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), 6057(b), and 6058(a) of the Internal Revenue Code (the Code).

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

OMB Nos. 1210-0110
1210-0089

2011

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
ISEC, INC. 401(K) SAVINGS PLAN

1b Three-digit plan number (PN) ▶ 002

1c Effective date of plan 07/01/1980

2a Plan sponsor's name and address, including room or suite number (Employer, if for single-employer plan)

ISEC, INC.

33 INVERNESS DR E
ENGLEWOOD, CO 80112-5412

2b Employer Identification Number (EIN) 84-0577348

2c Sponsor's telephone number 303-790-1444

2d Business code (see instructions) 238900

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.	08/29/2012	MARK LANE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	08/29/2012	MARK LANE
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

33 INVERNESS DR E
ENGLEWOOD, CO 80112-5412

3b Administrator's EIN
84-0577348

3c Administrator's telephone number
303-790-1444

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**	724
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**	653
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	88
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	741
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	741
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	503
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 2R 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)	X	Insurance
(2)		Code section 412(e)(3) insurance contracts
(3)	X	Trust
(4)		General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

(1)	X	Insurance
(2)		Code section 412(e)(3) insurance contracts
(3)	X	Trust
(4)		General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

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

b General Schedules

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

SCHEDULE A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance 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.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

2011

This Form is Open to Public Inspection

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan
ISEC, INC. 401(K) SAVINGS PLAN

B Three-digit plan number (PN) ▶ 002

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

D Employer Identification Number (EIN)
84-0577348

Part I **Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
PRINCIPAL LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
42-0127290	61271	441462	741	01/01/2011	12/31/2011

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in item 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
36205	28479

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

TRUENORTH SECURITIES INC
8200 E 32ND ST N
STE 100
WICHITA, KS 67226

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
36205	28479	REFERRAL/SERVICE FEE AND PRORATED INCENTIVE, NOT DEDUCTED FROM PLAN	3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	4	0
5	Current value of plan's interest under this contract in separate accounts at year end	5	0

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.	6d	

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity

(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee

(3) ☐ guaranteed investment (4) ☒ other ▶ CUSTODIAL GUARANTEED FUND CONTRACT

b	Balance at the end of the previous year			7b	2197644
c	Additions: (1) Contributions deposited during the year	7c(1)	144211		
	(2) Dividends and credits	7c(2)			
	(3) Interest credited during the year	7c(3)	46224		
	(4) Transferred from separate account	7c(4)			
	(5) Other (specify below)	7c(5)	595878		
	▶ LOAN PAYMENT, OUTSIDE INVESTMENT TRANSFER				
	(6) Total additions			7c(6)	786313
d	Total of balance and additions (add **b** and **c(6)**).			7d	2983957
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	862710		
	(2) Administration charge made by carrier	7e(2)	137		
	(3) Transferred to separate account	7e(3)			
	(4) Other (specify below)	7e(4)	455421		
	▶ LOAN WITHDRAWAL, OUTSIDE INVESTMENT TRANSFER				
	(5) Total deductions			7e(5)	1318268
f	Balance at the end of the current year (subtract **e(5)** from **d**)			7f	1665689

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

a ☐ Health (other than dental or vision) **b** ☐ Dental **c** ☐ Vision **d** ☐ Life insurance

e ☐ Temporary disability (accident and sickness) **f** ☐ Long-term disability **g** ☐ Supplemental unemployment **h** ☐ Prescription drug

i ☐ Stop loss (large deductible) **j** ☐ HMO contract **k** ☐ PPO contract **l** ☐ Indemnity contract

m ☐ Other (specify) ▶

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in **c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, item 2 above, report amount.			**10b**	

Specify nature of costs ▶

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance 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.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

2011

This Form is Open to Public Inspection

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan
ISEC, INC. 401(K) SAVINGS PLAN

B Three-digit plan number (PN) ▶ 002

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

D Employer Identification Number (EIN)
84-0577348

Part I **Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
PRINCIPAL LIFE INSURANCE COMPANY

(b) EIN	**(c)** NAIC code	**(d)** Contract or identification number	**(e)** Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	**(g)** To
42-0127290	61271	707443	741	01/01/2011	12/31/2011

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in item 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	**(b)** Total amount of fees paid
0	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	**4**	0
5	Current value of plan's interest under this contract in separate accounts at year end	**5**	22750302

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	**6b**	
c	Premiums due but unpaid at the end of the year	**6c**	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.	**6d**	

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity

(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee

(3) ☐ guaranteed investment (4) ☐ other ▶

b	Balance at the end of the previous year			**7b**	
c	Additions: (1) Contributions deposited during the year	**7c(1)**			
	(2) Dividends and credits	**7c(2)**			
	(3) Interest credited during the year	**7c(3)**			
	(4) Transferred from separate account	**7c(4)**			
	(5) Other (specify below)	**7c(5)**			
	▶				
	(6) Total additions			**7c(6)**	
d	Total of balance and additions (add **b** and **c(6)**).			**7d**	
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	**7e(1)**			
	(2) Administration charge made by carrier	**7e(2)**			
	(3) Transferred to separate account	**7e(3)**			
	(4) Other (specify below)	**7e(4)**			
	▶				
	(5) Total deductions			**7e(5)**	
f	Balance at the end of the current year (subtract **e(5)** from **d**)			**7f**	0

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

a ☐ Health (other than dental or vision) **b** ☐ Dental **c** ☐ Vision **d** ☐ Life insurance

e ☐ Temporary disability (accident and sickness) **f** ☐ Long-term disability **g** ☐ Supplemental unemployment **h** ☐ Prescription drug

i ☐ Stop loss (large deductible) **j** ☐ HMO contract **k** ☐ PPO contract **l** ☐ Indemnity contract

m ☐ Other (specify) ▶

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in **c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, item 2 above, report amount.			**10b**	

Specify nature of costs ▶

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2011** **This Form is Open to Public Inspection.**

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan
ISEC, INC. 401(K) SAVINGS PLAN

B Three-digit plan number (PN) ▶ 002

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

D Employer Identification Number (EIN)
84-0577348

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

PRINCIPAL LIFE INSURANCE COMPANY

42-0127290

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

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

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

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)

PRINCIPAL LIFE INSURANCE COMPANY

42-0127290

(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?
13 37 50 64	CONTRACT ADMINISTRATOR	13822	Yes [X] No [ ]	Yes [X] No [ ]	2713	Yes [ ] No [X]

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

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

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

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

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)

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

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
PRINCIPAL LIFE INSURANCE COMPANY	13 37 50 64	2713
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
PERSHING, LLC 13-2741729	PRINCIPAL SELF DIRECTED BROKERAGE ACCOUNT FEES	

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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 D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan 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

2011

This Form is Open to Public Inspection.

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan
ISEC, INC. 401(K) SAVINGS PLAN

B Three-digit plan number (PN) ▶ 002

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
ISEC, INC.

D Employer Identification Number (EIN)
84-0577348

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN MONEY MARKET SEP ACCT-R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103 12 IE at end of year (see instructions)
42-0127290-024	P	514550

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN MIDCAP GROWTH SEP ACCT-R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103 12 IE at end of year (see instructions)
42-0127290-021	P	0

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN U.S. PROPERTY SEP ACCT-R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103- 12 IE at end of year (see instructions)
42-0127290-027	P	583185

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LGCAP S&P 500 INDEX SA-I3

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103- 12 IE at end of year (see instructions)
42-0127290-016	P	527587

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN MIDCAP VALUE I SA-R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103- 12 IE at end of year (see instructions)
42-0127290-043	P	725348

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN MIDCAP GROWTH III SA-R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103- 12 IE at end of year (see instructions)
42-0127290-026	P	564311

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN INTL GROWTH SEP ACCT-R5

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103- 12 IE at end of year (see instructions)
42-0127290-064	P	0

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME 2010 SEP ACCT-R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN 42-0127290-075	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 427267

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME 2020 SEP ACCT-R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN 42-0127290-076	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4209446

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME 2030 SEP ACCT-R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN 42-0127290-077	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6030067

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME 2040 SEP ACCT-R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN 42-0127290-078	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6271424

