

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>XCELLEREX, INC. 401(K) PLAN</u>	1b Three-digit plan number (PN) ▶ <u>001</u> 1c Effective date of plan <u>11/15/2003</u>
2a Plan sponsor's name and address, including room or suite number (Employer, if for single-employer plan) <u>XCELLEREX, INC.</u> <u>170 LOCKE DRIVE</u> <u>MARLBOROUGH, MA 01752</u>	2b Employer Identification Number (EIN) <u>90-0269663</u> 2c Sponsor's telephone number <u>508-480-9235</u> 2d Business code (see instructions) <u>325410</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>10/15/2012</u>	<u>JOHN SPRAGUE</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)
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3a Plan administrator's name and address (if same as plan sponsor, enter "Same") XCELLEREX, INC. 170 LOCKE DRIVE MARLBOROUGH, MA 01752	3b Administrator's EIN 90-0269663 3c Administrator's telephone number 508-480-9235
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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	131
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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	133
b Retired or separated participants receiving benefits.....	6b	0
c Other retired or separated participants entitled to future benefits.....	6c	39
d Subtotal. Add lines 6a , 6b , and 6c	6d	172
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	0
f Total. Add lines 6d and 6e	6f	172
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	115
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:

2F 2G 2J 2K 2T 3D

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

9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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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 C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		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 XCELLEREX, INC. 401(K) PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 XCELLEREX, INC.	D Employer Identification Number (EIN) 90-0269663

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

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04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
64 37 65	RECORDKEEPER	450	Yes ☒ No ☐	Yes ☒ No ☐	0	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 ☐

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2011 This Form is Open to Public Inspection
For calendar plan year 2011 or fiscal plan year beginning <u>01/01/2011</u> and ending <u>12/31/2011</u>		
A Name of plan <u>XCELLEREX, INC. 401(K) PLAN</u>		B Three-digit plan number (PN) ► <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>XCELLEREX, INC.</u>		D Employer Identification Number (EIN) <u>90-0269663</u>

Part I	Asset and Liability Statement		(a) Beginning of Year	(b) End of Year
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	Total noninterest-bearing cash	1a		
b	Receivables (less allowance for doubtful accounts):			
	(1) Employer contributions	1b(1)		
	(2) Participant contributions	1b(2)		
	(3) Other.....	1b(3)		
c	General investments:			
	(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	151655	207831
	(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)	15652	24141
	(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)	2907437	3814596
	(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	3074744	4046568

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	3074744	4046568
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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)	238309	
(B) Participants	2a(1)(B)	648314	
(C) Others (including rollovers)	2a(1)(C)	544341	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		1430964
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	13	
(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)	947	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		960
(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)	96613	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		96613
(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)		-213132
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		1315405

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	343030	
(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)		343030
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)	551	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		551
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		343581

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		971824
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: G.T. REILLY & COMPANY (2) EIN: 04-2513210

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	
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.		X	

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

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

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

5b(1) Name of plan(s)

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 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>XCELLEREX, INC. 401(K) PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>XCELLEREX, INC.</u>	D Employer Identification Number (EIN) <u>90-0269663</u>

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

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

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

**Audited
Financial Statements**

Xcellerex, Inc. 401(k) Plan

December 31, 2011

Xcellerex, Inc. 401(k) Plan

Audited Financial Statements

December 31, 2011

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G.T. Reilly & Company

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Reilly Benefits

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INDEPENDENT AUDITORS' REPORT

To the Plan Administrator of
Xcellerex, Inc. 401(k) Plan

We were engaged to audit the statement of net assets available for benefits of Xcellerex, Inc. 401(k) Plan (the "Plan") as of December 31, 2011, and the related statement of changes in net assets available for benefits for the year ended December 31, 2011 and the supplemental schedule of assets (held at end of year) as of December 31, 2011. These financial statements and supplemental schedule are the responsibility of the Plan's management.

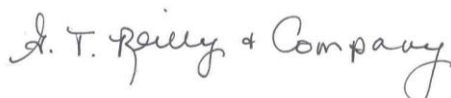
As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information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

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedule taken as a whole. The supplemental schedule is presented for the purpose of additional analysis and is not a required part of the financial statements but is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. 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 Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

We have compiled the accompanying statement of net assets available for benefits of Xcellerex, Inc. 401(k) Plan as of December 31, 2010. We have not audited or reviewed the accompanying statement of net assets available for benefits and, accordingly, do not express an opinion or provide any assurance about whether the financial statements are in accordance with accounting principles generally accepted in the United States of America.

Plan management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America and for designing, implementing, and maintaining internal control relevant to the preparation and fair presentation of the financial statements.

Our responsibility is to conduct the compilation in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants. The objective of a compilation is to assist plan management in presenting financial information in the form of financial statements without undertaking to obtain or provide any assurance that there are no material modifications that should be made to the financial statements.



