

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 <u>01/01/2011</u> and ending <u>12/31/2011</u>	
A This return/report is for:	☐ a multiemployer plan; ☐ a multiple-employer plan; or ☒ a single-employer plan; ☐ a DFE (specify) ____
B This return/report is:	☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information
1a Name of plan <u>TECHLINK NORTHWEST, INC. 401(K) PROFIT SHARING PLAN & TRUST</u>	1b Three-digit plan number (PN) ► <u>001</u> 1c Effective date of plan <u>01/01/2004</u>
2a Plan sponsor's name and address, including room or suite number (Employer, if for single-employer plan) <u>PROTINGENT, INC</u> <u>16650 NE 79TH STREET</u> <u>SUITE 200</u> <u>REDMOND, WA 98052</u>	2b Employer Identification Number (EIN) <u>27-0030296</u> 2c Sponsor's telephone number <u>425-284-7777</u> 2d Business code (see instructions) <u>541330</u>

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>10/03/2012</u>	<u>DONN HARVEY</u>
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2011)
v.012611

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") PROTINGENT, INC 16650 NE 79TH STREET REDMOND, WA 98052	3b Administrator's EIN 27-0030296 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
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4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
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5 Total number of participants at the beginning of the plan year	5	135
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6 Number of participants as of the end of the plan year (welfare plans complete only lines 6a , 6b , 6c , and 6d).		
a Active participants.....	6a	160
b Retired or separated participants receiving benefits.....	6b	0
c Other retired or separated participants entitled to future benefits.....	6c	21
d Subtotal. Add lines 6a , 6b , and 6c	6d	181
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	0
f Total. Add lines 6d and 6e	6f	181
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	55
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	0

7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	
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8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:

2E 2G 2J 2T 2I 3D

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

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

a Pension Schedules

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

b General Schedules

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

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 <div style="border: 1px solid black; padding: 5px; font-size: 1.2em; font-weight: bold;">2011</div> This Form is Open to Public Inspection
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For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011		
A Name of plan TECHLINK NORTHWEST, INC. 401(K) PROFIT SHARING PLAN & TRUST	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 PROTINGENT, INC	D Employer Identification Number (EIN) 27-0030296	

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
	Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)	4746	9457
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	9982	67364
(2) U.S. Government securities.....	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other.....	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	35685	28357
(9) Value of interest in common/collective trusts.....	1c(9)		
(10) Value of interest in pooled separate accounts.....	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	812027	900457
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	862440	1005635

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k		

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	862440	1005635
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Part II Income and Expense Statement

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

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)		
(B) Participants	2a(1)(B)	281212	
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		281212
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	1932	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		1932
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	23739	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		23739
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		-19730
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		287153

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	133213	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		133213
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	10745	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		10745
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		143958

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		143195
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) ☐ Unqualified (2) ☐ Qualified (3) ☒ Disclaimer (4) ☐ Adverse

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

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

(1) Name: MAHRT & ASSOCIATES, PLLC

(2) EIN: 91-1873332

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....		X	
e Was this plan covered by a fidelity bond?.....	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

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

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

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

5b(1) Name of plan(s)

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2011 This Form is Open to Public Inspection.
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For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan <u>TECHLINK NORTHWEST, INC. 401(K) PROFIT SHARING PLAN & TRUST</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>PROTINGENT, INC</u>	D Employer Identification Number (EIN) <u>27-0030296</u>

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>16-1470238</u> Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.	
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part)
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4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.....	☐ Yes	☒ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year (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
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9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box.....	☐ Increase	☐ Decrease	☐ Both	☐ No
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Part IV	ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
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10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?.....	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.).....	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

