

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 <div style="text-align: center; font-size: 1.5em; font-weight: bold;">2010</div> 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>10/01/2010</u> and ending <u>09/30/2011</u>	
A This return/report is for:	☐ a multiemployer plan; ☐ a multiple-employer plan; or ☒ a single-employer plan; ☐ a DFE (specify) ____
B This return/report is:	☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information				
1a Name of plan <u>SCITOR CORPORATION EQUITY PARTICIPATION PLAN</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>005</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>02/01/2009</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>005</u>	1c Effective date of plan <u>02/01/2009</u>	
1b Three-digit plan number (PN) ▶	<u>005</u>				
1c Effective date of plan <u>02/01/2009</u>					
2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) <u>SCITOR CORPORATION</u> <u>12010 SUNSET HILLS ROAD, SUITE 800</u> <u>RESTON, VA 20190</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>94-2622443</u></td> </tr> <tr> <td>2c Sponsor's telephone number <u>703-961-4293</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>541330</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>94-2622443</u>	2c Sponsor's telephone number <u>703-961-4293</u>	2d Business code (see instructions) <u>541330</u>	
2b Employer Identification Number (EIN) <u>94-2622443</u>					
2c Sponsor's telephone number <u>703-961-4293</u>					
2d Business code (see instructions) <u>541330</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.	07/11/2012	HOLLY SNODGRASS
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with incorrect/unrecognized electronic signature.	07/12/2012	KATHLEEN T DICKMAN
	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") SCITOR CORPORATION 12010 SUNSET HILLS ROAD, SUITE 800 RESTON, VA 20190	3b Administrator's EIN 94-2622443 3c Administrator's telephone number 703-961-4293
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4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
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5 Total number of participants at the beginning of the plan year	5	1560
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6 Number of participants as of the end of the plan year (welfare plans complete only lines 6a , 6b , 6c , and 6d).		
a Active participants.....	6a	1384
b Retired or separated participants receiving benefits.....	6b	0
c Other retired or separated participants entitled to future benefits.....	6c	192
d Subtotal. Add lines 6a , 6b , and 6c	6d	1576
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	2
f Total. Add lines 6d and 6e	6f	1578
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	1557
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	
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8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
 2E

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

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

a Pension Schedules

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

b General Schedules

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

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 10/01/2010 and ending 09/30/2011		
A Name of plan SCITOR CORPORATION EQUITY PARTICIPATION PLAN	B Three-digit plan number (PN) ►	005
C Plan sponsor's name as shown on line 2a of Form 5500 SCITOR CORPORATION	D Employer Identification Number (EIN) 94-2622443	

Part I	Asset and Liability Statement
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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		1634601
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	31602302	68175
(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)	2587516	5244967
(2) U.S. Government securities	1c(2)	14321	
(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)		
(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)	24629388	56716375
(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	58833527	63664118

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	58833527	63664118
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Part II Income and Expense Statement

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

Income**a Contributions:**

		(a) Amount	(b) Total
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	1732957	
(B) Participants	2a(1)(B)		
(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)		1732957

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

(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	15600	
(B) U.S. Government securities	2b(1)(B)	288	
(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)		15888
(2) Dividends: (A) Preferred stock	2b(2)(A)	4420014	
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		4420014
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	14214	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	14560	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		-346

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)	1082987	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		1082987
(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)		
c Other income.....	2c		8
d Total income. Add all income amounts in column (b) and enter total.....	2d		7251508

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	2420917	
(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)		2420917
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)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		0
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		2420917

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		4830591
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: PWC

(2) EIN: 13-4008324

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....		X	
e Was this plan covered by a fidelity bond?.....	X		25000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

5b(1) Name of plan(s)

5b(2) EIN(s)	5b(3) PN(s)

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 10/01/2010 and ending 09/30/2011

A Name of plan <u>SCITOR CORPORATION EQUITY PARTICIPATION PLAN</u>	B Three-digit plan number (PN) ▶ <u>005</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>SCITOR CORPORATION</u>	D Employer Identification Number (EIN) <u>94-2622443</u>