G.T. Reilly & Company

Milton, Massachusetts
October 11, 2012

Xcellerex, Inc. 401(k) Plan

Statements of Net Assets Available for Benefits

December 31

(See Independent Auditors' Report)

	<u>2011</u>	<u>2010</u> (Unaudited)
<u>Assets</u>		
INVESTMENTS, at fair value (Notes 2, 3, 5, 6 & 8)		
Shares of registered investment companies	<u>\$ 4,022,427</u>	<u>\$ 3,059,092</u>
RECEIVABLES		
Employer's contributions	-	91,778
Notes receivable from participants	<u>24,141</u>	<u>15,652</u>
	<u>24,141</u>	<u>107,430</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 4,046,568</u>	<u>\$ 3,166,522</u>

Xcellerex, Inc. 401(k) Plan

Statement of Changes in Net Assets Available for Benefits

Year Ended December 31, 2011

(See Independent Auditors' Report)

ADDITIONS

Additions to net assets attributed to:

Investment income (Note 3):

Interest and dividends	\$ 97,573
------------------------	-----------

Contributions:

Participants	648,314
--------------	---------

Employer	146,531
----------	---------

Rollover	544,341
----------	---------

	<u>1,339,186</u>
--	------------------

TOTAL ADDITIONS	<u>1,436,759</u>
-----------------	------------------

DEDUCTIONS

Deductions from net assets attributed to:

Net depreciation of fair value of investments (Notes 3 & 5)	213,132
---	---------

Benefits paid to participants	343,030
-------------------------------	---------

Administrative expenses	551
-------------------------	-----

	<u>556,713</u>
--	----------------

NET INCREASE	880,046
--------------	---------

NET ASSETS AVAILABLE FOR BENEFITS

AT BEGINNING OF YEAR	<u>3,166,522</u>
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NET ASSETS AVAILABLE FOR BENEFITS

AT END OF YEAR	<u>\$ 4,046,568</u>
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Xcellerex, Inc. 401(k) Plan

Notes to Financial Statements

December 31, 2011

Note 1 – Plan Description

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

General – Xcellerex, Inc. (the "Company") has established an employees' savings trust for the benefit of its employees. The Plan contains salary reduction features under Internal Revenue Code Section 401(k). The Plan is subject to the provisions of the Employee Retirement Income Act of 1974 (ERISA). All of the Company's capital stock was acquired by a subsidiary of General Electric Company in May of 2012. The Company continues as a legal entity and the plan administrator intends to freeze further contributions to the Plan.

Eligibility - All employees of the Company were eligible to participate commencing with the first day of the month following their hire date.

Participant Contributions - Participants may voluntarily contribute up to 90% of eligible compensation on a salary-reduction basis, not to exceed \$16,500 in 2011 and provisions are available to contribute additional and bonus deferrals. Participants age 50 and over may voluntarily contribute up to an additional \$5,500. Salary deferrals are not subject to federal income taxes until withdrawn from the Plan, in accordance with Section 401(a) of the Internal Revenue Code. Participants may also contribute amounts representing rollover distributions from other qualified defined benefit and defined contribution plans.

Employer Contributions - The Plan allows for discretionary matching contributions. During 2011, the Company contributed 33% of salary deferrals up to a maximum of 6% of compensation for all eligible employees.

Vesting - Participants are fully vested in their voluntary and employer contributions plus related earnings.

Participant Accounts - Each participant's account is credited with the participant's contribution, an allocation of the employer matching contribution, plan earnings (based on participants' investment election and account balance). Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled to is the benefit that can be provided from the participant's vested account balance.

Investment Options - All assets of the Plan are participant directed. Participants have the option of directing the investment of their contributions as well as any employer contributions into various mutual funds offered by the Plan.

Payment of Benefits - Upon termination of employment or attaining age 59-1/2, a participant may elect to receive the vested interest in his/her account in a lump-sum distribution or periodic installments. A participant, or his/her beneficiaries, may also receive benefits upon the death or disability of the participant.

Loan Provisions - Participants have the option to borrow from their funds up to 50% of their vested account balance (reduced by the highest outstanding loan balance in the preceding 12-month period). The minimum and maximum loan amounts are \$1,000 and \$50,000, respectively. Repayment terms may not exceed five years, or ten years for the purchase of a principal residence. The loans are secured by the balance in the participant's account and bear interest at prevailing rates determined by the plan administrator. Principal and interest payments with respect to the loans are credited solely to the borrowing participant's account. Principal and interest are paid by level amortization with payments to be made not less frequently than quarterly through payroll deduction.

Note 1 - Description of Plan (Cont.)

Hardship Distributions - Hardship distributions are permitted if the distribution is due to expenses incurred or necessary for unreimbursed medical care for the participant, spouse or dependents, purchase of a principal residence, payment of tuition, or to prevent eviction from, or foreclosure on, the participant's principal residence. The amount of the hardship withdrawal is subjected to certain limitations as specified in the Plan and the Internal Revenue Code. The minimum hardship distribution is \$500. The participant's voluntary contributions are suspended for six months after the receipt of a hardship distribution, with limitations on the dollar amount of deferrals in the following calendar year.

Note 2 - Summary of Significant Accounting Policies

Basis of Accounting - The accompanying financial statements are presented on the accrual basis of accounting, except payment of benefits are recorded upon distribution.

Accounting 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 could vary from the estimates that were used.

Fair Value Measurements - The Plan follows the provisions of the Financial Accounting Standards Board's (FASB) Accounting Standards Codification (ASC) Topic 820, "Fair Value Measurements and Disclosures", (ASC Topic 820), for assets and liabilities that are measured and recorded at fair value on a recurring basis, and to determine fair value disclosures. This standard defines fair value, establishes a framework for measuring fair value, and expands disclosures about fair value measurements.