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): _____

TECHLINK NW, INC. 401(k) PROFIT SHARING PLAN AND TRUST

**INDEPENDENT AUDITORS' REPORT AND
FINANCIAL STATEMENTS
(with supplemental information)**

DECEMBER 31, 2011 and 2010

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Mahrt & Associates, PLLC

Certified Public Accountants

September 20, 2012

INDEPENDENT AUDITORS' REPORT

Board of Trustees
TechLink NW, Inc. 401(k) Plan
Redmond, Washington

We were engaged to audit the statements of net assets available for benefits of TechLink NW, Inc. 401(k) Profit Sharing Plan and Trust as of December 31, 2011, and the related statements of changes in net assets available for benefits for the year ended December 31, 2011 and the supplemental information as of December 31, 2011, as listed in the accompanying index. These financial statements and supplemental information are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Mid Atlantic Trust Company, the custodian of the Plan, except for comparing the information with the related information included in the financial statements and supplemental information. We have been informed by the plan administrator that Mid Atlantic Trust Company held the Plan's investment assets and executed investment transactions for the year ended Dec 31, 2011. The plan administrator has obtained a certification from the custodian as of and for the year ended December 31, 2011 that the information provided to the plan administrator by the custodian is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental information taken as a whole. The supplemental information is presented for the purpose of additional analysis and is not a required part of the financial statements, but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

The statement of net assets available for benefits as of December 31, 2010, was compiled by us and our report thereon, dated September 20, 2012, stated that we did not audit or review the financial statement and accordingly, expressed no opinion or other form of assurance on it.

Mahrt & Associates, PLLC
Mahrt & Associates, PLLC
Federal Way, Washington

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TECHLINK NW, INC. 401(k) PROFIT SHARING PLAN AND TRUST
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

	ASSETS	
	December 31,	
	2011	2010
	Audited	Unaudited
Investments , at Fair Value	\$ 967,821	\$ 822,009
Receivables		
Notes Receivable from Participants	28,357	35,685
Participant Contribution Receivable	9,457	4,746
Total Receivables	37,814	40,431
Total Assets	1,005,635	862,440
Net Assets Available For Benefits	\$ <u>1,005,635</u>	\$ <u>862,440</u>

TECHLINK NW, INC. 401(k) PROFIT SHARING PLAN AND TRUST
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

	<u>For the Year Ended December 31, 2011</u>
Additions To Net Assets Attributed To:	
Investment Income	
Interest and Dividends	\$ 23,739
Investment Depreciation	(19,730)
Interest on Participant Loans	1,932
Employee Contributions	<u>281,212</u>
 Total Changes in Additions	 287,153
 Deductions From Net Assets Attributed To:	
Benefits Paid to Participants	133,213
Administrative Expenses	<u>10,745</u>
 Total Deductions	 <u>143,958</u>
 Net Increase In Assets	 143,195
 Net Assets Available For Benefits	
Beginning of Year	<u>862,440</u>
 End of Year	 \$ <u><u>1,005,635</u></u>

TECHLINK NW, INC. 401(k) PROFIT SHARING PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS

NOTE 1 - DESCRIPTION OF THE PLAN

The following description of the TechLink NW, Inc. 401(k) Profit Sharing Plan and Trust (Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General - The Plan is a defined contribution plan covering all employees of TechLink NW, Inc. and Protingent Franchise, LLC who are 21 years of age and have completed a month of service. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Trustees have adopted a Volume Submitter 401(k) Profit Sharing Plan with CODA, as provided by Paychex, Inc.

Contributions - Each year, participants may elect to contribute a percentage of their compensation to the Plan as defined in the Plan. The company may make a discretionary matching contribution. The company may also make a discretionary profit sharing contribution to the Plan. Participants must be actively employed on the last day of the Plan year to share in the allocation of the elective employer profit sharing match. No matching or profit sharing contributions were made for 2011.

Participant Accounts - Each participant's account is credited with the participant's contribution and an allocation of the company's contribution and plan earnings. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account balance.

Vesting - Participants are immediately vested in their voluntary contributions plus actual earnings thereon. Vesting in the company matching contribution and company profit sharing contribution is as follows:

<u>Years of Service</u>	<u>Percentage</u>
Less than 2	0%
2 years	20%
3 years	40%
4 years	60%
5 years	80%
6 years or more	100%

Notes Receivable from Participants - Participants may borrow from their accounts, a minimum of \$500 up to a maximum equal to the lesser of \$50,000 or 50 percent of their vested account balance. Loans are secured by the balance in the participant's accounts and bear a reasonable rate of interest. A participant may only have one loan outstanding at any time.

TECHLINK NW, INC. 401(k) PROFIT SHARING PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS

NOTE 1 - DESCRIPTION OF THE PLAN, continued

Forfeited Accounts - Forfeitures reduce employer contributions. Forfeitures for 2011 were \$0.