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME 2050 SEP ACCT-R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN 42-0127290-079	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1785632

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME STRAT INC SA-R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN 42-0127290-080	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 23164

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN REAL ESTATE SECS SA-R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN 42-0127290-095	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 8445

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN SMALLCAP VALUE II SA-R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN 42-0127290-096	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 969208

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN EQUITY INCOME SA-R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN 42-0127290-120	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 110669

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN

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

2011

This Form is Open to Public Inspection

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan
ISEC, INC. 401(K) SAVINGS PLAN

B Three-digit plan number (PN) ▶ 002

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

D Employer Identification Number (EIN)
84-0577348

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)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1004	1513
(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)	0	0
(B) Common	1c(4)(B)	777103	641121
(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)	816250	929805
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	22865594	22750302
(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)	9606146	8508840
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	2197644	1665689
(15) Other	1c(15)	47	0

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	36263788	34497270
Liabilities			
g Benefit claims payable	1g	0	
h Operating payables	1h	0	
i Acquisition indebtedness	1i	0	
j Other liabilities	1j	0	
k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	36263788	34497270

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)	586962	
(B) Participants	2a(1)(B)	2446345	
(C) Others (including rollovers)	2a(1)(C)	23558	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		3056865
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	0	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	38485	
(F) Other	2b(1)(F)	46224	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		84709
(2) Dividends: **(A)** Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	13036	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	115294	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		128330
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	-57164	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		-57164
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		-509689
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-640833
c Other income	2c		-6
d Total income. Add all **income** amounts in column (b) and enter total	2d		2062212
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	3810615	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		3810615
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses: (1) Professional fees	2i(1)	0	
(2) Contract administrator fees	2i(2)	17802	
(3) Investment advisory and management fees	2i(3)	0	
(4) Other	2i(4)	313	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		18115
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		3828730
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		-1766518
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		0

Part III Accountant's Opinion

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

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

(1) [ ] Unqualified **(2)** [ ] Qualified **(3)** [X] Disclaimer **(4)** [ ] Adverse

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

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

(1) Name: MARTIN, VEJVODA AND ASSOCIATES **(2)** EIN: 84-1038838

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a	Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**4a**		X	0
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	0
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	0
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	0
e	Was this plan covered by a fidelity bond?	**4e**	X		1000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	**4j**		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l	Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ **Yes** ☒ **No**

If "Yes," enter the amount of any plan assets that reverted to the employer this year **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

2011

This Form is Open to Public Inspection.

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan
ISEC, INC. 401(K) SAVINGS PLAN

B Three-digit plan number (PN) ▶ 002

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

D Employer Identification Number (EIN)
84-0577348

Part I Distributions

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 42-0127290

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year. **3**

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **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 or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☐ **No**

Part IV ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 a Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

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):

ISEC, INCORPORATED
401(K) SAVINGS PLAN

FINANCIAL STATEMENTS

DECEMBER 31, 2011

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Schedule of Assets Held for Investment Purposes

MARTIN, VEJVODA AND ASSOCIATES
INCORPORATED
Certified Public Accountants
3443 SOUTH GALENA STREET • SUITE 200
DENVER, COLORADO 80231

(303) 338-9277 FAX: (303) 338-9281

INDEPENDENT AUDITORS' REPORT

To the Trustees of
ISEC, Incorporated
401(k) Savings Plan

We were engaged to audit the financial statements of the ISEC, Incorporated 401(k) Savings Plan (the Plan) as of December 31, 2011 and 2010, and the related statements of net assets available for Plan benefits and changes in net assets available for Plan benefits for the years then ended, and the supplemental schedule as of and for the year ended December 31, 2011 as listed in the accompanying index. These financial statements and supplemental schedule are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (ERISA), the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4, which was certified by Principal Life Insurance Company, the Trustee, except for comparing such information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that the Trustee held the Plan's investment assets and executed investment transactions. The Plan administrator has obtained a certification from the Trustee as of and for the years ended December 31, 2011 and 2010, that the information provided to the Plan administrator by the Trustee is complete and accurate.

Because of the significance of the information in the Plan's 2011 and 2010 financial statements, and supplemental schedule, that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedule, taken as a whole, as of or for the years ended December 31, 2011 and 2010. The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the Trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the DOL's Rules and Regulations for Reporting and Disclosure under the ERISA.

Martin, Vejvoda and Associates

August 16, 2012
Denver, Colorado

ISEC, INCORPORATED
401(k) SAVINGS PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR PLAN BENEFITS
DECEMBER 31, 2011 AND 2010

	2011	2010
ASSETS		
Investments, at Fair Value		
Mutual Funds (Registered Investment Companies)	$ 7,220,860	$ 8,454,293
Insurance Company General Accounts	1,582,405	2,087,761
Pooled Separate Accounts	22,750,302	22,865,594
Participant-Directed Brokerage Accounts	1,930,614	1,930,007
Total Investments	33,484,181	35,337,655
Notes Receivable from Participants	929,805	816,250
Total Assets	34,413,986	36,153,905
Net Assets Reflecting Investments, at Fair Value	34,413,986	36,153,905
Adjustment From Fair Value to Contract Value for Fully Benefit-Responsive Investment Contracts	83,284	109,883
Net Assets Available For Benefits	$ 34,497,270	$ 36,263,788

See accompanying notes to financial statements.

ISEC, INCORPORATED
401(k) SAVINGS PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR PLAN BENEFITS
FOR THE YEARS ENDED DECEMBER 31, 2011 AND 2010

	2011	2010
ADDITIONS TO NET ASSETS ATTRIBUTABLE TO:		
Investment Income (Loss)		
Interest Income	$ 46,224	$ 59,417
Interest on Participant Loans	38,485	35,656
Mutual Fund Dividends	128,330	100,846
Net Increase (Decrease) in Fair Value of Investments	(1,207,692)	4,081,787
Total Investment Income (Loss)	(994,653)	4,277,706
Contributions		
Employer	586,962	1,282,027
Employees	2,446,345	2,603,046
Employee Rollover	23,558	47,061
Total Contributions	3,056,865	3,932,134
Total Additions to Net Assets	2,062,212	8,209,840
DEDUCTIONS FROM NET ASSETS ATTRIBUTABLE TO:		
Benefits Paid to Participants	3,810,615	1,299,534
Other Expenses	18,115	18,074
Total Deductions from Net Assets	3,828,730	1,317,608
Net Increase (Decrease) in Net Assets	(1,766,518)	6,892,232
NET ASSETS AVAILABLE FOR BENEFITS:		
BEGINNING OF YEAR	36,263,788	29,371,556
END OF YEAR	$ 34,497,270	$ 36,263,788

See accompanying notes to financial statements.

ISEC, INCORPORATED
401(k) SAVINGS PLAN

NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2011

1 Description of Plan

The following description of the ISEC, Incorporated (Company) 401(k) Savings Plan provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

A. General. The Plan is a defined contribution plan covering all full-time employees of the Company who have ninety days of service and are twenty-one or older, except those who are non-resident aliens, leased employees or covered by a collective bargaining agreement. Participants may elect to enter the Plan on the first day of the month coinciding with or next following the date when they become eligible. It is subject to the provisions of the ERISA.

B. Contributions. Eligible employees may contribute up to 100% of their salary, subject to certain statutory limits. Participants may elect traditional (tax-deferred) or Roth 401(k) contributions, or a combination of the two. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans. Participants direct the investment of their contributions into various investment options offered by the Plan. The Plan currently offers a range of pooled separate accounts, mutual funds, a fixed income account, and a participant-directed brokerage-style fund. In 2012, the Company contributed 50% of the first 4% of compensation that an employee contributes to the Plan; matching contributions in 2012 will be 100% of the first 4%. Company contributions are invested according to the participant's investment options.

C. Participant Accounts. Each participant's account is credited with the participant's contribution and allocations of: a) the Company's contributions; and, b) the Plan earnings, and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

D. Vesting. Participants are 100% vested in both participant contributions and employer contributions upon entering the Plan. Under previous Plan rules, employer contributions vested over a five-year schedule.