Part I	Distributions
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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>20-1171923</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)
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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
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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.....	☐ Increase	☐ Decrease	☐ Both	☐ 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.
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10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?.....	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

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

Schedule R (Form 5500) 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):

Scitor Corporation Equity Participation Plan

**Financial Statements for the Fiscal Years Ended September
30, 2011 and September 30, 2010, Supplemental Schedules as
of September 30, 2011, and Report of Independent Auditors**

Scitor Corporation Equity Participation Plan

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* All other schedules required by 29 CFR 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA") have been omitted because they are not applicable.



Report of Independent Auditors

To The Trustee, Participants, and Administrator of
Scitor Corporation Equity Participation Plan

In our opinion, the accompanying statements of net assets available for benefits and the related statements of changes in net assets available for benefits present fairly, in all material respects, the net assets available for benefits of Scitor Corporation Equity Participation Plan (the "Plan") at September 30, 2011 and 2010, and the changes in net assets available for benefits for the years then ended, in conformity with accounting principles generally accepted in the United States of America. These financial statements are the responsibility of the Plan's management. Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits of these statements in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements, assessing the accounting principles used and significant estimates made by management, and evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

Our audits were conducted for the purpose of forming an opinion on the financial statements taken as a whole. The supplemental schedules of assets (held at year end) and reportable transactions are presented for the purpose of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. These supplemental schedules are the responsibility of the Plan's management and were derived from and relate directly to the underlying accounting and other records used to prepare the financial statements. The supplemental schedules have been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves and other additional procedures, in accordance with auditing standards generally accepted in the United States of America. In our opinion, the supplemental schedules are fairly stated in all material respects in relation to the financial statements taken as a whole.

PricewaterhouseCoopers LLP

July 2, 2012

Scitor Corporation Equity Participation Plan
Statements of Net Assets Available for Benefits
September 30, 2011 and September 30, 2010

	<u>2011</u>	<u>2010</u>
Assets		
Cash	\$ 1,634,601	\$ 2,601,837
Certificate of deposit	5,244,967	-
Investments:		
Scitor Holdings, Inc. cumulative preferred stock	56,716,375	24,629,388
Total investments, at fair value (See Note 4)	<u>56,716,375</u>	<u>24,629,388</u>
Employer contributions receivable	68,175	31,602,302
Net assets available for benefits	<u><u>\$ 63,664,118</u></u>	<u><u>\$ 58,833,527</u></u>

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

Scitor Corporation Equity Participation Plan
Statements of Changes in Net Assets Available for Benefits
Fiscal years ended September 30, 2011 and September 30, 2010

	<u>2011</u>	<u>2010</u>
Additions		
Investment Income:		
Net appreciation on Scitor Holdings, Inc. cumulative preferred stock	\$ 1,082,987	\$ 2,316,381
Dividends	4,420,014	-
Total investment income	5,503,001	2,316,381
Employer contributions	1,732,957	34,191,261
Interest	15,542	289
Fractional share conversion	8	-
Total additions	<u>7,251,508</u>	<u>36,507,931</u>
Deductions		
Benefits paid to participants	2,420,917	99,454
Total deductions	<u>2,420,917</u>	<u>99,454</u>
Net increase	4,830,591	36,408,477
Net assets available for benefits:		
Beginning of year	58,833,527	22,425,050
End of year	<u>\$ 63,664,118</u>	<u>\$ 58,833,527</u>

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

Scitor Corporation Equity Participation Plan

Notes to Financial Statements

Fiscal years ended September 30, 2011 and September 30, 2010

1. Description of the Plan

The following brief description of the Scitor Corporation Equity Participation Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan and was established by Scitor Holdings, Inc. (the "Company" and the "Sponsor Company") effective February 1, 2009 as a profit sharing plan within the meaning of section 401(a) of the Internal Revenue Code (the "IRC"), as amended. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended. The Plan is administered by the Administrative Committee, which was appointed by the Board of Directors of the Company. Carl W. Monk, Jr. (Trustee) holds the plan assets.