Administrative Expenses - The Plan Sponsor pays all plan administrative expenses, except for investment fees that are deducted from plan earnings before they are allocated to the participants.

Payment of Benefits - Due to death, disability, retirement, or termination of employment, a participant will receive an amount equal to the value of the participant's vested interest in his or her account in a lump sum amount or a transfer to another qualified retirement account, or individual retirement account. If the value of a participant's vested account balance is \$5,000 or less on the valuation date coincident with or immediately following the participant's termination of employment, the company can distribute the participant's entire vested account balance. The Plan does not allow for hardship distributions.

Investment Options - The assets of the Plan, both employee and employer, are allocated to the various funds at the direction of the participant. The following investment options are available for the investment of participants' elective and employer matching and discretionary contributions: Equity, International, Fixed Income, Balanced and Money Market Funds.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A summary of the Plan's significant accounting policies applied in the preparation of the accompanying financial statements follows:

- a. *Basis of accounting* - the accounts of the Plan are maintained in accordance with the accrual basis of accounting.
- b. *Investments* - Investments in all funds are presented at fair value, based on quoted market prices of the underlying securities within each fund at December 31, 2011 and 2010. 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.

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

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

TECHLINK NW, INC. 401(k) PROFIT SHARING PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, continued

- d. *Benefit Payments* - Benefits are recorded when paid.
- e. *Date of Management's Review* - Subsequent events were evaluated through September 20, 2012, which is the date the financial statements were available to be issued.
- f. *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. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes could materially affect participants' account balances and the amount reported in the statements of net assets available for benefits.

TECHLINK NW, INC. 401(k) PROFIT SHARING PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS

NOTE 3 - INFORMATION CERTIFIED BY THE PLAN'S CUSTODIAN

The plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Mid Atlantic Trust Company, the custodian of the plan, has certified to the completeness and accuracy of investments reflected on the accompanying Statements of Net Assets Available for Benefits as of December 31, 2011 and 2010 and the Schedule of Assets Held for Investment Purposes as of December 31, 2011 and the related investment activity reflected in the Statement of Changes in Net Assets Available for Benefits for the year ended December 31, 2011. Investments in excess of \$43,122 and \$27,666 for 2011 and 2010, respectively, represent more than 5% of plan assets.

	2011	2010
	Audited	Unaudited
Investments, at Fair Value:		
Mid Atlantic Trust Company		
Mutual Funds		
Vanguard Prime Money Market	\$ 67,345	\$ -0-
Dodge & Cox International Stock	85,600	96,748
Vanguard Growth Index	55,158	51,872
Vanguard Inflation Protected Securities	118,366	109,344
Vanguard Lifestrategy Moderate Growth	137,144	139,583
Vanguard Small Cap Growth Index	-0-	36,923
Vanguard Total Bond Index	62,492	56,349
Vanguard Value Index	80,356	64,497
Vanguard Wellesley Income	-0-	29,860
Other mutual funds not in excess of \$43,122 and 27,792 for December 31, 2011 and 2010 respectively, in aggregate	361,360	236,833
	\$ 967,821	\$ 822,009
Investment Income:		
Interest and Dividends	\$ 23,739	
Investment Appreciation/(Depreciation)	(19,730)	

TECHLINK NW, INC. 401(k) PROFIT SHARING PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS

NOTE 4 - FAIR VALUE MEASUREMENTS

FASB ASC 820, Fair Value Measurement and Disclosures, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 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 inactive markets;
- Quoted prices for identical 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 asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

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

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

TECHLINK NW, INC. 401(k) PROFIT SHARING PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS

NOTE 4 - FAIR VALUE MEASUREMENTS, continued

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2011 and 2010.

Mutual Funds: value based on quoted market prices of the underlying securities within each fund.