Investment Valuation and Income Recognition - The Plan's investments are stated at fair value with investment appreciation or depreciation reflected in the statement of changes in net assets.

Net appreciation and depreciation include the Plan's gains and losses on investments bought and sold, as well as held during the year (see Notes 3 & 5).

Purchases and sales of securities are recorded on a trade-date basis, interest income is recorded on the accrual basis, and dividends are recorded on the ex-dividend date.

Administrative Expenses - The Plan's administrative expenses were paid by the Company. Recordkeeping fees are paid by the participants.

Payment of Benefits - Benefits are recorded when paid upon distribution.

Excess Contributions - Required payments to be made to active participants to return excess deferral contributions in order to satisfy the relevant nondiscrimination provisions of the Plan are recorded as liabilities in the year the contribution is received.

Evaluation of Subsequent Events - Management has evaluated subsequent events involving the Plan for potential recognition or disclosure in the accompanying financial statements. Subsequent events are events or transactions that occurred after December 31, 2011 up through October 11, 2012, the date the accompanying financial statements were available to be issued.

Note 3 – Information Prepared and Certified by the Plan's Trustee

The plan administrator has elected the method of compliance permitted by 29 CFR Section 2520.103-8 of the Department of Labor Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, as permitted under such election, the plan administrator instructed the auditors not to perform any auditing procedures with respect to the information certified by the Trustee, except for comparing such information to the related information included in the accompanying financial statements. The following information included in the accompanying financial statements and supplemental schedule was obtained from data that has been prepared and certified as to complete and accurate by the Trustee.

	<u>2011</u>	<u>2010</u>
Investments at fair value (See Note 6):		
Fidelity Fund	\$ 29,014	\$ 18,834
Fidelity Puritan	295,942	159,780
Fidelity Value Strategies	64,818	64,059
Fidelity Contrafund	331,621	185,877
Fidelity Equity Income	57,620	50,200
Fidelity Growth Company	356,648	209,060
Fidelity Investment Grade Bond	75,206	44,996
Fidelity Intermediate Bond	188,734	163,432
Fidelity Value	76,974	78,247
Fidelity OTC	113,732	102,191
Fidelity Overseas	57,476	85,942
Fidelity Real Estate Investment	56,678	12,750
Fidelity Blue Chip Growth	71,673	26,552
Fidelity Low Priced Stock	163,432	135,442
Fidelity Equity Income II	70,210	39,366
Fidelity Growth Strategies	41,635	46,002
Fidelity Diversified International	188,654	194,175
Fidelity Dividend Growth	61,527	21,485
Fidelity Export & Multinational	80,883	99,455
Fidelity Mid Cap Stock	77,873	100,038
Fidelity Large Cap Stock	14,114	6,068
Fidelity Freedom Income	62,247	58,588
Fidelity Freedom 2000	42,991	60,299
Fidelity Freedom 2010	178,140	201,286
Fidelity Freedom 2020	195,330	174,832
Fidelity Freedom 2030	69,403	23,045
Fidelity Small Cap Discovery	72,011	44,159
Fidelity Spartan Total Market Index	5,886	1,326
Fidelity Spartan Extended Mkt Index Inv	107,527	93,044
Fidelity Short Term Bond Fund	21,612	11,923
Fidelity Fifty	59,545	49,686
Fidelity Retire Money Market	207,831	151,655
Fidelity Freedom 2040	215,046	104,247
Fidelity Freedom 2005	1,689	27,276
Fidelity Freedom 2015	-	6,673
Fidelity Freedom 2025	26,167	6,684
Fidelity Freedom 2035	56,792	45,704
Fidelity Small Cap Value	98,307	48,235
Fidelity Freedom 2045	96,664	55,323
Fidelity Freedom 2050	30,775	51,156
	<u>\$4,022,427</u>	<u>\$3,059,092</u>
Notes receivable from participants	<u>\$ 24,141</u>	<u>\$ 15,652</u>
Investment income:		
Interest and dividends	<u>\$ 97,573</u>	
Net depreciation in fair value of investments	<u>\$ (213,132)</u>	

Note 4 – Exempt Transactions with a Party-In-Interest

Substantially all Plan investments are shares of mutual funds managed by Fidelity Investments. Fidelity Management Trust Company is the trustee as defined by the Plan and, therefore, these transactions qualify as exempt party-in-interest transactions.

Note 5 – Investments

The following investments represent 5% or more of the Plan's net assets at December 31:

	<u>2011</u>	<u>2010</u>
Fidelity Puritan	\$ 295,942	\$ 159,780
Fidelity Contrafund	\$ 331,621	\$ 185,877
Fidelity Growth Company	\$ 356,648	\$ 209,060
Fidelity Intermediate Bond	*	\$ 163,432
Fidelity Diversified International	*	\$ 194,175
Fidelity Freedom 2010	*	\$ 201,286
Fidelity Freedom 2020	*	\$ 174,832
Fidelity Retire Mmkt	\$ 207,831	*
Fidelity Freedom 2040	\$ 215,046	*

* Not a 5% investment in respective year.

During 2011, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) depreciated in value by \$213,132. All depreciation relates to mutual fund investments.