Eligibility

Employees are eligible to participate in the Plan immediately upon the first day of employment. Temporary employees, unless they have completed at least 1,000 hours of service during the year, and leased employees are generally not eligible to participate in the Plan.

Contributions

The Company may make annual discretionary contributions to the Plan in an amount determined by the Company. Contributions can be made to the Plan in the form of cash or Company securities, and are subject to certain limitations. For Plan years 2011 and 2010, the discretionary contribution was 0.88% and 18.5%, respectively, of eligible compensation paid during the Plan years.

Vesting

Participants are fully vested in Company contributions and earnings thereon.

Participant Accounts

The Plan maintains separate accounts for each participant. Each participant who is employed on September 30 of the Plan year receives an allocation of the Company's discretionary contribution for that Plan year, unless the participant is a temporary employee, intern or contractor who has not met the 1,000 hours of service threshold for the Plan year. A participant who is terminated during the Plan year who was an employee at any time during the Plan year and who has completed at least five years of employment with the Company as of his or her date of termination shall receive an allocation of the Company's contribution for such Plan year, regardless of whether the participant was employed by the Company on September 30 of the Plan year. Allocations of contributions are based on a participant's eligible compensation, relative to total eligible compensation. For those participants who are eligible but who have terminated prior to September 30, contributions are limited to the lesser of 10% of eligible compensation or the allocation entitled to pursuant to the eligible compensation to total eligible compensation ratio. Allocations of plan earnings by investment are based on the ratio of a participant's end of the year account balance in the investment to all the participants' account balances in the investment as of the latest valuation date.

Payment of Benefits

Distributions from the Plan are made when a participant retires, dies (in which case payment shall be made to his or her beneficiary or, if none, his or her legal representatives), begins to receive payment under the Scitor Corporation Long Term Disability Plan, or otherwise terminates employment with the Company. In the Plan year in which the above situations apply, the participant's noncash account balance shall be converted to cash based on the value determined as of the most recent valuation date, provided there is cash in the Plan. Converted shares are then re-allocated at year-end at fair value among the remaining participants in the Plan. After being converted, distributions of account balances shall be based on the value determined as of the most recent valuation date occurring immediately prior to the distribution and are to be made in cash in installments over a term of nine years commencing 180 days following the Plan year in which the participant's termination of employment occurred. Distributions for accounts with balances over \$1,000 can only be made at the

Scitor Corporation Equity Participation Plan

Notes to Financial Statements

Fiscal years ended September 30, 2011 and September 30, 2010

election of a participant. The Administrative Committee, pursuant to a uniform nondiscriminatory policy, may, with the consent of the beneficiary, make such distribution in the form of a single lump sum payment. In the Plan years ended September 30, 2011 and 2010, there were lump sum distributions totaling \$2,420,917 and \$99,454, respectively.

Voting Rights

Participants are not entitled to a vote of any Company shares held by the Plan. The Trustee is required, however, to vote any shares allocated to participant accounts on behalf of the collective best interest of Plan participants and beneficiaries, to the extent that such shares have voting rights.

Plan Termination

Although it has not expressed any intention to do so, the Company has the right to terminate or amend the Plan at any time, subject to the provisions of ERISA. Upon such termination, the Company, at its discretion, will notify the Trustee to either hold all assets of the Plan and make payments in accordance with the terms of the Plan or distribute to each participant the net balance in his or her account in a lump sum payment.

2. Summary of Significant Accounting Policies

Basis of Accounting

The accompanying financial statements are prepared using the accrual basis 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 certain reported amounts of assets, liabilities, and changes therein, and disclosures of contingent assets and liabilities. Actual results may differ from those estimates.

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 and is measured based on an established hierarchy of inputs. See Note 4, "Fair Value of Investments," for a discussion of fair value measurements.

Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes realized and unrealized gains and losses on the Plan's investments held during the year.

Risks and Uncertainties

The Plan's primary investments are in preferred stock of Scitor Holdings, Inc. The fair value of the preferred stock is calculated on an annual basis by an independent valuation firm. Fair value may change for a number of reasons, including changes in company performance, economic circumstances, or industry outlook.

Payment of Benefits

Benefit payments are recorded when paid.

Administrative Expenses

Administrative expenses are paid by the Company and, therefore, are not included in the Plan's financial statements.

Reclassification

Certain prior year amounts have been reclassified to conform to the current year presentation.

Scitor Corporation Equity Participation Plan

Notes to Financial Statements

Fiscal years ended September 30, 2011 and September 30, 2010

Tax Status

Income taxes are not provided as the Plan is designed to be exempt from taxation under the IRC. On October 8, 2010, the Plan received a favorable determination letter from the Internal Revenue Service (the "IRS"). The Plan has been amended since receiving the determination letter. However, the plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the plan and recognize a tax liability (or asset) if the plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of September 30, 2011, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) 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.

New Accounting Pronouncements

In January 2010, the Financial Accounting Standards Board (the "FASB") issued additional disclosure requirements for fair value measurements. The guidance requires previous fair value hierarchy disclosures to be further disaggregated by class of assets and liabilities. A class is often a subset of assets or liabilities within a line item in the statement of net assets available for benefits. In addition, significant transfers between Levels 1 and 2 of the fair value hierarchy are required to be disclosed. These additional requirements became effective January 1, 2010. These amendments did not have an impact on the financial results as this guidance relates only to additional disclosures. In addition, the fair value disclosure amendments also require more detailed disclosures of the changes in Level 3 instruments. These changes became effective January 1, 2011 and have been incorporated into the Plan disclosures. See Note 4, "Fair value of Investments," for further information.

In May 2011, the FASB issued Accounting Standards Update ("ASU") 2011-04, *Amendments to Achieve Common Fair Value Measurement and Disclosure Requirements in U.S. GAAP and IFRS*, which amends Accounting Standards Codification ("ASC") 820, *Fair Value Measurement*, to provide clarification to existing requirements for fair value measurement disclosure. This amendment is required to be applied prospectively, and it is effective for fiscal years beginning after December 15, 2012. The implementation of the amendment is not expected to have a material impact on the Plan's financial statements.

3. Investments

Each Series of cumulative preferred stock held by the Plan is comprised of equal amounts of senior and junior shares. The fair value of the individual investments that represent five percent or more of the Plan's net assets available for benefits at September 30, are as follows:

	2011	2010
Scitor Holdings, Inc.:		
Series A cumulative preferred stock	\$ 23,735,628	\$ 24,629,388
Series B cumulative preferred stock	32,980,747	-
Total investments	<u>\$ 56,716,375</u>	<u>\$ 24,629,388</u>

4. Fair Value of Investments

The FASB provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities

Scitor Corporation Equity Participation Plan
Notes to Financial Statements
Fiscal years ended September 30, 2011 and September 30, 2010

(Level 1 inputs) and the lowest priority to unobservable inputs (Level 3 inputs). The three levels of the fair value hierarchy under the framework are described as follows:

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

Level 2 - Inputs to the valuation methodology include

- 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 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.

Pursuant to the Plan, the fair market value of plan assets is required to be established on the last day of each Plan year. For purposes of the Plan, fair market value is equivalent to fair value.

Following is a description of the valuation methodologies used for assets measured at fair value.

Scitor Holdings, Inc. Series A and Series B Cumulative Preferred Stock: Valued based on an income approach, a market approach, and an option pricing method approach.

The preceding methods and approaches described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values.