The preceding methods may produce a fair value calculation that may not be indicative of net realizable value or reflective of future 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 fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

<i>Assets at Fair Value as of December 31, 2011 (Audited)</i>					
	Level 1	Level 2	Level 3	Total	
Mutual Funds					
Equity	\$ 329,268	\$ -0-	\$ -0-	\$ 329,268	
International	136,458	-0-	-0-	136,458	
Fixed Income	231,863	-0-	-0-	231,863	
Balanced	202,887	-0-	-0-	202,887	
Money Market	67,345	-0-	-0-	67,345	
Total Mutual Funds	<u>967,821</u>	<u>-0-</u>	<u>-0-</u>	<u>967,821</u>	
Total Assets at Fair Value	\$ <u>967,821</u>	\$ <u>-0-</u>	\$ <u>-0-</u>	\$ <u>967,821</u>	

TECHLINK NW, INC. 401(k) PROFIT SHARING PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS

NOTE 4 - FAIR VALUE MEASUREMENTS, continued

<i>Assets at Fair Value as of December 31, 2010(Unaudited)</i>					
	Level 1	Level 2	Level 3	Total	
Mutual Funds					
Equity	\$ 806,007	\$ -0-	\$ -0-	\$ 806,007	
Fixed Income	4,657	-0-	-0-	4,657	
Balanced	1,369	-0-	-0-	1,369	
Money Market	9,976	-0-	-0-	9,976	
Total Mutual Funds	<u>822,009</u>	<u>-0-</u>	<u>-0-</u>	<u>822,009</u>	
Total Assets at Fair Value	\$ <u>822,009</u>	\$ <u>-0-</u>	\$ <u>-0-</u>	\$ <u>822,009</u>	

Losses (realized and unrealized) included in changes in net assets available for benefits for the year ended December 31, 2011, are reported in investment depreciation.

TECHLINK NW, INC. 401(k) PROFIT SHARING PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS

NOTE 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. In the event of Plan termination, participants will become 100 percent vested in their accounts.

NOTE 6 - TAX STATUS

The Internal Revenue Service has determined and informed Paychex, Inc., holder of the Volume Submitter Profit Sharing Plan with CODA, by a letter dated March 31, 2008, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). The Company adopted the plan. The Plan has been amended since receiving the determination letter. However, the Plan administrator believes that the Plan is currently designed and being operated in compliance with applicable provisions of the IRC. Therefore, no provision for income taxes has been included in the Plan's financial statements.

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 Internal Revenue Service. 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.

NOTE 7 - SUBSEQUENT EVENTS

Effective April 10, 2012, Protingent, Inc. purchased 50% of Protingent Franchise, LLC. Effective June 28, 2012, Protingent, Inc. established an ESOP. Effective June 2012, the name of the Plan was changed to Protingent, Inc. 401(k) Plan.

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SUPPLEMENTAL INFORMATION

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TECHLINK NW, INC. 401(k) PROFIT SHARING PLAN AND TRUST
FORM 5500 - SCHEDULE H, LINE 4i
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

EIN: 27-0030296

PLAN NO.: 001

DECEMBER 31, 2011

(a)	(b)	(c)	(d)	(e)
	Identity of Issues, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
*	Mid Atlantic Trust Company	Mutual Funds		
		AllianceBernstein Equity Income	**	\$ 4,978
		American Century Global Gold	**	6,348
		American Century Heritage	**	3,690
		American Century Zero Coupon 2025	**	13,930
		BlackRock Natural Resources Trust	**	20,467
		Columbia Acorn International	**	11,110
		Columbia Greater China	**	4,390
		Columbia Mid Cap Value	**	3,827
		Delaware Corporate Bond	**	11
		Dodge & Cox International Stock	**	85,600
		Dreyfus Technology Growth	**	6,700
		Keeley Small Cap Value	**	2,552
		MainStay S&P 500 Index	**	3,875
		Northern Emerg Markets Equity Index	**	10,353
		Oppenheimer International Bond	**	835
		PIMCO All Asset	**	8,425
		Prudential Global Real Estate	**	3,919

TECHLINK NW, INC. 401(k) PROFIT SHARING PLAN AND TRUST
FORM 5500 - SCHEDULE H, LINE 4i
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