E. Notes Receivable from Participants. Participants may borrow from their fund accounts a minimum of $1,000, up to a maximum of the lesser of $50,000 or 50% of their account balance. The loans are secured by the balance in the participant's account and bear interest rates based on market rates. Principal and interest is paid ratably through periodic payroll deductions.

F. Payment of Benefits. On termination of service due to death, disability or retirement, a participant may elect to receive either a lump-sum amount equal to the participant's interest in his or her account or annual installments. A participant may also request a hardship distribution if certain conditions are met.

G. Forfeited Accounts. Amounts forfeited under prior Plan rules may be used to offset employer contributions of Plan expenses, or may be allocated to all participant accounts. At December 31, 2011 and 2010, there were no forfeited balances.

2 Summary of Significant Accounting Policies

A. Basis of Accounting. The financial statements of the Plan are prepared on the accrual method of accounting. Investment contracts held by a defined-contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined-contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The Statement of Net Assets Available for Benefits presents the fair value of the investment contracts as well as the adjustment of the fully benefit-responsive investment contracts from fair value to contract value. The Statement of Changes in Net Assets Available for Benefits is prepared on a contract value basis.

B. Estimates. The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

C. 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 9 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 includes the Plan's gains and losses on investments bought and sold, as well as held during the year.

D. Notes Receivable from Participants. Notes receivable from participants are measured at their unpaid principal balances plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the Plan document.

E. Payment of Benefits. Benefits are recorded when paid.

F. Operating Expenses. Except for loan origination fees associated with notes receivable from participant, distribution fees, and certain investment fees charged to participants who use brokerage services, all administrative expenses of maintaining the plan are paid by the Company.

3 Investments

The following presents investments that represent 5% or more of the Plan's net assets, at December 31, 2011 and 2010:

	2011	2010
Principal Fixed Income 401(a)/(k), at Fair Value	$ -	$ 2,087,761
Principal Lifetime 2020 Pooled Separate Account	4,209,446	3,956,875
Principal Lifetime 2030 Pooled Separate Account	6,030,067	6,453,639
Principal Lifetime 2040 Pooled Separate Account	6,271,424	6,163,429
Principal Lifetime 2050 Pooled Separate Account	1,785,632	1,830,905
	$ 18,296,569	$ 20,492,609

4 Information Prepared and Certified by the Trustee

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

	2011	2010
Investments, at Fair Value		
Mutual Funds (Registered Investment Companies)	$ 7,220,860	$ 8,454,293
Insurance Company General Accounts	$ 1,582,405	$ 2,087,761
Pooled Separate Accounts	$ 22,750,302	$ 22,865,594
Participant-Directed Brokerage Accounts	$ 1,930,614	$ 1,930,007
Investment Income (Loss)	$ (1,033,138)	$ 4,242,050

5 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.

6 Tax Status

The trust established under the Plan to hold the Plan's assets is qualified pursuant to the appropriate section of the Internal Revenue Code (IRC), and, accordingly, the trust's net investment income is exempt from income taxes. The Plan has obtained a favorable tax determination letter from the Internal Revenue Service (IRS). Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and, therefore, believe that the Plan is qualified and the related trust is tax-exempt.

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 December 31, 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. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2008.

7 Risks and Uncertainties.

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market and credit risks.

7 Risks and Uncertainties (Continued)

Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term, and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for Plan benefits.

8 Investment Contract with Insurance Company

In 2006, the Plan entered into a benefit-responsive investment contract with Principal Life Insurance Company (Principal). Principal maintains the contributions in a general account. The account is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The contract is included in the financial statements at contract value as reported to the Plan by Principal.

Contract value represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value. The guaranteed investment contract issuer is contractually obligated to repay the principal and a specified interest rate that is guaranteed to the Plan.

As described in Note 2, because the guaranteed investment contract is fully benefit-responsive, contract value is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the guaranteed investment contract.

Contract value, as reported to the Plan by Principal, represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

There are no reserves against contract value for credit risk of the contract issuer or otherwise. The fair value of the investment contract at December 31, 2011 and 2010 was $1,582,405 and $2,087,761, respectively. The crediting interest rate is based on a formula agreed upon with the issuer, but it may not be less than 3%. Such interest rates are reviewed on a semiannual basis for resetting.

Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events include the following: 1) amendments to the Plan documents (including complete or partial Plan termination or merger with another plan), 2) bankruptcy of the Plan sponsor or other Plan sponsor events that cause a significant withdrawal from the Plan, or 3) the failure of the trust to qualify for exemption from Federal income taxes or any required prohibited transaction exemption under ERISA. The Plan administrator does not believe that any events which would limit the Plan's ability to transact at contract value with participants are probable of occurring.

The guaranteed investment contract does not permit Principal to terminate the agreement prior to the scheduled maturity date.

8 Investment Contract with Insurance Company (Continued)

Average Yields	2011	2010
Based on Actual Earnings	2.73%	2.90%
Based on Interest Rate Credited to Participants	2.73%	2.90%

9 Fair Value Measurements

FASB ASC 820-10-50, *Fair Value Measurements*, 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 FASB ASC 820-10-50 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; and,
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the assets or liability has 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 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:

Mutual Funds: Valued at Net Asset Value (NAV) of shares held by the Plan at year end.

Pooled Separate Accounts: Valued at Net Asset Value (NAV) of shares held by the Plan at year end. Underlying assets are primarily investments in quoted prices, but the NAV of pooled separate accounts are not publicly quoted

9 Fair Value Measurements (Continued)

Insurance Company General Accounts: The Insurance Company General Account is a guaranteed investment contract. Fair value represents discontinuation value, or contract value times 95% (the amount realized if the Plan were to withdraw or transfer funds within the Plan prior to maturity).

Participant Self-Directed Accounts: Self-directed accounts are valued at the value of the underlying assets. The self-directed accounts consist of securities that have publicly quoted prices, both common stock and mutual funds.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although 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 would 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 December 31, 2011 and 2010, respectively:

	Assets at Fair Value as of December 31, 2011			
	Level 1	Level 2	Level 3	Total
Mutual Funds	$ 7,220,860	$ -	$ -	$ 7,220,860
Insurance Company, General Account	-	-	1,582,405	1,582,405
Participant-Directed Brokerage Account	1,930,614	-	-	1,930,614
Pooled Separate Accounts	-	22,750,302	-	22,750,302
	$ 9,151,474	$ 22,750,302	$ 1,582,405	$ 33,484,181

	Assets at Fair Value as of December 31, 2010			
	Level 1	Level 2	Level 3	Total
Mutual Funds	$ 8,454,293	$ -	$ -	$ 8,454,293
Insurance Company, General Account	-	-	2,087,761	2,087,761
Participant-Directed Brokerage Account	1,930,007	-	-	1,930,007
Pooled Separate Accounts	-	22,288,687	576,907	22,865,594
	$ 10,384,300	$ 22,288,687	$ 2,664,668	$ 35,337,655

The following tables set forth a summary of changes in the fair value of the Plan's Level 3 assets for the years ended December 31, 2011 and 2010, respectively:

9 Fair Value Measurements (Continued)

Level 3 Assets for the Year Ended December 31, 2011

	Insurance Company, General Account	Pooled Separate Accounts	Total
Balance, Beginning of Year	$ 2,087,761	$ 576,907	$ 2,664,668
Total Gain	26,598	17,031	43,629
Interest Credited	46,224	-	46,224
Purchases, Sales, Issuances, and Settlements (Net)	(578,178)	53,333	(524,845)
Transfer In or Out of Level 3 Assets	-	(647,271)	(647,271)
Balance, End of Year	$ 1,582,405	$ -	$ 1,582,405
Unrealized Gain	$ 26,598	$ 17,426	$ 44,024

Level 3 Assets for the Year Ended December 31, 2010

	Insurance Company, General Account	Pooled Separate Accounts	Total
Balance, Beginning of Year	$ 1,809,365	$ 553,236	$ 2,362,601
Total Gain (Loss)	(14,653)	79,131	64,478
Interest Credited	59,417	-	59,417
Purchases, Sales, Issuances, and Settlements (Net)	233,632	(55,460)	178,172
Balance, End of Year	$ 2,087,761	$ 576,907	$ 2,664,668
Unrealized Gain (Loss)	$ (14,653)	$ 152,205	$ 137,552

10 Related-Party Transactions

Certain Plan investments are shares of mutual funds managed by Principal Life Insurance. Principal Life Insurance is the trustee as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan for the investment management services are included in net increase (decrease) in fair value of investments.

