FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPR	OVAL
OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	~)												
	nd Address o JX ROBE	f Reporting Person* RT					cker or Trading S SCIENCES I	•	_x_	Director	(Check		e) Owner	
3838 WE		(First) XWAY BLVD	(Middle)	3. Date 04/19/		Trans	action (Month/D	ay/Year)		Officer (give	title below)	Othe	r (specify below	w)
SALT L	AKE CITY	(Street) Y, UT 84120		4. If An 05/04/		Date (Original Filed(Mo	nth/Day/Year)	_X_ Fo	orm filed by C	one Reporting P	Filing(Check A erson eporting Person	pplicable Line	:)
(Cit		(State)	(Zip)			Tal	ble I - Non-Deri	vative Securities	Acquired, I	Disposed (of, or Benefi	icially Owner	i	
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Yea	Execu r) any	Deemed ation Date, th/Day/Ye	if Co (In	de (Astr. 8) (I	Securities Acqui a) or Disposed of nstr. 3, 4 and 5) (A) or mount (D)	Owned Transa		curities Ben ng Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
Reminder:	Report on a	•					Dorcom				informatio	an aantai		
Reminder:	Report on a s		Table II				in this f a curre	who respond orm are not rea itly valid OMB	quired to re control nui	espond u mber.	information	on containe form displa	d SEC /s	1474 (9-02)
1. Title of Derivative Security (Instr. 3)		3. Transaction Date	3A. Deemed Execution Date, if	(e.g., p 4. Transac Code	tition of Deriv Secu Acqu (A) C Disp of (E	mber rative rities ired r osed) . 3, 4,	in this f a curre	orm are not really valid OMB sed of, or Benefit vertible securit able and	quired to re control nui	espond u mber. ed Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	f 10. Ownersl Form of Derivati Security Direct (l or Indire	11. Natur of Indire Beneficia Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	3A. Deemed Execution Date, if	(e.g., p 4. Transac Code	tition of Deriv Secu Acqu (A) c Disp of (E (Insti	mber rative rities ired r osed) . 3, 4,	in this facurred Acquired, Dispoints, options, co 6. Date Exercis Expiration Dat (Month/Day/Y) Date Exercisable	orm are not really valid OMB sed of, or Benefit vertible securit able and	quired to recontrol numbers icially Owneries) 7. Title and of Underlying Securities	espond u mber. ed Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(f 10. Ownersl Form of Derivati Security Direct (l or Indirects)	11. Natur of Indire Beneficia Ownersh (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
AUCIAUX ROBERT 3838 WEST PARKWAY BLVD SALT LAKE CITY, UT 84120	X					

Signatures

Gilbert A. Fuller, as attorney in fact	05/23/2007
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Stock options vest in four equal quarterly installments of 25%.
- (2) The number of shares previously reported was 4587. This has been adjusted to reflect the correct number of shares issued.

The number previously reported reflected only the number of shares issued on April 19th, 2007. The amended number reflects all stock options outstanding for the reporting (3) person.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.