Note 6 – Fair Value Measurements

The Plan uses fair value measurements to record fair value adjustments to certain assets and liabilities and to determine fair value disclosures. Under generally accepted accounting principles, fair value is defined as 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. Fair value is best determined based upon quoted market prices. However, in many instances quoted market prices are not available, therefore fair values are based upon estimates using present value or other valuation techniques. Inputs to valuation techniques refer to the assumptions that market participants would use in pricing the asset or liability. Inputs may be observable, meaning those that reflect the assumptions market participants would use in pricing the asset or liability developed based on market data obtained from independent sources, or unobservable, meaning those that reflect the reporting entity's own assumptions about the assumptions market participants would use in pricing the asset or liability developed based on the best information available to management.

Generally accepted accounting principles establish a three-tier fair value hierarchy, which prioritizes the inputs used in measuring fair value, and gives the highest priority to quoted prices in active markets for identical assets and liabilities and the lowest priority to unobservable inputs. The fair value hierarchy is as follows:

Level 1 - Observable inputs such as quoted prices in active markets.

Level 2 - Observable inputs other than Level 1 inputs such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market.

Level 3 - Unobservable inputs that are supported by little or no market data and are significant to the fair value of the assets or liabilities. Level 3 inputs include fair value measurements whose value is determined using pricing models, discounted cash flow methodologies, or similar techniques, as well as significant judgment or estimation.

Note 6 – Fair Value Measurements (Cont.)

The following is a schedule of the Plan's assets at fair value, by category and level within the fair value hierarchy:

December 31, 2011	Level 1	Level 2	Level 3	Total
Shares of registered investment companies:				
Cash Funds	\$ 207,831	\$ -	\$ -	\$ 207,831
Foreign Large Blend	246,130	-	-	246,130
Intermediate-Term Bond	263,940	-	-	263,940
Large Blend	1,056,771	-	-	1,056,771
Large Growth	1,416,032	-	-	1,416,032
Large Value	127,830	-	-	127,830
Mid Value	64,818	-	-	64,818
Mid-Cap Blend	327,637	-	-	327,637
Mid-Cap Growth	119,508	-	-	119,508
Short-Term Bond	21,612	-	-	21,612
Small Blend	72,011	-	-	72,011
Small Value	98,307	-	-	98,307
	<u>\$ 4,022,427</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 4,022,427</u>

December 31, 2010	Level 1	Level 2	Level 3	Total
Shares of registered investment companies:				
Cash Funds	\$ 151,655	\$ -	\$ -	\$ 151,655
Foreign Large Blend	280,117	-	-	280,117
Intermediate-Term Bond	208,428	-	-	208,428
Large Blend	843,992	-	-	843,992
Large Growth	929,682	-	-	929,682
Large Value	89,566	-	-	89,566
Mid Value	64,059	-	-	64,059
Mid-Cap Blend	241,236	-	-	241,236
Mid-Cap Growth	146,040	-	-	146,040
Short-Term Bond	11,923	-	-	11,923
Small Blend	44,159	-	-	44,159
Small Value	48,235	-	-	48,235
	<u>\$ 3,059,092</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 3,059,092</u>

The level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. There have been no changes in the methodologies used during 2011. The following is a description of the valuation methodologies used for investments measured at fair value, including the general classification of such instruments pursuant to the valuation hierarchy.

Shares of Registered Investment Companies - These investments (mutual funds) are public investment vehicles valued using the Net Asset Value (NAV) provided by the administrator of the fund. The NAV is a quoted price in an active market and is classified within Level 1 of the valuation hierarchy.

Note 7 – Income Tax Status

The Plan Sponsor has adopted a volume submitter defined contribution plan with a cash or deferral arrangement which received a favorable opinion letter from the Internal Revenue Service dated March 31, 2008. The Plan Sponsor believes that the Plan has been operated in compliance with the applicable requirements of the Internal Revenue Code and that, therefore, the Plan is exempt from federal income taxes.

The plan administrator believes the Plan is no longer subject to income tax examination for years prior to 2008.

Note 8 – Investment Risks and Uncertainties

The Plan invests in mutual funds, which are exposed to various risks, such as interest rate, credit risk and overall market risk. Due to the level of risk associated with these investment securities, and the level of uncertainty related to changes in the value of investment securities, it is at least reasonably possible that changes in risks in the near term would materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

Note 9 – 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 a complete or partial Plan termination, participants will become 100% vested in their accounts and participants' accounts will be distributed to participants in accordance with the Plan's provision

Note 10 – Reconciliation of Financial Statements to Form 5500

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

	<u>2011</u>	<u>2010</u>
Net assets available for benefits per the financial statements	\$ 4,046,568	\$ 3,166,522
Contributions receivable	<u>-</u>	<u>(91,778)</u>
Net assets available for benefits per Schedule H of Form 5500	<u>\$ 4,046,568</u>	<u>\$ 3,074,744</u>

The following is a reconciliation of contributions per the financial statements to Form 5500 at December 31, 2011:

Contributions per the financial statements	\$ 1,339,186
Decrease in contributions receivable	91,778
Contributions per Schedule H of Form 5500	<u>\$ 1,430,964</u>