11 Subsequent Events

Subsequent events have been evaluated through August 16, 2012, the date the financial statements were available to be issued.

SUPPLEMENTAL INFORMATION

ISEC, INCORPORATED
401(k) SAVINGS PLAN

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
FOR THE YEAR ENDED DECEMBER 31, 2011

EIN: 84-0577348
Plan #: 002

(a)	(b)	(c)	(d)	(e)
	Identity	Description of Investment	Cost	Current Value
*	Principal Life Insurance Co.	Insurance Co. General, Principal Fixed Income 401(a)/(k) Cont Value	n/a	$ 1,665,689
*	Principal Life Insurance Co.	Pooled Separate Accounts-Principal Equity Income SA -R6	n/a	110,668
*	Principal Life Insurance Co.	Pooled Separate Accounts-Principal Large Cap S&P 500 Index	n/a	527,587
*	Principal Life Insurance Co.	Pooled Separate Accounts-Principal Lifetime 2010	n/a	427,267
*	Principal Life Insurance Co.	Pooled Separate Accounts-Principal Lifetime 2020	n/a	4,209,446
*	Principal Life Insurance Co.	Pooled Separate Accounts-Principal Lifetime 2030	n/a	6,030,067
*	Principal Life Insurance Co.	Pooled Separate Accounts-Principal Lifetime 2040	n/a	6,271,424
*	Principal Life Insurance Co.	Pooled Separate Accounts-Principal Lifetime 2050	n/a	1,785,632
*	Principal Life Insurance Co.	Pooled Separate Accounts-Principal Lifetime Strategic Income	n/a	23,164
*	Principal Life Insurance Co.	Pooled Separate Accounts-Principal MidCap Growth III SA-R5	n/a	564,311
*	Principal Life Insurance Co.	Pooled Separate Accounts-Principal Money Market	n/a	514,550
*	Principal Life Insurance Co.	Pooled Separate Accounts-Principal PTR MidCap Value I	n/a	725,348
*	Principal Life Insurance Co.	Pooled Separate Accounts-Principal Real Estate Securities	n/a	8,445
*	Principal Life Insurance Co.	Pooled Separate Accounts-Principal Small Cap Value II	n/a	969,208
*	Principal Life Insurance Co.	Pooled Separate Accounts-Principal US Property	n/a	583,185
	The American Funds	Registered Investment Co - AM Funds Growth Fund of America	n/a	1,207,354
	Eaton Vance	Registered Investment Co - Eaton Vance Large-Cap Value A	n/a	373,528
	Fidelity Investments	Registered Investment Co - Fidelity Adv Small Cap A	n/a	777,803

See accompanying notes to financial statements.

ISEC, INCORPORATED
401(k) SAVINGS PLAN

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES (CONTINUED)
FOR THE YEAR ENDED DECEMBER 31, 2011

(a)	(b)	(c)	(d)	(e)
	Identity	Description of Investment	Cost	Current Value
	Janus International Holdings	Registered Investment Co - Janus Overseas S Fund	n/a	$ 657,478
	Neuberger Berman Mngmt	Registered Investment Co - Neuberger Berman Partners Adv	n/a	288,099
	Oakmark	Registered Investment Co - Oakmark Equity & Income I	n/a	1,236,290
	PIMCO Funds	Registered Investment Co - Pimco Real Return A	n/a	385,990
	PIMCO Funds	Registered Investment Co - Pimco Total Return ADM	n/a	1,408,354
	T Rowe Price	Registered Investment Co - T Rowe Price International Growth & Income	n/a	731,374
	Wells Fargo Advantage	Registered Investment Co - Wells Fargo Adv LGCPGR A Fund	n/a	154,589
	AT&T, Inc.	Corporate Stock-Common	n/a	181
	Aastrom Biosciences, Inc.	Corporate Stock-Common	n/a	8,645
	Activision Blizzard	Corporate Stock-Common	n/a	8,316
	Aeropostale	Corporate Stock-Common	n/a	6,862
	Anchor Bancorp Wisconsin	Corporate Stock-Common	n/a	1,344
	Apple Computer, Inc.	Corporate Stock-Common	n/a	9,315
	Array Biopharma	Corporate Stock-Common	n/a	2,160
	Aurico Gold Inc.	Corporate Stock-Common	n/a	8,010
	Banco Latinoamericano	Corporate Stock-Common	n/a	3,210
	Bank of America Corp	Corporate Stock-Common	n/a	2,446
	Berkshire Hathaway	Corporate Stock-Common	n/a	7,248
	Bionovo	Corporate Stock-Common	n/a	172
	Bridgepoint Education, Inc.	Corporate Stock-Common	n/a	7,360
	CapitalSource, Inc.	Corporate Stock-Common	n/a	6,700
	Cell Therapeutics, Inc.	Corporate Stock-Common	n/a	4,833
	Centerpoint Energy Inc.	Corporate Stock-Common	n/a	462
	China Green Agriculture, Inc.	Corporate Stock-Common	n/a	1,800
	China Mobile Limited	Corporate Stock-Common	n/a	2,909
	Citizens Rep Bancorp Inc.	Corporate Stock-Common	n/a	5,700
	The Coca Cola Company	Corporate Stock-Common	n/a	3,498
	ConocoPhillips	Corporate Stock-Common	n/a	2,623
	Costco Wholesale Corp.	Corporate Stock-Common	n/a	7,499
	Cyclacel Pharmaceuticals	Corporate Stock-Common	n/a	5,310
	Denbury Resoruces, Inc.	Corporate Stock-Common	n/a	8,154

See accompanying notes to financial statements.

ISEC, INCORPORATED
401(k) SAVINGS PLAN

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES (CONTINUED)
FOR THE YEAR ENDED DECEMBER 31, 2011

(a)	(b)	(c)	(d)	(e)
	Identity	Description of Investment	Cost	Current Value
	Devon Energy Corporation	Corporate Stock-Common	n/a	$ 6,200
	Dynamics Materials Corp	Corporate Stock-Common	n/a	5,934
	Eastman Kodak Company	Corporate Stock-Common	n/a	650
	Element Rogers-Swedish	Corporate Stock-Common	n/a	7,659
	Emerson Electric Co.	Corporate Stock-Common	n/a	9,318
	Excel Maritime Carriers Ltd.	Corporate Stock-Common	n/a	309
	Exelixis Inc.	Corporate Stock-Common	n/a	8,760
	First Majestic Silver Corp	Corporate Stock-Common	n/a	168,400
	First Solar Inc.	Corporate Stock-Common	n/a	675
	First Trust Value Line	Corporate Stock-Common	n/a	50,752
	Ford Motor Company	Corporate Stock-Common	n/a	18,238
	Frontier Communications	Corporate Stock-Common	n/a	15
	Google, Inc	Corporate Stock-Common	n/a	3,875
	Groupon, Inc.	Corporate Stock-Common	n/a	1,032
	Hillenbrand Inc.	Corporate Stock-Common	n/a	4,687
	Infinera Corp.	Corporate Stock-Common	n/a	12,560
	Infosonics Corp.	Corporate Stock-Common	n/a	300
	IPG Photonics Corp.	Corporate Stock-Common	n/a	7,621
	Ishares MSCI Malaysia Idx	Corporate Stock-Common	n/a	6,700
	Kinross Gold Corporation	Corporate Stock-Common	n/a	344
	Lumber Liquidators	Corporate Stock-Common	n/a	7,064
	Markel Corp.	Corporate Stock-Common	n/a	6,220
	Microsoft Corporation	Corporate Stock-Common	n/a	9,605
	Nucor Corporation	Corporate Stock-Common	n/a	11,871
	Oncolytics Biotech Inc.	Corporate Stock-Common	n/a	7,820
	Perusahann Perseroan	Corporate Stock-Common	n/a	4,611
	Powershares DB Commodity	Corporate Stock-Common	n/a	3,355
	Repros Therapeutics Inc.	Corporate Stock-Common	n/a	3,615
	Retail Opportunity Invest.	Corporate Stock-Common	n/a	4,144
	Sirius XM Radio Inc.	Corporate Stock-Common	n/a	182
	SPDR Gold Trust	Corporate Stock-Common	n/a	29,638
	SPDR Series Trust	Corporate Stock-Common	n/a	26,915
	Stemcells, Inc.	Corporate Stock-Common	n/a	82
	Stryker Corporation	Corporate Stock-Common	n/a	14,913
	TIM Technologies	Corporate Stock-Common	n/a	132
	Vanguard	Corporate Stock-Common	n/a	57,835
	Verenium Corp.	Corporate Stock-Common	n/a	907
	Verizon Communications Co.	Corporate Stock-Common	n/a	602

See accompanying notes to financial statements.

