefits per Form 5500	\$ 16,880,384	\$ 14,776,103

The following is a reconciliation of changes in net assets available for benefits per the financial statements to Form 5500 for the year ended December 31, 2010:

Changes in net assets available for benefits per financial statements	\$ 2,007,772
Add: Prior year employer receivable	135,442
Less: Current year employer receivable	(38,933)
Net increase in net assets available for benefits per Form 5500	\$ 2,104,281

Note 9. Subsequent Events

The Plan has evaluated events through October 12, 2011, the date the financial statements were available to be issued.

401(k) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION

**SCHEDULE H, PART IV, LINE 4 (i) - SCHEDULE OF ASSETS (Held at End of Year)
December 31, 2010**

Identity of Issuer	Description of Investment	Current Value
* Fidelity Management Trust Company	Retirement Money Market (3,698,596 shares)	\$ 3,698,596
* Fidelity Management Trust Company	Intermediate Bond Fund (37,831 shares)	399,121
* Fidelity Management Trust Company	Asset Manager 50% Fund (58,787 shares)	906,496
* Fidelity Management Trust Company	Puritan Fund (70,549 shares)	1,263,526
* Fidelity Management Trust Company	Magellan Fund (34,279 shares)	2,456,764
* Fidelity Management Trust Company	Contrafund (49,696 shares)	3,365,883
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* Fidelity Management Trust Company	Low Priced Stock Fund (17,062 shares)	654,850
* Fidelity Management Trust Company	Worldwide Fund (6,038 shares)	112,669
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* Fidelity Management Trust Company	Artisan Mid Cap Value Fund (2,822 shares)	56,674
RS Investments	RS Partners (22,154 shares)	733,087
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* Fidelity Management Trust Company	Freedom 2020 Fund (7,924 shares)	109,274
* Fidelity Management Trust Company	Freedom 2025 Fund (904 shares)	10,410
* Fidelity Management Trust Company	Freedom 2030 Fund (4,724 shares)	65,053
* Fidelity Management Trust Company	Freedom 2035 Fund (4,418 shares)	50,672
* Fidelity Management Trust Company	Freedom 2040 Fund (5,880 shares)	47,100
Total investments		\$ 16,880,384

The above information has been certified by Fidelity Management Trust Company, as trustee, as complete and accurate.

* Represents a party-in-interest.

401(K) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION

Financial Report
December 31, 2010

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Independent Auditor's Report

To the 401(k) Profit Sharing Plan Committee
Magnetic Analysis Corporation
Elmsford, New York

We were engaged to audit the accompanying Statements of Net Assets Available for Benefits of the 401(k) Profit Sharing Plan of Magnetic Analysis Corporation (the "Plan") as of December 31, 2010 and 2009, and the related Statement of Changes in Net Assets Available for Benefits for the year ended December 31, 2010, and the supplemental schedule of assets (held at end of year) as of December 31, 2010. These financial statements and supplemental schedule are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the United States Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified or provided by the Fidelity Management Trust Company, the Trustee of the Plan, except for comparing such information to the related information included in the financial statements and supplemental schedule. We have been informed by the Plan Administrator that the Trustee holds the Plan's assets and executes transactions. The Plan Administrator has obtained certifications from the Trustee regarding the completeness and accuracy of the information summarized in Note 3 that was provided to the Plan Administrator by the Trustee as of and for the year ended December 31, 2010, and as of December 31, 2009.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and schedule taken as a whole. The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified or provided 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 United States Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

McGladrey & Pullen, LLP

Stamford, Connecticut
October 12, 2011

401(k) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2010 and 2009

	2010	2009
Assets		
Investments at fair value (Notes 3 and 4)	\$ 16,880,384	\$ 14,776,103
Receivables		
Employer discretionary contribution receivable	38,933	135,442
Net assets available for benefits	\$ 16,919,317	\$ 14,911,545

See Notes to Financial Statements.

401(k) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Year Ended December 31, 2010

Additions to Net Assets Attributable to:

Investment Income (Note 3)

Interest and dividends \$ 166,455

Net appreciation in fair value of investments 1,454,556

Total investment income 1,621,011

Contributions

Employer discretionary 38,933

Employer matching 153,119

Participant 608,132

Total contributions 800,184

Total additions 2,421,195

Deductions from Net Assets Attributable to:

Benefits paid to participants 413,026

Administrative expenses 397

Total deductions 413,423

Net increase 2,007,772

Net Assets Available for Benefits

Beginning of year 14,911,545

End of year \$ 16,919,317

See Notes to Financial Statements.

401(k) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION

NOTES TO FINANCIAL STATEMENTS

December 31, 2010 and 2009

Note 1. Plan Description

The following description of the 401(k) Profit Sharing Plan of Magnetic Analysis Corporation (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 established for the benefit of the employees of Magnetic Analysis Corporation (the "Company" or "Sponsor"). The Plan and Trust of which it is a part are intended to satisfy all of the requirements for a qualified retirement plan under the appropriate provisions of the Internal Revenue Code ("IRC") and similar state tax laws. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Fidelity Management Trust Company acts as the Trustee, Custodian, and Recordkeeper of the Plan (hereafter referred to as Trustee).