SUPPLEMENTAL SCHEDULE

Xcellerex, Inc. 401(k) Plan

Schedule of Plan Assets (Held at End of Year) – Schedule H, Item 4i

E.I.N. 90-0269663

Plan No.: 001

December 31, 2011

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower or Similar Party	Investments (No. of Shares)	Cost	Fair Value
*	Fidelity Fund	931.39	\$ 27,537	\$ 29,014
*	Fidelity Puritan	16,729.35	301,075	295,942
*	Fidelity Value Strategies	2,585.46	52,346	64,818
*	Fidelity Contrafund	4,915.81	318,779	331,621
*	Fidelity Equity Income	1,394.82	63,346	57,620
*	Fidelity Growth Company	4,409.05	339,288	356,648
*	Fidelity Investment Grade Bond	9,741.74	73,064	75,206
*	Fidelity Intermediate Bond	17,346.92	180,210	188,734
*	Fidelity Value	1,212.77	78,686	76,974
*	Fidelity OTC	2,079.19	99,175	113,732
*	Fidelity Overseas	2,170.54	82,557	57,476
*	Fidelity Real Estate Investment	2,052.05	52,387	56,678
*	Fidelity Blue Chip Growth	1,689.205	71,474	71,673
*	Fidelity Low Priced Stock	4,574.086	159,095	163,432
*	Fidelity Equity Income II	4,035.083	74,088	70,210
*	Fidelity Growth Strategies	2,237.252	38,384	41,635
*	Fidelity Diversified International	7,392.383	213,222	188,654
*	Fidelity Dividend Growth	2,378.313	62,874	61,527
*	Fidelity Export & Multinational	3,911.165	77,118	80,883
*	Fidelity Mid Cap Stock	2,920.964	72,248	77,873
*	Fidelity Large Cap Stock	822.948	13,439	14,114
*	Fidelity Freedom Income	5,538.030	63,016	62,247
*	Fidelity Freedom 2000	3,618.784	38,591	42,991
*	Fidelity Freedom 2010	13,598.450	178,165	178,140
*	Fidelity Freedom 2020	14,887.968	195,626	195,330
*	Fidelity Freedom 2030	5,405.256	71,595	69,403
*	Fidelity Small Cap Discovery	3,595.151	73,497	72,011
*	Fidelity Spartan Total Market Index	162.959	6,016	5,886
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*	Fidelity Short Term Bond Fund	2,545.618	21,300	21,612
*	Fidelity Fifty	3,414.267	61,160	59,545
*	Fidelity Retire Money Market	207,831.09	207,831	207,831
*	Fidelity Freedom 2040	29,218.209	221,890	215,046
*	Fidelity Freedom 2005	160.546	1,734	1,689
*	Fidelity Freedom 2025	2,420.584	27,055	26,167
*	Fidelity Freedom 2035	5,383.162	60,001	56,792
*	Fidelity Small Cap Value	7,032.001	97,135	98,307
*	Fidelity Freedom 2045	11,123.633	96,165	96,664
*	Fidelity Freedom 2050	3,603.649	30,797	30,775
				4,022,427
*	Notes receivable from participants	Interest rate – 6.00%		24,141
				<u>\$ 4,046,568</u>

* Represents a party-in-interest to the Plan.

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

**Audited
Financial Statements**

Xcellerex, Inc. 401(k) Plan

December 31, 2011

Xcellerex, Inc. 401(k) Plan

Audited Financial Statements

December 31, 2011

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G.T. Reilly & Company

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Reilly Benefits

Reilly Business Services

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INDEPENDENT AUDITORS' REPORT

To the Plan Administrator of
Xcellerex, Inc. 401(k) Plan

We were engaged to audit the statement of net assets available for benefits of Xcellerex, Inc. 401(k) Plan (the "Plan") as of December 31, 2011, and the related statement of changes in net assets available for benefits for the year ended December 31, 2011 and the supplemental schedule of assets (held at end of year) as of December 31, 2011. These financial statements and supplemental schedule are the responsibility of the Plan's management.

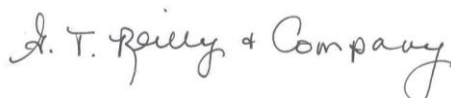
As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information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

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedule taken as a whole. The supplemental schedule is presented for the purpose of additional analysis and is not a required part of the financial statements but is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. 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 Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

We have compiled the accompanying statement of net assets available for benefits of Xcellerex, Inc. 401(k) Plan as of December 31, 2010. We have not audited or reviewed the accompanying statement of net assets available for benefits and, accordingly, do not express an opinion or provide any assurance about whether the financial statements are in accordance with accounting principles generally accepted in the United States of America.

Plan management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America and for designing, implementing, and maintaining internal control relevant to the preparation and fair presentation of the financial statements.

Our responsibility is to conduct the compilation in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants. The objective of a compilation is to assist plan management in presenting financial information in the form of financial statements without undertaking to obtain or provide any assurance that there are no material modifications that should be made to the financial statements.