ISEC, INCORPORATED
401(k) SAVINGS PLAN

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES (CONTINUED)
FOR THE YEAR ENDED DECEMBER 31, 2011

(a)	(b)	(c)	(d)	(e)
	Identity	Description of Investment	Cost	Current Value
	Wal-Mart Stores Inc.	Corporate Stock-Common	n/a	$ 8,366
	Washington Mutual Inc.	Corporate Stock-Common	n/a	54
	XOMA Limited	Corporate Stock-Common	n/a	245
	Yahoo! Inc.	Corporate Stock-Common	n/a	5,162
	Yonye International inc.	Corporate Stock-Common	n/a	3,159
	Zipcar, Inc.	Corporate Stock-Common	n/a	5,838
	Pershing LLC	Interest Bearing Cash-Cash Acct	n/a	1,513
	Artisan Funds	Registered Investment Co - Artisan MidCap Value Fund	n/a	55
	BMO Funds	Registered Investment Co - BMO Mid-Cap Growth Fund	n/a	23,968
	Direxion Funds	Registered Investment Co - Direxion Latin America Bull 2x	n/a	1,274
	Dreyfus Funds	Registered Investment Co - Dreyfus Appreciation Fund	n/a	38,370
	Dreyfus Funds	Registered Investment Co - Dreyfus Small-Cap Stock Index Fund	n/a	15,755
	FAM Fund	Registered Investment Co - FAM Equity Income Fund	n/a	17,488
	FBR Mutual Funds	Registered Investment Co - FBR Gas Utility Index Fund	n/a	17,390
	Federated Investors, Inc.	Registered Investment Co - Federated Capital Reserves	n/a	316,505
	Fidelity Group	Registered Investment Co - Fidelity Blue Chip Growth	n/a	14,423
	Fidelity	Registered Investment Co - Fidelity Canada Fund	n/a	194
	Fidelity Group	Registered Investment Co - Fidelity Convertible Securities	n/a	157
	Fidelity Investments	Registered Investment Co - Fidelity Emerging Asia Fund	n/a	2,826
	Fidelity	Registered Investment Co - Fidelity Emerging Markets	n/a	24,509
	Fidelity Investments	Registered Investment Co - Fidelity Europe Capital Appreciation	n/a	9,446
	Fidelity Investments	Registered Investment Co - Fidelity Europe	n/a	4,368

See accompanying notes to financial statements.

ISEC, INCORPORATED
401(k) SAVINGS PLAN

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES (CONTINUED)
FOR THE YEAR ENDED DECEMBER 31, 2011

(a)	(b)	(c)	(d)	(e)
	Identity	Description of Investment	Cost	Current Value
	Fidelity Investments	Registered Investment Co - Fidelity Export and Multinational Corp	n/a	$ 113
	Fidelity Group	Registered Investment Co - Fidelity Growth Strategies Fund	n/a	2,016
	Fidelity Group	Registered Investment Co - Fidelity Independence Fund	n/a	3,675
	Fidelity Investments	Registered Investment Co - Fidelity Inflation Protected Bond	n/a	58
	Fidelity Investments	Registered Investment Co - Fidelity International Capital Appreciation	n/a	573
	Fidelity	Registered Investment Co - Fidelity International Real Estate	n/a	106
	Fidelity Investments	Registered Investment Co - Fidelity Latin America	n/a	24,183
	Fidelity Group	Registered Investment Co - Fidelity Leveraged Company Stock	n/a	114,833
	Fidelity Investments	Registered Investment Co - Fidelity Mortgage Securities Portfolio	n/a	765
	Fidelity Investments	Registered Investment Co - Fidelity NASDAQ Composite Index	n/a	823
	Fidelity Investments	Registered Investment Co - Fidelity Real Estate Income	n/a	3,261
	Fidelity Group	Registered Investment Co - Fidelity Real Estate Investment Portfolio	n/a	16,595
	Fidelity Investments	Registered Investment Co - Fidelity Select Energy Services	n/a	1,946
	Fidelity Group	Registered Investment Co - Fidelity Select Health Care	n/a	158,301
	Fidelity Group	Registered Investment Co - Fidelity Select Technology Portfolio	n/a	18,339
	Fidelity Investments	Registered Investment Co - Fidelity Worldwide	n/a	559
	Heartland Funds	Registered Investment Co-Heartland Value Plus Fund	n/a	36,357
	Hennessy	Registered Investment Co-Hennessy Cornerstone Value Fund	n/a	28,966
	ING	Registered Investment Co - ING Russia Class A	n/a	2,278

See accompanying notes to financial statements.

ISEC, INCORPORATED
401(k) SAVINGS PLAN

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES (CONTINUED)
FOR THE YEAR ENDED DECEMBER 31, 2011

(a)	(b)	(c)	(d)	(e)
	Identity	Description of Investment	Cost	Current Value
	Loomis Sayles Funds	Registered Investment Co - Loomis Sayles Small Cap Growth Retail	n/a	$ 13,475
	Managers Funds	Registered Investment Co - Managers Bond Fund	n/a	3,440
	Managers Funds	Registered Investment Co - Managers Special Equity	n/a	34,409
	Profunds	Registered Investment Co - Access High Yield Fund	n/a	33,214
	Royce Funds	Registered Investment Co - Royce Value Plus Service Class	n/a	79
	Scout Funds	Registered Investment Co - Scout Funds	n/a	31,245
	Southern SunFunds	Registered Investment Co - Southernsun Small Cap Fund	n/a	31,769
	T. Rowe Price	Registered Investment Co - T Rowe Price New Horizons	n/a	12,323
	Franklin Templeton Invstmts	Registered Investment Co - Templeton Developing Mkts Trust	n/a	19,043
	Touchstone	Registered Investment Co - Touchstone Sands Cap Sel Growth	n/a	12,768
	Vanguard Group	Registered Investment Co-Vanguard REIT Index Fund	n/a	37,877
	Wasatch	Registered Investment Co-Wasatch Emerging Markets Small Cap	n/a	37,167
	Wasatch Advisors	Registered Investment Co-Wasatch International Growth Fund	n/a	44,159
	Wasatch	Registered Investment Co-Wasatch Core Growth Fund	n/a	11,430
	Wells Fargo Advantage Fd	Registered Investment Co - Wells Fargo Adv Growth Fund Inv Cls	n/a	13,452
	The Yacktman Funds	Registered Investment Co-Yacktman Focused Fund	n/a	51,656
	Participant Loans	Various Loans with Interest Rates Ranging from 4.25% to 9.75%	n/a	929,805
				$ 34,497,270

*Denotes Party-In-Interest.

See accompanying notes to financial statements.