Eligibility: Employees of the Sponsor who have completed six consecutive months of service with the Company become eligible to participate in the Plan. Employees enter the Plan on the following January 1.

Contributions and vesting: Participants may make pre-tax salary deferral contributions designated as 401(k) contributions up to a maximum of 60% of compensation up to a maximum pre-tax limit of \$16,500 in 2010. Beginning January 1, 2002, the Plan provides that participants who are projected to be age 50 or older by the end of a calendar year and who are making deferral contributions to the Plan may also make a catch-up contribution of up to \$5,500 in 2010. Participants may also make after-tax contributions up to a maximum of 15% of their annual base compensation if they have not exceeded the limitation set by Internal Revenue Service. Participants are 100% vested in their contributions.

The Company matches 50% of each participant's contribution up to 5% of the participant's compensation. The matching contribution of the Company vests at 20% per year (after two complete years of service) for each year of participation in the Plan. Amounts forfeited by participants who terminate before they are fully vested are used to offset plan expenses and/or reduce future employer contributions.

In addition to the matching contribution, the Company may also make discretionary contributions based on a percentage of pre-tax profits, as defined, up to a maximum of 15% of the total base compensation of all participants. To be eligible to receive an employer discretionary contribution, a participant must be employed by the Company on the last day of the Plan year. Company contributions vest at a rate of 20% per participant service year (after two complete years of service). Amounts forfeited by participants who terminate before they are fully vested are used to offset plan expenses and/or reduce future employer contributions.

Participant investment options: Participants are allowed to invest in a variety of investment choices as more fully described in the Plan's literature. Participants may change their allocation on a daily basis.

Participant accounts: A separate account is maintained for each participant. Company contributions and net investment income are allocated as follows:

(i) Company discretionary contributions are allocated to each eligible participant based upon the relationship of his/her annual compensation to the total compensation of all participants. Annual additions to a participant's account may not exceed the lesser of \$40,000 or 100% of the participant's annual compensation.

Net investment income (loss) is allocated daily to each participant's account on a proportional basis according to their account balances so that each account bears its proportionate share of the income or loss.

Payment of benefits: Upon termination of service, retirement, death or disability, a participant may elect lump sum or installment distribution from the Plan. Hardship withdrawals are not permitted. In-service withdrawals of after-tax contributions are permitted.

401(k) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION

NOTES TO FINANCIAL STATEMENTS, Continued December 31, 2010 and 2009

Expenses of the plan: The Plan's administrative expenses are paid by either the Plan or the Plan's Sponsor as provided by the Plan document.

Forfeitures: At December 31, 2010 and 2009, forfeited non-vested participant accounts total \$10,515 and \$10,496, respectively. These accounts, when available, will be used to offset plan expenses and/or reduce future employer contributions.

Note 2. Significant Accounting Policies

The Plan's significant accounting policies are as follows:

Basis of accounting: The accompanying financial statements of the Plan are prepared on the accrual basis of accounting.

Investment valuation and income recognition: Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for discussion of fair value measurements.

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

Use of estimates: The preparation of financial statements in conformity with generally accepted accounting principles requires the plan administrator to make estimates and assumptions that affect the reported amounts of net assets available for benefits and changes therein. Actual results could differ from those estimates.

Income taxes: Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan. Management evaluated the Plan's tax positions and concluded that the Plan had maintained its tax exempt status and had taken no uncertain tax positions that require recognition or disclosure in the financial statements. Therefore, no provision or liability for income taxes has been included in the financial statements. With few exceptions, the Plan is no longer subject to income tax examinations by the U.S. federal, state or local tax authorities for years before 2007.

Risks and uncertainties: The Plan provides for various investment options that may invest in equity, fixed income or other investment securities. These investment securities are exposed to various risks, such as interest rate, market and credit risks. Due to the level of risk and uncertainty associated with certain investment securities, it is possible that participants' account balances and the amounts reported in the Statements of Net Assets Available for Benefits and the Statement of Changes in Net Assets Available for Benefits could be materially affected in the near term.

Payment of benefits: Benefit payments to participants are recorded upon distribution.

Recently issued accounting pronouncements: In January 2010, the FASB issued an amendment "Fair Value Measurements and Disclosures – Improving Disclosures about Fair Value Measurements" (ASU 2010-06) which requires new disclosures and reasons for transfers of financial assets and liabilities between Levels 1 and 2. This amendment also clarifies that fair value measurement disclosures are required for each class of financial assets and liabilities, and disclosures about inputs and valuation techniques are required for both Level 2 and Level 3 measurements. It further clarifies that the reconciliation of Level 3 measurements should separately present purchases, sales, issuances, and settlements instead of netting these changes. The guidance is effective for periods beginning after December 15, 2009, except for the guidance related to Level 3 measurements, which is effective for periods beginning on or after December 15, 2010. The Plan adopted the required provision of ASU No. 2010-06 regarding transfers of financial assets between Level 1 and 2 in 2010, and there was no impact to the financial statements. The Plan intends to adopt the provision regarding Level 3 measurements in its 2011 financial statements.