G.T. Reilly & Company

Milton, Massachusetts
October 11, 2012

Xcellerex, Inc. 401(k) Plan

Statements of Net Assets Available for Benefits

December 31

(See Independent Auditors' Report)

	<u>2011</u>	<u>2010</u> (Unaudited)
<u>Assets</u>		
INVESTMENTS, at fair value (Notes 2, 3, 5, 6 & 8)		
Shares of registered investment companies	<u>\$ 4,022,427</u>	<u>\$ 3,059,092</u>
RECEIVABLES		
Employer's contributions	-	91,778
Notes receivable from participants	<u>24,141</u>	<u>15,652</u>
	<u>24,141</u>	<u>107,430</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 4,046,568</u>	<u>\$ 3,166,522</u>

Xcellerex, Inc. 401(k) Plan

Statement of Changes in Net Assets Available for Benefits

Year Ended December 31, 2011

(See Independent Auditors' Report)

ADDITIONS

Additions to net assets attributed to:

Investment income (Note 3):

Interest and dividends	\$ 97,573
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Contributions:

Participants	648,314
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Employer	146,531
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Rollover	544,341
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<u>1,339,186</u>

TOTAL ADDITIONS

<u>1,436,759</u>

DEDUCTIONS

Deductions from net assets attributed to:

Net depreciation of fair value of investments (Notes 3 & 5)	213,132
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Benefits paid to participants	343,030
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Administrative expenses	551
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<u>556,713</u>

NET INCREASE

880,046

NET ASSETS AVAILABLE FOR BENEFITS

AT BEGINNING OF YEAR

<u>3,166,522</u>

NET ASSETS AVAILABLE FOR BENEFITS

AT END OF YEAR

<u><u>\$ 4,046,568</u></u>

Xcellerex, Inc. 401(k) Plan

Notes to Financial Statements

December 31, 2011

Note 1 – Plan Description

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

General – Xcellerex, Inc. (the "Company") has established an employees' savings trust for the benefit of its employees. The Plan contains salary reduction features under Internal Revenue Code Section 401(k). The Plan is subject to the provisions of the Employee Retirement Income Act of 1974 (ERISA). All of the Company's capital stock was acquired by a subsidiary of General Electric Company in May of 2012. The Company continues as a legal entity and the plan administrator intends to freeze further contributions to the Plan.

Eligibility - All employees of the Company were eligible to participate commencing with the first day of the month following their hire date.

Participant Contributions - Participants may voluntarily contribute up to 90% of eligible compensation on a salary-reduction basis, not to exceed \$16,500 in 2011 and provisions are available to contribute additional and bonus deferrals. Participants age 50 and over may voluntarily contribute up to an additional \$5,500. Salary deferrals are not subject to federal income taxes until withdrawn from the Plan, in accordance with Section 401(a) of the Internal Revenue Code. Participants may also contribute amounts representing rollover distributions from other qualified defined benefit and defined contribution plans.

Employer Contributions - The Plan allows for discretionary matching contributions. During 2011, the Company contributed 33% of salary deferrals up to a maximum of 6% of compensation for all eligible employees.

Vesting - Participants are fully vested in their voluntary and employer contributions plus related earnings.

Participant Accounts - Each participant's account is credited with the participant's contribution, an allocation of the employer matching contribution, plan earnings (based on participants' investment election and account balance). Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled to is the benefit that can be provided from the participant's vested account balance.

Investment Options - All assets of the Plan are participant directed. Participants have the option of directing the investment of their contributions as well as any employer contributions into various mutual funds offered by the Plan.

Payment of Benefits - Upon termination of employment or attaining age 59-1/2, a participant may elect to receive the vested interest in his/her account in a lump-sum distribution or periodic installments. A participant, or his/her beneficiaries, may also receive benefits upon the death or disability of the participant.

Loan Provisions - Participants have the option to borrow from their funds up to 50% of their vested account balance (reduced by the highest outstanding loan balance in the preceding 12-month period). The minimum and maximum loan amounts are \$1,000 and \$50,000, respectively. Repayment terms may not exceed five years, or ten years for the purchase of a principal residence. The loans are secured by the balance in the participant's account and bear interest at prevailing rates determined by the plan administrator. Principal and interest payments with respect to the loans are credited solely to the borrowing participant's account. Principal and interest are paid by level amortization with payments to be made not less frequently than quarterly through payroll deduction.

Note 1 - Description of Plan (Cont.)

Hardship Distributions - Hardship distributions are permitted if the distribution is due to expenses incurred or necessary for unreimbursed medical care for the participant, spouse or dependents, purchase of a principal residence, payment of tuition, or to prevent eviction from, or foreclosure on, the participant's principal residence. The amount of the hardship withdrawal is subjected to certain limitations as specified in the Plan and the Internal Revenue Code. The minimum hardship distribution is \$500. The participant's voluntary contributions are suspended for six months after the receipt of a hardship distribution, with limitations on the dollar amount of deferrals in the following calendar year.

Note 2 - Summary of Significant Accounting Policies

Basis of Accounting - The accompanying financial statements are presented on the accrual basis of accounting, except payment of benefits are recorded upon distribution.

Accounting 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 could vary from the estimates that were used.

Fair Value Measurements - The Plan follows the provisions of the Financial Accounting Standards Board's (FASB) Accounting Standards Codification (ASC) Topic 820, "Fair Value Measurements and Disclosures", (ASC Topic 820), for assets and liabilities that are measured and recorded at fair value on a recurring basis, and to determine fair value disclosures. This standard defines fair value, establishes a framework for measuring fair value, and expands disclosures about fair value measurements.

Investment Valuation and Income Recognition - The Plan's investments are stated at fair value with investment appreciation or depreciation reflected in the statement of changes in net assets.