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

ISEC, INC. 401(K) SAVINGS PLAN

EIN 84 0577348
PLAN NUMBER 002
PLAN YEAR 01/01/2011 TO 12/31/2011

(A)	(B) Identity of issuer, borrower, lessor or similar party.	(C) Description of investment including maturity date, rate of interest, collateral, par or maturity value.	(D) Cost	(E) Current Value
	The American Funds	Registered Investment Company Am Fds Grth Fd of Am R4 Fund	$ 0.00	$ 1,207,353.70
	AASTROM BIOSCIENCES INC	Corporate Stock - Common AASTROM BIOSCIENCES INC COM NEW	$ 0.00	$ 8,645.00
	PROFUNDS	Registered Investment Company ACCESS FLEX HIGH YIELD FUND (INVESTOR CL	$ 0.00	$ 33,214.07
	ACTIVISION BLIZZARD INC	Corporate Stock - Common ACTIVISION BLIZZARD INC COM	$ 0.00	$ 8,316.00
	AEROPOSTALE	Corporate Stock - Common AEROPOSTALE COM	$ 0.00	$ 6,862.50
	ANCHOR BANCORP WISCONSIN INC	Corporate Stock - Common ANCHOR BANCORP WIS INC COM	$ 0.00	$ 1,344.00
	APPLE COMPUTER, INC.	Corporate Stock - Common APPLE INC COM	$ 0.00	$ 9,315.00
	ARRAY BIOPHARMA	Corporate Stock - Common ARRAY BIOPHARMA INC COM	$ 0.00	$ 2,160.00
	ARTISAN FUNDS	Registered Investment Company ARTISAN MID-CAP VALUE FUND	$ 0.00	$ 54.98
	AT&T, INC.	Corporate Stock - Common AT&T INC COM	$ 0.00	$ 181.44
	AURICO GOLD INC.	Corporate Stock - Common AURICO GOLD INC COM ISIN#CA05155C1059	$ 0.00	$ 8,010.00
	BANCO LANINOAMERICANO DE COMERCIO E	Corporate Stock - Common BANCO LATINAMERICANODE COMERCIO EXTERIOR	$ 0.00	$ 3,210.00
	BANK OF AMERICA CORP.	Corporate Stock - Common BANK AMER CORP COM	$ 0.00	$ 2,446.40
	BERKSHIRE HATHAWAY INC	Corporate Stock - Common BERKSHIRE HATHAWAY INC DEL CL B NEW	$ 0.00	$ 7,248.50
	BIONOVO INC	Corporate Stock - Common BIONOVO INC COM NEW	$ 0.00	$ 171.68

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

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

ISEC, INC. 401(K) SAVINGS PLAN

EIN 84 0577348
PLAN NUMBER 002
PLAN YEAR 01/01/2011 TO 12/31/2011

(A)	(B) Identity of issuer, borrower, lessor or similar party.	(C) Description of investment including maturity date, rate of interest, collateral, par or maturity value.	(D) Cost	(E) Current Value
	BMO FUNDS	Registered Investment Company BMO MID-CAP GROWTH FUND CLASS Y	$ 0.00	$ 23,967.64
	BRIDGEPOINT EDUCATION, INC.	Corporate Stock - Common BRIDGEPOINT ED INC COM	$ 0.00	$ 7,360.00
	CAPITALSOURCE INC	Corporate Stock - Common CAPITALSOURCE INC COM	$ 0.00	$ 6,700.00
	PERSHING LLC.	Interest Bearing Cash CASH ACCOUNT	$ 0.00	$ 1,512.57
	CELL THERAPEUTICS INC	Corporate Stock - Common CELL THERAPEUTICS INC COM NO PAR NEW	$ 0.00	$ 4,832.56
	CENTERPOINT ENERGY INC	Corporate Stock - Common CENTERPOINT ENERGY INC COM	$ 0.00	$ 462.07
	CHINA GREEN AGRICULTURE INC	Corporate Stock - Common CHINA GREEN AGRICULTURE INC COM	$ 0.00	$ 1,800.00
	CHINA MOBILE LIMITED	Corporate Stock - Common CHINA MOBILE LTD SPON ADR S A ISIN#US169	$ 0.00	$ 2,909.40
	CITIZENS REPUBLIC BANCORP, INC	Corporate Stock - Common CITIZENS REP BANCORPINC COM NEW	$ 0.00	$ 5,700.00
	THE COCA-COLA COMPANY	Corporate Stock - Common COCA COLA COMPANY	$ 0.00	$ 3,498.50
	CONOCOPHILLIPS	Corporate Stock - Common CONOCOPHILLIPS COM	$ 0.00	$ 2,623.32
	COSTCO WHOLESALE CORPORATION	Corporate Stock - Common COSTCO WHOLESALE CORP NEW COM	$ 0.00	$ 7,498.80
	CYCLACEL PHARMACEUTICALS INC	Corporate Stock - Common CYCLACEL PHARMACEUTICALS INC COM	$ 0.00	$ 5,310.00
	DENBURY RESOURCES INC	Corporate Stock - Common DENBURY RES INC COM NEW	$ 0.00	$ 8,154.00
	DEVON ENERGY CORPORATION	Corporate Stock - Common DEVON ENERGY CORP NEW COM	$ 0.00	$ 6,200.00

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

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

ISEC, INC. 401(K) SAVINGS PLAN

EIN 84 0577348
PLAN NUMBER 002
PLAN YEAR 01/01/2011 TO 12/31/2011

(A)	(B) Identity of issuer, borrower, lessor or similar party.	(C) Description of investment including maturity date, rate of interest, collateral, par or maturity value.	(D) Cost	(E) Current Value
	DIREXIONFUNDS	Registered Investment Company DIREXION MONTHLY LATIN AMERICABULL 2X FU	$ 0.00	$ 1,274.20
	DREYFUS	Registered Investment Company DREYFUS APPRECIATION FUND	$ 0.00	$ 38,370.44
	DREYFUS	Registered Investment Company DREYFUS SMALL-CAP STOCK INDEX FUND	$ 0.00	$ 15,754.93
	DYNAMICS MATERIALS CORP	Corporate Stock - Common DYNAMIC MATERIALS INC (DE) FORMALLY (CO)	$ 0.00	$ 5,934.00
	Eaton Vance	Registered Investment Company Eaton Vance Lg-Cap Value A Fd	$ 0.00	$ 373,528.34
	EASTMAN KODAK COMPANY	Corporate Stock - Common EASTMAN KODAK CO COM	$ 0.00	$ 649.50
	EMERSON ELECTRIC CO	Corporate Stock - Common EMERSON ELEC CO COM	$ 0.00	$ 9,318.00
	EXCEL MARITIME CARRIERS LTD	Corporate Stock - Common EXCEL MARITIME CARRIERS LTD ISIN#LR00087	$ 0.00	$ 308.85
	EXELIXIS INC	Corporate Stock - Common EXELIXIS INC COM	$ 0.00	$ 8,759.75
	Fidelity Investments	Registered Investment Company Fidelity Adv Small Cap A Fund	$ 0.00	$ 777,802.64
	FAM FUNDS	Registered Investment Company FAM EQUITY INCOME FUND	$ 0.00	$ 17,487.96
	FBR MUTUAL FUNDS	Registered Investment Company FBR GAS UTILITY INDEX FUND INVESTOR CLA	$ 0.00	$ 17,389.62
	FEDERATED INVESTORS, INC.	Registered Investment Company FEDERATED CAPITAL RESERVES	$ 0.00	$ 316,504.65
	FIDELITY GROUP	Registered Investment Company FIDELITY BLUE CHIP GROWTH FUND	$ 0.00	$ 14,422.93
	FIDELITY	Registered Investment Company FIDELITY CANADA FUND	$ 0.00	$ 193.64