Scitor Corporation Equity Participation Plan
Notes to Financial Statements
Fiscal years ended September 30, 2011 and September 30, 2010

The following table represents assets and liabilities measured and recorded at fair value on the Plan's statements of net assets available for benefits, on a recurring basis, and their level within the fair value hierarchy as of September 30, 2011 and 2010:

Assets at Fair Value as of September 30, 2011				
	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Scitor Holdings, Inc.:				
Series A cumulative preferred stock	\$ -	\$ -	\$ 23,735,628	\$ 23,735,628
Series B cumulative preferred stock	-	-	32,980,747	32,980,747
Total assets, at fair value	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 56,716,375</u>	<u>\$ 56,716,375</u>

Assets at Fair Value as of September 30, 2010				
	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Scitor Holdings, Inc.:				
Series A cumulative preferred stock	\$ -	\$ -	\$ 24,629,388	\$ 24,629,388
Total assets, at fair value	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 24,629,388</u>	<u>\$ 24,629,388</u>

The classification of an investment as Level 3 is based upon the significance of unobservable inputs to the overall fair value measurement. However, Level 3 financial instruments may include, in addition to the use of unobservable inputs, observable inputs (inputs that are actually quoted and can be validated to market sources). Accordingly, gains and losses in the table below may include changes in fair value due in part to changes in observable inputs that are part of the valuation methodology.

Each Series of cumulative preferred stock held by the Plan is composed of an equal number of senior and junior shares. Participant accounts have been allocated using the total shares of Series A and of Series B. A fair value calculation of senior and junior shares could result in different valuations, depending upon the pricing model used to estimate fair value. Management has presented the Series A and B cumulative preferred stock as one unit of account for purposes of both plan accounting and disclosure.

The following table sets forth a summary of changes in the fair value of the Plan's Level 3 plan assets for the years ended September 30, 2011 and 2010:

	<u>2011</u>	<u>2010</u>
Balance at beginning of year	\$ 24,629,388	\$ -
Issuances	31,004,000	22,313,007
Appreciation	5,503,009	2,316,381
Dividends	(4,420,014)	-
Fractional share conversion	(8)	-
Balance at end of year	<u>\$ 56,716,375</u>	<u>\$ 24,629,388</u>

Included in the appreciation total shown in the table above is \$1,082,987 of net unrealized appreciation of the Scitor Holdings, Inc. preferred stock investments, which is reflected as net appreciation on the statements of changes in net assets available for benefits. Realized appreciation, in the form of dividends received by the Plan, is shown as dividends on the statements of changes in net assets available for benefits.

Scitor Corporation Equity Participation Plan
Notes to Financial Statements
Fiscal years ended September 30, 2011 and September 30, 2010

5. Certificate of Deposit

As of September 30, 2011, the Plan held a certificate of deposit, with an interest rate of 0.41%, which was issued by People's National Bank on February 28, 2011 and has a 10-month maturity.

6. Related-Party Transactions

Carl W. Monk, Jr. serves as Trustee of the Plan and also has an account in the Plan. As such, he is considered a party-in-interest. During the year ended September 30, 2011, the Trustee retired from the Company, and his account balance, comprised of both Series A and Series B shares, was converted to cash.

As of September 30, 2011, the Plan held investments in 22,313 shares of Scitor Holdings, Inc. Series A cumulative preferred stock and 31,004 shares of Scitor Holdings, Inc. Series B cumulative preferred stock. As of September 30, 2010, the Plan held investments in 22,313 shares of Scitor Holdings, Inc. Series A cumulative preferred stock.

7. Subsequent events

In preparing these financial statements, management performed an evaluation of subsequent events through July 2, 2012, the date the financial statements were available for issuance, to determine whether circumstances warranted recognition and disclosure of those events or transactions in the financial statements as of September 30, 2011.

SUPPLEMENTAL SCHEDULES

Scitor Corporation Equity Participation Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
September 30, 2011

Identity of Issue	Description of Investment	Cost	Current Value
* Scitor Holdings, Inc.:			
Series A cumulative preferred stock	Preferred stock	\$ 22,313,007	\$ 23,735,628
Series B cumulative preferred stock	Preferred stock	31,004,000	32,980,747
Total assets, at fair value		<u>\$ 53,317,007</u>	<u>\$ 56,716,375</u>

* Denotes a party-in-interest.