Net appreciation and depreciation include the Plan's gains and losses on investments bought and sold, as well as held during the year (see Notes 3 & 5).

Purchases and sales of securities are recorded on a trade-date basis, interest income is recorded on the accrual basis, and dividends are recorded on the ex-dividend date.

Administrative Expenses - The Plan's administrative expenses were paid by the Company. Recordkeeping fees are paid by the participants.

Payment of Benefits - Benefits are recorded when paid upon distribution.

Excess Contributions - Required payments to be made to active participants to return excess deferral contributions in order to satisfy the relevant nondiscrimination provisions of the Plan are recorded as liabilities in the year the contribution is received.

Evaluation of Subsequent Events - Management has evaluated subsequent events involving the Plan for potential recognition or disclosure in the accompanying financial statements. Subsequent events are events or transactions that occurred after December 31, 2011 up through October 11, 2012, the date the accompanying financial statements were available to be issued.

Note 3 – Information Prepared and Certified by the Plan's Trustee

The plan administrator has elected the method of compliance permitted by 29 CFR Section 2520.103-8 of the Department of Labor Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, as permitted under such election, the plan administrator instructed the auditors not to perform any auditing procedures with respect to the information certified by the Trustee, except for comparing such information to the related information included in the accompanying financial statements. The following information included in the accompanying financial statements and supplemental schedule was obtained from data that has been prepared and certified as to complete and accurate by the Trustee.

	<u>2011</u>	<u>2010</u>
Investments at fair value (See Note 6):		
Fidelity Fund	\$ 29,014	\$ 18,834
Fidelity Puritan	295,942	159,780
Fidelity Value Strategies	64,818	64,059
Fidelity Contrafund	331,621	185,877
Fidelity Equity Income	57,620	50,200
Fidelity Growth Company	356,648	209,060
Fidelity Investment Grade Bond	75,206	44,996
Fidelity Intermediate Bond	188,734	163,432
Fidelity Value	76,974	78,247
Fidelity OTC	113,732	102,191
Fidelity Overseas	57,476	85,942
Fidelity Real Estate Investment	56,678	12,750
Fidelity Blue Chip Growth	71,673	26,552
Fidelity Low Priced Stock	163,432	135,442
Fidelity Equity Income II	70,210	39,366
Fidelity Growth Strategies	41,635	46,002
Fidelity Diversified International	188,654	194,175
Fidelity Dividend Growth	61,527	21,485
Fidelity Export & Multinational	80,883	99,455
Fidelity Mid Cap Stock	77,873	100,038
Fidelity Large Cap Stock	14,114	6,068
Fidelity Freedom Income	62,247	58,588
Fidelity Freedom 2000	42,991	60,299
Fidelity Freedom 2010	178,140	201,286
Fidelity Freedom 2020	195,330	174,832
Fidelity Freedom 2030	69,403	23,045
Fidelity Small Cap Discovery	72,011	44,159
Fidelity Spartan Total Market Index	5,886	1,326
Fidelity Spartan Extended Mkt Index Inv	107,527	93,044
Fidelity Short Term Bond Fund	21,612	11,923
Fidelity Fifty	59,545	49,686
Fidelity Retire Money Market	207,831	151,655
Fidelity Freedom 2040	215,046	104,247
Fidelity Freedom 2005	1,689	27,276
Fidelity Freedom 2015	-	6,673
Fidelity Freedom 2025	26,167	6,684
Fidelity Freedom 2035	56,792	45,704
Fidelity Small Cap Value	98,307	48,235
Fidelity Freedom 2045	96,664	55,323
Fidelity Freedom 2050	30,775	51,156
	<u>\$4,022,427</u>	<u>\$3,059,092</u>
Notes receivable from participants	\$ 24,141	\$ 15,652
Investment income:		
Interest and dividends	\$ 97,573	
Net depreciation in fair value of investments	\$ (213,132)	

Note 4 – Exempt Transactions with a Party-In-Interest

Substantially all Plan investments are shares of mutual funds managed by Fidelity Investments. Fidelity Management Trust Company is the trustee as defined by the Plan and, therefore, these transactions qualify as exempt party-in-interest transactions.

Note 5 – Investments

The following investments represent 5% or more of the Plan's net assets at December 31:

	<u>2011</u>	<u>2010</u>
Fidelity Puritan	\$ 295,942	\$ 159,780
Fidelity Contrafund	\$ 331,621	\$ 185,877
Fidelity Growth Company	\$ 356,648	\$ 209,060
Fidelity Intermediate Bond	*	\$ 163,432
Fidelity Diversified International	*	\$ 194,175
Fidelity Freedom 2010	*	\$ 201,286
Fidelity Freedom 2020	*	\$ 174,832
Fidelity Retire Mmkt	\$ 207,831	*
Fidelity Freedom 2040	\$ 215,046	*

* Not a 5% investment in respective year.

During 2011, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) depreciated in value by \$213,132. All depreciation relates to mutual fund investments.