EIN: 27-0030296

PLAN NO.: 001

DECEMBER 31, 2011

(a)	(b)	(c)	(d)	(e)
	Identity of Issues, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
*	Mid Atlantic Trust Company	Mutual Funds		
		Schwab Health Care Fund	**	7,787
		T Rowe Price Financial Services	**	2,104
		T Rowe Price Media and Tel	**	16,714
		Vanguard 500 Index	**	22,651
		Vanguard Equity-Income	**	6,508
		Vanguard Global Equity	**	19,127
		Vanguard Growth Index	**	55,158
		Vanguard Inflation-Protected Securities		118,366
		Vanguard Int-Term Bond Index	**	5,349
		Vanguard Intermediate-Term Treasury	**	12,202
		Vanguard LifeStrategy Growth	**	14,378
		Vanguard LifeStrategy Mod Growth	**	137,144
		Vanguard Long-Term US Treasury	**	12,460
		Vanguard Mid-Cap Growth Index	**	3,115
		Vanguard Mid-Cap Index	**	2,616
		Vanguard Mid-Cap Value Index	**	76
		Vanguard Prime Money Market	**	67,345

TECHLINK NW, INC. 401(k) PROFIT SHARING PLAN AND TRUST
FORM 5500 - SCHEDULE H, LINE 4i
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

EIN: 27-0030296

PLAN NO.: 001

DECEMBER 31, 2011

(a)	(b)	(c)	(d)	(e)
	Identity of Issues, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
*	Mid Atlantic Trust Company	Mutual Funds		
		Vanguard Short-Term Federal Fund		
		Vanguard Small Cap Growth Index	**	39,056
		Vanguard Small Cap Index	**	10,115
		Vanguard Small Cap Value Index	**	4,083
		Vanguard Target Retirement 2020	**	37
		Vanguard Target Retirement 2025	**	9,875
		Vanguard Target Retirement 2030	**	38
		Vanguard Target Retirement 2035	**	6,409
		Vanguard Target Retirement 2040	**	7,130
		Vanguard Target Retirement 2045	**	8,141
		Vanguard Target Retirement Income	**	99
		Vanguard Total Bond Market Index	**	62,492
		Vanguard Total Stock Market Index	**	8,622
		Vanguard US Growth Portfolio	**	2,379
		Vanguard Value Index	**	80,356
		Vanguard Wellesley Income	**	25,590
		Yacktman Fund	**	3,073
		Total	**	<u>967,821</u>
		Participant Loans, Interest at 4.25% to 10.25%		<u>28,357</u>

* Represents a party-in-interest

** Cost omitted for participant directed investments

PARTY IN INTEREST - X
IDENTITY - ALLIANCEBERN EQ INC
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 4978

PARTY IN INTEREST - X
IDENTITY - AMERICAN CEN GL BD
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 6348

PARTY IN INTEREST - X
IDENTITY - AMERICAN CEN HER
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 3690

PARTY IN INTEREST - X
IDENTITY - AMERICAN CEN ZERO CP
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 13930

PARTY IN INTEREST - X
IDENTITY - BLACKRK NAT RES TR
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 20467

PARTY IN INTEREST - X
IDENTITY - COL ACORN INTL
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 11110

PARTY IN INTEREST - X
IDENTITY - COL GR CHINA
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 4390

PARTY IN INTEREST - X
IDENTITY - COL MID CAP VALUE
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 3827

PARTY IN INTEREST - X
IDENTITY - DEL CORP BOND
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 11

PARTY IN INTEREST - X
IDENTITY - DODGE & COX INTL STK
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 85600

PARTY IN INTEREST - X
IDENTITY - DREYFUS TECH GR
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 6700

PARTY IN INTEREST - X
IDENTITY - KEELEY SMALL CAP VAL
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 2552

PARTY IN INTEREST - X
IDENTITY - MAINSTAY S&P 500 IND
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 3875

PARTY IN INTEREST - X
IDENTITY - NORTH EMER MKTS EQ
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 10353

PARTY IN INTEREST - X
IDENTITY - OPP INTL BD
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 835

PARTY IN INTEREST - X
IDENTITY - PIMCO ALL ASSET
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 8425

PARTY IN INTEREST - X
IDENTITY - PRU GLOB REAL ESTATE
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 3919

PARTY IN INTEREST - X
IDENTITY - SCHWAB HLTH CARE FD
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 7787

PARTY IN INTEREST - X
IDENTITY - T ROWE PR FIN SERV
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 2104

PARTY IN INTEREST - X
IDENTITY - T ROWE PR MED & TEL
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 16714

PARTY IN INTEREST - X
IDENTITY - VAN 500 INDEX
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 22651