401(k) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION

NOTES TO FINANCIAL STATEMENTS (Continued) December 31, 2010 and 2009

In May 2011, the FASB issued Accounting Standards Update (ASU) 2011-04, "Amendments to Achieve Common Fair Value Measurements and Disclosure Requirements in U.S. Generally Accepted Accounting Principles ("GAAP") and International Financial Reporting Standards ("IFRS") ("ASU 2011-04")." ASU 2011-04 amended FASB Accounting Standards Codification ("ASC") 820, "Fair Value Measurements and Disclosures," to converge the fair value measurement guidance in GAAP and IFRS. Some of the amendments clarify the application of existing fair value measurement requirements, while other amendments change a particular principle in ASC 820. In addition, ASU 2011-04 requires additional fair value disclosures. The amendments are to be applied prospectively and are effective for annual periods beginning after December 15, 2011. Plan management is currently evaluating the effect that the provisions of ASU 2011-04 will have on the Plan's financial statements.

Note 3. Information Certified and Provided by Fidelity Management Trust Company

The following is a summary of the investment information as of December 31, 2010 and 2009, and for the year ended December 31, 2010, included throughout the Plan's financial statements and supplemental schedule, that was prepared by or derived from information provided by the trustee and furnished to the Plan Administrator. The Plan Administrator has obtained certifications from the trustee that information provided to the Plan Administrator by the trustee related to the following investments is complete and accurate. Accordingly, as permitted by 29 CFR 2520.203-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan Administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to information which appears throughout the financial statements and supplemental schedule related to the following investments:

	December 31,	
	2010	2009
Investments at fair value:		
Money Market Funds		
Fidelity Retirement Money Market Fund	\$ 3,698,596 *	\$ 3,593,758 *
Mutual Funds:		
Fidelity Contrafund	3,365,883 *	3,034,522 *
Fidelity Magellan Fund	2,456,764 *	2,358,741 *
Fidelity Puritan Fund	1,263,526 *	1,048,874 *
Fidelity Asset Manager 50% Fund	906,496 *	755,831 *
Other investments certified by Fidelity Management Trust Company	5,189,119	3,984,377
Total investments	\$ 16,880,384	\$ 14,776,103

* Investments representing more than 5% of the Plan's net assets available for benefits as of December 31, 2010 or 2009.

Fidelity Management Trust Company also certified the completeness and accuracy of \$1,454,556 of net appreciation in the fair value of investments and \$166,455 of interest and dividends related to the aforementioned investments for the year ended December 31, 2010.

Note 4. Fair Value Measurements

ASC 820, *Fair Value Measurements and Disclosures*, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under the FASB Codification are described below:

401(k) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION

NOTES TO FINANCIAL STATEMENTS, Continued December 31, 2010 and 2009

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

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

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

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

Mutual funds: Valued at the net asset value ("NAV") of shares held by the Plan at year end.

Money market funds: Valued at the NAV of units held by the Plan at year-end, which is generally intended to approximate one dollar per unit.

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

The following tables set forth, by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2010 and 2009.

Assets at Fair Value as of December 31, 2010				
	Level 1	Level 2	Level 3	Total
Money market	\$ -	\$ 3,698,596	\$ -	\$ 3,698,596
Intermediate bond	399,121	-	-	399,121
Large cap blend	1,186,301	-	-	1,186,301
Large cap growth	8,897,890	-	-	8,897,890
Large cap value	54,765	-	-	54,765
Mid cap blend	654,850	-	-	654,850
Mid cap growth	1,932,187	-	-	1,932,187
Mid cap value	56,674	-	-	56,674
Total investments at fair value	\$ 13,181,788	\$ 3,698,596	\$ -	\$ 16,880,384

401(k) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION

NOTES TO FINANCIAL STATEMENTS, Continued December 31, 2010 and 2009

	Assets at Fair Value as of December 31, 2009			
	Level 1	Level 2	Level 3	Total
Money market	\$ -	\$ 3,593,758	\$ -	\$ 3,593,758
Intermediate bond	327,046	-	-	327,046
Large cap blend	949,135	-	-	949,135
Large cap growth	8,352,243	-	-	8,352,243
Large cap value	55,358	-	-	55,358
Mid cap blend	356,341	-	-	356,341
Mid cap growth	966,862	-	-	966,862
Mid cap value	175,360	-	-	175,360
Total investments at fair value	\$ 11,182,345	\$ 3,593,758	\$ -	\$ 14,776,103

The following table sets forth additional disclosures of the Plan's investments whose fair value is estimated using NAV per share (or its equivalent) as of December 31, 2010 and 2009:

Investment	Fair Value		Unfunded Commitment	Redemption Frequency	Redemption Notice Period
	2010	2009			
Fidelity Retirement Money Market (a)	\$ 3,698,596	\$ 3,593,758	\$ -	Daily	None

(a) This category includes investments in a money market fund that seeks to provide a modest rate of return with minimal risk.

Note 5. Tax Status

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401(k) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION

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401(k) PROFIT SHARING PLAN OF MAGNETIC ANALYSIS CORPORATION

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December 31, 2010**

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Total investments		\$ 16,880,384

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