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

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

ISEC, INC. 401(K) SAVINGS PLAN

EIN 84 0577348
PLAN NUMBER 002
PLAN YEAR 01/01/2011 TO 12/31/2011

(A)	(B) Identity of issuer, borrower, lessor or similar party.	(C) Description of investment including maturity date, rate of interest, collateral, par or maturity value.	(D) Cost	(E) Current Value
	FIDELITY GROUP	Registered Investment Company FIDELITY CONVERTIBLESECURITIES FUND	$ 0.00	$ 156.52
	FIDELITY INVESTMENTS	Registered Investment Company FIDELITY EMERGING ASIA FUND	$ 0.00	$ 2,825.72
	FIDELITY	Registered Investment Company FIDELITY EMERGING MARKETS FUND	$ 0.00	$ 24,508.86
	FIDELITY INVESTMENTS	Registered Investment Company FIDELITY EUROPE CAPITAL APPRECIATIONFUND	$ 0.00	$ 9,445.87
	FIDELITY INVESTMENTS	Registered Investment Company FIDELITY EUROPE FUND	$ 0.00	$ 4,367.93
	FIDELITY INVESTMENTS	Registered Investment Company FIDELITY EXPORT & MULTINATIONAL FUND	$ 0.00	$ 112.58
	FIDELITY GROUP	Registered Investment Company FIDELITY GROWTH STRATEGIES FUND	$ 0.00	$ 2,016.13
	FIDELITY GROUP	Registered Investment Company FIDELITY INDEPENDENCE FUND	$ 0.00	$ 3,675.33
	FIDELITY INVESTMENTS	Registered Investment Company FIDELITY INFLATION PROTECTED BOND FUND	$ 0.00	$ 58.44
	FIDELITY	Registered Investment Company FIDELITY INTERNATIONAL REAL ESTATE FUND	$ 0.00	$ 105.68
	FIDELITY INVESTMENTS	Registered Investment Company FIDELITY INTL CAPITAL APPRECIATION FUND	$ 0.00	$ 573.38
	FIDELITY INVESTMENTS	Registered Investment Company FIDELITY LATIN AMERICA FUND	$ 0.00	$ 24,182.66
	FIDELITY GROUP	Registered Investment Company FIDELITY LEVERAGED COMPANY STOCK FUND RE	$ 0.00	$ 114,833.30
	FIDELITY INVESTMENTS	Registered Investment Company FIDELITY MORTGAGE SECURITIES PORTFOLIOFU	$ 0.00	$ 765.21
	FIDELITY INVESTMENTS	Registered Investment Company FIDELITY NASDAQ COMPOSITE INDEX FUND	$ 0.00	$ 823.10

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

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

ISEC, INC. 401(K) SAVINGS PLAN

EIN 84 0577348
PLAN NUMBER 002
PLAN YEAR 01/01/2011 TO 12/31/2011

(A)	(B) Identity of issuer, borrower, lessor or similar party.	(C) Description of investment including maturity date, rate of interest, collateral, par or maturity value.	(D) Cost	(E) Current Value
	FIDELITY INVESTMENTS	Registered Investment Company FIDELITY REAL ESTATEINCOME FUND	$ 0.00	$ 3,261.17
	FIDELITY GROUP	Registered Investment Company FIDELITY REAL ESTATEINVESTMENT PORTFOLIO	$ 0.00	$ 16,594.59
	FIDELITY INVESTMENTS	Registered Investment Company FIDELITY SELECT ENERGY SERVICES FUND	$ 0.00	$ 1,946.22
	FIDELITY GROUP	Registered Investment Company FIDELITY SELECT HEALTH CARE FUND	$ 0.00	$ 158,300.67
	FIDELITY GROUP	Registered Investment Company FIDELITY SELECT TECHNOLOGY PORTFOLIO FD	$ 0.00	$ 18,338.99
	FIDELITY INVESTMENTS	Registered Investment Company FIDELITY WORLD WIDE FUND	$ 0.00	$ 559.32
	FIRST MAJESTIC SILVER CORP.	Corporate Stock - Common FIRST MAJESTIC SILVER CORP COM ISIN#CA32	$ 0.00	$ 168,400.00
	FIRST SOLAR INC	Corporate Stock - Common FIRST SOLAR INC COM	$ 0.00	$ 675.20
	FIRST TRUST VALUE LINE DIVIDEND IND	Corporate Stock - Common FIRST TR VALUE LINE DIVID INDEX FD SHS I	$ 0.00	$ 50,751.70
	FORD MOTOR COMPANY	Corporate Stock - Common FORD MOTOR CO DEL COM PAR	$ 0.00	$ 18,238.20
	FRONTIER COMMUNICATIONS CORP	Corporate Stock - Common FRONTIER COMMUNICATIONS CORP COM	$ 0.00	$ 15.45
	GOOGLE, INC.	Corporate Stock - Common GOOGLE INC CL A	$ 0.00	$ 3,875.40
	GROUPON, INC.	Corporate Stock - Common GROUPON INC COM CL A	$ 0.00	$ 1,031.50
	HEARTLAND FUNDS	Registered Investment Company HEARTLAND VALUE PLUS FUND	$ 0.00	$ 36,357.22
	HENNESSY FUNDS	Registered Investment Company HENNESSY FOCUS 30 FUND	$ 0.00	$ 28,966.09

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

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

ISEC, INC. 401(K) SAVINGS PLAN

EIN 84 0577348
PLAN NUMBER 002
PLAN YEAR 01/01/2011 TO 12/31/2011

(A)	(B) Identity of issuer, borrower, lessor or similar party.	(C) Description of investment including maturity date, rate of interest, collateral, par or maturity value.	(D) Cost	(E) Current Value
	HILLENBRAND INC	Corporate Stock - Common HILLENBRAND INC COM	$ 0.00	$ 4,687.20
	INFINERA CORP	Corporate Stock - Common INFINERA CORP COM	$ 0.00	$ 12,560.00
	INFOSONICS CORP	Corporate Stock - Common INFOSONICS CORP COM	$ 0.00	$ 300.00
	ING	Registered Investment Company ING RUSSIA FUND CLASS A	$ 0.00	$ 2,277.94
	IPG PHOTONICS CORPORATION	Corporate Stock - Common IPG PHOTONICS CORP COM	$ 0.00	$ 7,620.75
	BARCLAYS GLOBAL INVESTORS	Corporate Stock - Common ISHARES INC MSCI MALAYSIA FREE INDEX FD	$ 0.00	$ 6,700.00
	Janus International Holding, LLC	Registered Investment Company Janus Overseas S Fund	$ 0.00	$ 657,478.02
	KINROSS GOLD CORPORATION	Corporate Stock - Common KINROSS GOLD CORP COM NO PAR ISIN#CA4969	$ 0.00	$ 342.73
	LOOMIS SAYLES FUNDS	Registered Investment Company LOOMIS SAYLES SMALL CAP GROWTH RETAIL	$ 0.00	$ 13,474.81
	LUMBER LIQUIDATORS HOLDINGS INC	Corporate Stock - Common LUMBER LIQUIDATORS HLDGS INC COM	$ 0.00	$ 7,064.00
	MANAGERS FUNDS	Registered Investment Company MANAGERS BOND FUND	$ 0.00	$ 3,440.12
	MANAGERS FUNDS	Registered Investment Company MANAGERS SPECIAL EQUITY	$ 0.00	$ 34,409.39
	MARKEL CORP	Corporate Stock - Common MARKEL CORP COM	$ 0.00	$ 6,220.05
	MICROSOFT CORPORATION	Corporate Stock - Common MICROSOFT CORP COM	$ 0.00	$ 9,605.20
	Neuberger Berman Management	Registered Investment Company Neub Berm Partners Adv Fund	$ 0.00	$ 288,098.97