PARTY IN INTEREST - X
IDENTITY - VAN EQ INCOME
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 6508

PARTY IN INTEREST - X
IDENTITY - VAN GLOBAL EQ
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 19127

PARTY IN INTEREST - X
IDENTITY - VAN GR INDEX
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 55158

PARTY IN INTEREST - X
IDENTITY - VAN INFL PROT SEC
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 118366

PARTY IN INTEREST - X
IDENTITY - VAN INT TERM BD IND
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 5349

PARTY IN INTEREST - X
IDENTITY - VAN INT TERM TREAS
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 12202

PARTY IN INTEREST - X
IDENTITY - VAN LIFEST GROWTH
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 14378

PARTY IN INTEREST - X
IDENTITY - VAN LIFEST MOD GR
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 137144

PARTY IN INTEREST - X
IDENTITY - VAN LONGTERM US TREA
DESCRIPTION - MUTUAL FUND
COST - 0

CURRENT VALUE - 12460

PARTY IN INTEREST - X

IDENTITY - VAN MIDCAP GR INDEX

DESCRIPTION - MUTUAL FUND

COST - 0

CURRENT VALUE - 3115

PARTY IN INTEREST - X

IDENTITY - VAN MIDCAP INDEX

DESCRIPTION - MUTUAL FUND

COST - 0

CURRENT VALUE - 2616

PARTY IN INTEREST - X

IDENTITY - VAN MIDCAP VAL INDEX

DESCRIPTION - MUTUAL FUND

COST - 0

CURRENT VALUE - 76

PARTY IN INTEREST - X

IDENTITY - VAN PRIME MM

DESCRIPTION - MUTUAL FUND

COST - 0

CURRENT VALUE - 67345

PARTY IN INTEREST - X

IDENTITY - VAN ST FEDERAL

DESCRIPTION - MUTUAL FUND

COST - 0

CURRENT VALUE - 6216

PARTY IN INTEREST - X

IDENTITY - VAN SM CAP GR INDEX

DESCRIPTION - MUTUAL FUND

COST - 0

CURRENT VALUE - 39056

PARTY IN INTEREST - X

IDENTITY - VAM SM CAP INDEX

DESCRIPTION - MUTUAL FUND

COST - 0

CURRENT VALUE - 10115

PARTY IN INTEREST - X

IDENTITY - VAN SM CAP VAL INDEX

DESCRIPTION - MUTUAL FUND

COST - 0

CURRENT VALUE - 4083

PARTY IN INTEREST - X

IDENTITY - VAN TARGET RET 2020

DESCRIPTION - MUTUAL FUND

COST - 0

CURRENT VALUE - 37

PARTY IN INTEREST - X

IDENTITY - VAN TARGET RET 2025

DESCRIPTION - MUTUAL FUND

COST - 0
CURRENT VALUE - 9875

PARTY IN INTEREST - X
IDENTITY - VAN TARGET RET 2030
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 38

PARTY IN INTEREST - X
IDENTITY - VAN TARGET RET 2035
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 6409

PARTY IN INTEREST - X
IDENTITY - VAN TARGET RET 2040
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 7130

PARTY IN INTEREST - X
IDENTITY - VAN TARGET RET 2045
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 8141

PARTY IN INTEREST - X
IDENTITY - VAN TARGET RET INC
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 99

PARTY IN INTEREST - X
IDENTITY - VAN TOTAL BD MAR IND
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 62492

PARTY IN INTEREST - X
IDENTITY - VAN TOTAL STK MAR IN
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 8622

PARTY IN INTEREST - X
IDENTITY - VAN US GROWTH PORT
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 2379

PARTY IN INTEREST - X
IDENTITY - VAN VALUE INDEX
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 80356

PARTY IN INTEREST - X
IDENTITY - VAN WELLESLEY INC

DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 25590

PARTY IN INTEREST - X
IDENTITY - YACKTMAN FUND
DESCRIPTION - MUTUAL FUND
COST - 0
CURRENT VALUE - 3073

PARTY IN INTEREST -
IDENTITY - PARTICIPANT LOANS
DESCRIPTION - INT 4.25% TO 10.25%
COST - 0
CURRENT VALUE - 28357