Note 6 – Fair Value Measurements

The Plan uses fair value measurements to record fair value adjustments to certain assets and liabilities and to determine fair value disclosures. Under generally accepted accounting principles, fair value is defined as 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. Fair value is best determined based upon quoted market prices. However, in many instances quoted market prices are not available, therefore fair values are based upon estimates using present value or other valuation techniques. Inputs to valuation techniques refer to the assumptions that market participants would use in pricing the asset or liability. Inputs may be observable, meaning those that reflect the assumptions market participants would use in pricing the asset or liability developed based on market data obtained from independent sources, or unobservable, meaning those that reflect the reporting entity's own assumptions about the assumptions market participants would use in pricing the asset or liability developed based on the best information available to management.

Generally accepted accounting principles establish a three-tier fair value hierarchy, which prioritizes the inputs used in measuring fair value, and gives the highest priority to quoted prices in active markets for identical assets and liabilities and the lowest priority to unobservable inputs. The fair value hierarchy is as follows:

Level 1 - Observable inputs such as quoted prices in active markets.

Level 2 - Observable inputs other than Level 1 inputs such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market.

Level 3 - Unobservable inputs that are supported by little or no market data and are significant to the fair value of the assets or liabilities. Level 3 inputs include fair value measurements whose value is determined using pricing models, discounted cash flow methodologies, or similar techniques, as well as significant judgment or estimation.

Note 6 – Fair Value Measurements (Cont.)

The following is a schedule of the Plan's assets at fair value, by category and level within the fair value hierarchy:

December 31, 2011	Level 1	Level 2	Level 3	Total
Shares of registered investment companies:				
Cash Funds	\$ 207,831	\$ -	\$ -	\$ 207,831
Foreign Large Blend	246,130	-	-	246,130
Intermediate-Term Bond	263,940	-	-	263,940
Large Blend	1,056,771	-	-	1,056,771
Large Growth	1,416,032	-	-	1,416,032
Large Value	127,830	-	-	127,830
Mid Value	64,818	-	-	64,818
Mid-Cap Blend	327,637	-	-	327,637
Mid-Cap Growth	119,508	-	-	119,508
Short-Term Bond	21,612	-	-	21,612
Small Blend	72,011	-	-	72,011
Small Value	98,307	-	-	98,307
	<u>\$ 4,022,427</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 4,022,427</u>

December 31, 2010	Level 1	Level 2	Level 3	Total
Shares of registered investment companies:				
Cash Funds	\$ 151,655	\$ -	\$ -	\$ 151,655
Foreign Large Blend	280,117	-	-	280,117
Intermediate-Term Bond	208,428	-	-	208,428
Large Blend	843,992	-	-	843,992
Large Growth	929,682	-	-	929,682
Large Value	89,566	-	-	89,566
Mid Value	64,059	-	-	64,059
Mid-Cap Blend	241,236	-	-	241,236
Mid-Cap Growth	146,040	-	-	146,040
Short-Term Bond	11,923	-	-	11,923
Small Blend	44,159	-	-	44,159
Small Value	48,235	-	-	48,235
	<u>\$ 3,059,092</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 3,059,092</u>

The level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. There have been no changes in the methodologies used during 2011. The following is a description of the valuation methodologies used for investments measured at fair value, including the general classification of such instruments pursuant to the valuation hierarchy.

Shares of Registered Investment Companies - These investments (mutual funds) are public investment vehicles valued using the Net Asset Value (NAV) provided by the administrator of the fund. The NAV is a quoted price in an active market and is classified within Level 1 of the valuation hierarchy.

Note 7 – Income Tax Status

The Plan Sponsor has adopted a volume submitter defined contribution plan with a cash or deferral arrangement which received a favorable opinion letter from the Internal Revenue Service dated March 31, 2008. The Plan Sponsor believes that the Plan has been operated in compliance with the applicable requirements of the Internal Revenue Code and that, therefore, the Plan is exempt from federal income taxes.

The plan administrator believes the Plan is no longer subject to income tax examination for years prior to 2008.

Note 8 – Investment Risks and Uncertainties

The Plan invests in mutual funds, which are exposed to various risks, such as interest rate, credit risk and overall market risk. Due to the level of risk associated with these investment securities, and the level of uncertainty related to changes in the value of investment securities, it is at least reasonably possible that changes in risks in the near term would materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

Note 9 – 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 a complete or partial Plan termination, participants will become 100% vested in their accounts and participants' accounts will be distributed to participants in accordance with the Plan's provision

Note 10 – Reconciliation of Financial Statements to Form 5500

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

	<u>2011</u>	<u>2010</u>
Net assets available for benefits per the financial statements	\$ 4,046,568	\$ 3,166,522
Contributions receivable	<u>-</u>	<u>(91,778)</u>
Net assets available for benefits per Schedule H of Form 5500	<u>\$ 4,046,568</u>	<u>\$ 3,074,744</u>

The following is a reconciliation of contributions per the financial statements to Form 5500 at December 31, 2011:

Contributions per the financial statements	\$ 1,339,186
Decrease in contributions receivable	91,778
Contributions per Schedule H of Form 5500	<u><u>\$ 1,430,964</u></u>

SUPPLEMENTAL SCHEDULE

Xcellerex, Inc. 401(k) Plan

Schedule of Plan Assets (Held at End of Year) – Schedule H, Item 4i

E.I.N. 90-0269663

Plan No.: 001

December 31, 2011

(a)	(b)	(c)	(d)	(e)
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* Represents a party-in-interest to the Plan.

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