Scitor Corporation Equity Participation Plan
Schedule H, Line 4j - Schedule of Reportable Transactions
Fiscal year ended September 30, 2011

Identity of Party Involved / Description of Asset	Purchase Price	Selling Price	Lease Rental	Expenses Incurred with Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain or (Loss)
Scitor Holdings, Inc. Series B cumulative preferred stock	\$ 31,004,000	\$ -	\$ -	\$ -	\$ 31,004,000	\$ 31,004,000	\$ -

Application for Extension of Time To File Certain Employee Plan Returns

► For Privacy Act and Paperwork Reduction Act Notice, see instructions.

OMB No. 1545-0212

File With IRS Only

Part I Identification

A Name of filer, plan administrator, or plan sponsor (see instructions) <u>Scitor Corporation</u> Number, street, and room or suite no. (If a P.O. box, see instructions) <u>12010 Sunset Hills Road, Suite 800</u> City or town, state, and ZIP code <u>Reston VA 20190</u>	B Filer's identifying number (see instructions) Employer identification number (EIN) <u>94-2622443</u> Social security number (SSN) (see instructions)
--	--

C Plan name	Plan number	Plan year ending—		
		MM	DD	YYYY
1 <u>Scitor Corporation Equity Participation Plan</u>	0 0 5	9	30	2011
2 _____				
3 _____				

Part II Extension of Time To File Form 5500 Series, and/or Form 8955-SSA

- 1 I request an extension of time until 7 / 15 / 2012 to file Form 5500 series (see instructions).
Note. A signature IS NOT required if you are requesting an extension to file Form 5500 series.
- 2 I request an extension of time until 7 / 15 / 2012 to file Form 8955-SSA (see instructions).
Note. A signature IS required if you are requesting an extension to file Form 8955-SSA.

The application is **automatically approved** to the date shown on line 1 and/or line 2 (above) if: **(a)** the Form 5558 is filed on or before the normal due date of Form 5500 series, and/or Form 8955-SSA for which this extension is requested, and **(b)** the date on line 1 and/or line 2 (above) is not later than the 15th day of the third month after the normal due date.

Part III Extension of Time To File Form 5330 (see instructions)

- 3 I request an extension of time until ____ / ____ / ____ to file Form 5330.
 You may be approved for up to a 6 month extension to file Form 5330, after the normal due date of Form 5330.

a Enter the Code section(s) imposing the tax ►	a	
b Enter the payment amount attached ►	b	
c For excise taxes under section 4980 or 4980F of the Code, enter the reversion/amendment date ►	c	

4 **State in detail why you need the extension:**

Under penalties of perjury, I declare that to the best of my knowledge and belief, the statements made on this form are true, correct, and complete, and that I am authorized to prepare this application.

Signature ► [Signature] Date ► 3/9/12

Scitor Corporation Equity Participation Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
September 30, 2011

<u>Identity of Issue</u>	<u>Description of Investment</u>	<u>Cost</u>	<u>Current Value</u>
* Scitor Holdings, Inc.:			
Series A cumulative preferred stock	Preferred stock	\$ 22,313,007	\$ 23,735,628
Series B cumulative preferred stock	Preferred stock	31,004,000	32,980,747
Total assets, at fair value		<u>\$ 53,317,007</u>	<u>\$ 56,716,375</u>

* Denotes a party-in-interest.

Scitor Corporation Equity Participation Plan
Schedule H, Line 4j - Schedule of Reportable Transactions
Fiscal year ended September 30, 2011

Identity of Party Involved / Description of Asset	Purchase Price	Selling Price	Lease Rental	Expenses Incurred with Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain or (Loss)
Scitor Holdings, Inc. Series B cumulative preferred stock	\$ 31,004,000	\$ -	\$ -	\$ -	\$ 31,004,000	\$ 31,004,000	\$ -