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

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

ISEC, INC. 401(K) SAVINGS PLAN

EIN 84 0577348
PLAN NUMBER 002
PLAN YEAR 01/01/2011 TO 12/31/2011

(A)	(B) Identity of issuer, borrower, lessor or similar party.	(C) Description of investment including maturity date, rate of interest, collateral, par or maturity value.	(D) Cost	(E) Current Value
	NUCOR CORPORATION	Corporate Stock - Common NUCOR CORP COM	$ 0.00	$ 11,871.00
	Oakmark	Registered Investment Company Oakmark Equity & Income I Fund	$ 0.00	$ 1,236,289.74
	ONCOLYTICS BIOTECH, INC	Corporate Stock - Common ONCOLYTICS BIOTECH INC COM ISIN#CA682310	$ 0.00	$ 7,820.00
*	Principal Life Insurance Company	Insurance Company General Prin Fixed Income 401(a)/(k)	$ 0.00	$ 1,665,689.40
*	Principal Life Insurance Company	Pooled Separate Accounts Prin LgCap S&P 500 Index SA-I3	$ 0.00	$ 527,586.79
*	Principal Life Insurance Company	Pooled Separate Accounts Prin LifeTime Strat Inc SA-R6	$ 0.00	$ 23,164.22
*	Principal Life Insurance Company	Pooled Separate Accounts Prin LifeTime 2010 Sep Acct-R6	$ 0.00	$ 427,267.42
*	Principal Life Insurance Company	Pooled Separate Accounts Prin LifeTime 2020 Sep Acct-R6	$ 0.00	$ 4,209,446.38
*	Principal Life Insurance Company	Pooled Separate Accounts Prin LifeTime 2030 Sep Acct-R6	$ 0.00	$ 6,030,067.28
*	Principal Life Insurance Company	Pooled Separate Accounts Prin LifeTime 2040 Sep Acct-R6	$ 0.00	$ 6,271,423.67
*	Principal Life Insurance Company	Pooled Separate Accounts Prin LifeTime 2050 Sep Acct-R6	$ 0.00	$ 1,785,631.70
*	Principal Life Insurance Company	Pooled Separate Accounts Prin MidCap Growth III SA-R6	$ 0.00	$ 564,310.64
*	Principal Life Insurance Company	Pooled Separate Accounts Prin MidCap Value I SA-R6	$ 0.00	$ 725,348.12
*	Principal Life Insurance Company	Pooled Separate Accounts Prin Money Market Sep Acct-R6	$ 0.00	$ 514,549.58
*	Principal Life Insurance Company	Pooled Separate Accounts Prin SmallCap Value II SA-R6	$ 0.00	$ 969,208.13

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

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EIN 84 0577348
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*	Principal Life Insurance Company	Pooled Separate Accounts Prin U.S. Property Sep Acct-R6	$ 0.00	$ 583,185.13
	PERUSAHAAN PERSEROAN (PERSERO) PT	Corporate Stock - Common PERUSAHAAN PERSEROANPERSERO P.T. TELEKOM	$ 0.00	$ 4,611.00
	PIMCO Funds	Registered Investment Company PIMCO REAL RETURN ADMIN FUND	$ 0.00	$ 385,990.51
	PIMCO Funds	Registered Investment Company PIMCO Total Return Adm Fund	$ 0.00	$ 1,408,354.00
	POWERSHARES DB COMMODITY	Corporate Stock - Common POWERSHARES DB COMMODITY INDEX TRACKING	$ 0.00	$ 3,355.00
*	Principal Life Insurance Company	Pooled Separate Accounts PRIN EQUITY INCOME SA-R6	$ 0.00	$ 110,668.57
*	Principal Life Insurance Company	Pooled Separate Accounts PRIN REAL ESTATE SECS SA-R6	$ 0.00	$ 8,444.82
	REPROS THERAPEUTICS INC	Corporate Stock - Common REPROS THERAPEUTICS INC COM NEW	$ 0.00	$ 3,615.00
	RETAIL OPPORTUNITY INVESTMENTS CORP	Corporate Stock - Common RETAIL OPPORTUNITY INVTS CORP COM	$ 0.00	$ 4,144.00
	ROYCE FUNDS	Registered Investment Company ROYCE VALUE PLUS FUND SERVICE CLASS	$ 0.00	$ 79.38
	SCOUT FUNDS	Registered Investment Company SCOUT INTERNATIONAL FUND	$ 0.00	$ 31,244.70
	SIRIUS XM RADIO INC	Corporate Stock - Common SIRIUS XM RADIO INC COM	$ 0.00	$ 182.00
	SOUTHERNSUNFUNDS	Registered Investment Company SOUTHERNSUN SMALL CAP FUND	$ 0.00	$ 31,768.81
	SPDR GOLD TRUST	Corporate Stock - Common SPDR GOLD TR GOLD SHS	$ 0.00	$ 29,638.05
	SPDR SERIES TRUST	Corporate Stock - Common SPDR SER TR BARCLAYSCAP HIGH YIELD BD ET	$ 0.00	$ 26,915.00

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

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

ISEC, INC. 401(K) SAVINGS PLAN

EIN 84 0577348
PLAN NUMBER 002
PLAN YEAR 01/01/2011 TO 12/31/2011

(A)	(B) Identity of issuer, borrower, lessor or similar party.	(C) Description of investment including maturity date, rate of interest, collateral, par or maturity value.	(D) Cost	(E) Current Value
	STEMCELLS INC.	Corporate Stock - Common STEMCELLS INC COM NEW	$ 0.00	$ 82.40
	STRYKER CORPORATION	Corporate Stock - Common STRYKER CORP	$ 0.00	$ 14,913.00
	ELEMENTS ROGERS INTL	Corporate Stock - Common SWEDISH EXPT CR CORPELEMENTS LKD TO ROGE	$ 0.00	$ 7,659.00
	T ROWE PRICE	Registered Investment Company T ROWE PRICE NEW HORIZONS	$ 0.00	$ 12,323.01
	T. Rowe Price Funds	Registered Investment Company T. R Price Intl Grth&Inc Ad Fd	$ 0.00	$ 731,374.46
	FRANKLIN TEMPLETON INVESTMENTS	Registered Investment Company TEMPLETON DEVELOPINGMARKETS TRUST FUND C	$ 0.00	$ 19,043.10
	YACKTMAN	Registered Investment Company THE YACKTMAN FOCUSED FUND	$ 0.00	$ 51,655.78
	TOUCHSTONE	Registered Investment Company TOUCHSTONE SANDS CAPITAL SELECT GROWTH F	$ 0.00	$ 12,767.90
	TTM TECHNOLOGIES	Corporate Stock - Common TTM TECHNOLOGIES INCCOM	$ 0.00	$ 131.52
	VANGUARD	Corporate Stock - Common VANGUARD BD INDEX FDINC INTERMEDIATE TER	$ 0.00	$ 57,835.05
	VANGUARD GROUP	Registered Investment Company VANGUARD REIT INDEX FUND	$ 0.00	$ 37,877.19
	VERENIUM CORP	Corporate Stock - Common VERENIUM CORP COM NEW	$ 0.00	$ 906.88
	VERIZON COMMUNICATIONS INC.	Corporate Stock - Common VERIZON COMMUNICATIONS COM	$ 0.00	$ 601.80
	WAL-MART STORES INC.	Corporate Stock - Common WAL MART STORES INC COM	$ 0.00	$ 8,366.40
	WASATCH FUNDS	Registered Investment Company WASATCH CORE GROWTH FUND	$ 0.00	$ 11,429.89

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

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ISEC, INC. 401(K) SAVINGS PLAN

EIN 84 0577348
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PLAN YEAR 01/01/2011 TO 12/31/2011

(A)	(B) Identity of issuer, borrower, lessor or similar party.	(C) Description of investment including maturity date, rate of interest, collateral, par or maturity value.	(D) Cost	(E) Current Value
	WASATCH	Registered Investment Company WASATCH EMERGING MARKETS SMALL CAP FUND	$ 0.00	$ 37,167.45
	WASATCH ADVISORS, INC.	Registered Investment Company WASATCH INTL GROWTH FD	$ 0.00	$ 44,159.31
	WASHINGTON MUTUAL INC.	Corporate Stock - Common WASHINGTON MUTUAL INC	$ 0.00	$ 53.90
	Wells Fargo	Registered Investment Company WELL FAR ADTG LGCPGR A FUND	$ 0.00	$ 154,588.89
	WELLS FARGO ADVANTAGE FUNDS	Registered Investment Company WELLS FARGO ADVANTAGE GROWTH FUND INV CL	$ 0.00	$ 13,452.03
	XOMA LTD	Corporate Stock - Common XOMA LTD SHS NEW ISIN#BMG9825R2069 N/C E	$ 0.00	$ 244.95
	YAHOO! INC.	Corporate Stock - Common YAHOO INC COM	$ 0.00	$ 5,161.60
	YONGYE INTERNATIONAL, INC.	Corporate Stock - Common YONGYE INTL INC COM	$ 0.00	$ 3,159.00
	ZIPCAR, INC.	Corporate Stock - Common ZIPCAR INC COM	$ 0.00	$ 5,837.70
	Participant Loans	Range of Interest Rates Rates Range From 4.25% To 9.25%	$ 0.00	$ 929,805.00

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