Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), and 6058(a) of the Internal Revenue Code (the Code).

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

OMB Nos. 1210-0110
1210-0089

2009

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
BK GLOBAL INC 401K PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 09/01/1999

2a Plan sponsor's name and address (employer, if for a single-employer plan)
(Address should include room or suite no.)
BK GLOBAL INC

5301 SOUTH WESTMORELAND ROAD
DALLAS, TX 75237-1805

2b Employer Identification Number (EIN)
75-2752015

2c Sponsor's telephone number
469-221-4126

2d Business code (see instructions)
453990

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	08/26/2010	CYNDY WALTERS
	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

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

BK GLOBAL INC

5301 SOUTH WESTMORELAND ROAD
DALLAS, TX 75237-1805

3b Administrator's EIN
75-2752015

3c Administrator's telephone number
469-221-4126

4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:

a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	252
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**	252
b	Retired or separated participants receiving benefits	**6b**	1
c	Other retired or separated participants entitled to future benefits	**6c**	11
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	264
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	264
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	128
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:

2E 2F 2G 2J 2K 3D 3H

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)	X	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)	X	Trust
(4)		General assets of the sponsor

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

a Pension Schedules

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

b General Schedules

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

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2009** **This Form is Open to Public Inspection.**

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

A Name of plan
BK GLOBAL INC 401K PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
BK GLOBAL INC

D Employer Identification Number (EIN)
75-2752015

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

HARTFORD RETIREMENT SERVICES LLC

26-1589907

(b) Enter name and EIN or address of person who provided you disclosure 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)

HARTFORD RETIREMENT SERVICES LLC

26-1589907

(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?
15 19 25 37 50 52 59 60 62 63 64	0	840	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [X]

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

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

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

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

(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

(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

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(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

2009

This Form is Open to Public Inspection

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

A Name of plan
BK GLOBAL INC 401K PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
BK GLOBAL INC

D Employer Identification Number (EIN)
75-2752015

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)	28093	0
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(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)	49599	41147
(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)	1427871	2107660
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	1505563	2148807
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j	0	
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	1505563	2148807

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)	0	
	(B) Participants	2a(1)(B)	354315	
	(C) Others (including rollovers)	2a(1)(C)	8560	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		362875
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)	3581	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		3581
	(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)	21534	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		21534
	(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)		0

		(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)		0
(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)		395621
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		783611
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	119816	
(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)		119816
f Corrective distributions (see instructions)	2f		19711
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)	840	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		840
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		140367
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		643244
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) [X] Disclaimer (4) [ ] Adverse

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

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

(1) Name: MIDDLETON, BURNS & DAVIS, PC (2) EIN: 75-1941702

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a	Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		200000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

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

2009

This Form is Open to Public Inspection.

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

A Name of plan
BK GLOBAL INC 401K PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
BK GLOBAL INC

D Employer Identification Number (EIN)
75-2752015

Part I Distributions

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

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

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

EIN(s): 06-0974148 _____

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

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

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

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

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

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

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

6 **a** Enter the minimum required contribution for this plan year **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

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):

BK GLOBAL, INC.
401(k) PROFIT SHARING PLAN

Report on
Financial Statements
For the Years Ended
December 31, 2009 and 2008

MIDDLETON BURNS & DAVIS, PC
SINCE 1948

CERTIFIED PUBLIC
ACCOUNTANTS
AND CONSULTANTS

KARL V. SPRINGER
PAUL A. PARKER
PETER G. ROBBINS
RANDY D. NETEK

RETIRED
ALVIN E. BURNS
DANIEL M. DAVIS
ROBIN E. LONG

INDEPENDENT AUDITORS' REPORT

To the Board of Directors
BK Global, Inc. 401(k) Profit Sharing Plan
Dallas, Texas

We were engaged to audit the accompanying statements of net assets available for benefits of BK Global, Inc. 401(k) Profit Sharing Plan as of December 31, 2009 and 2008, and the related statements of changes in net assets available for benefits and supplemental schedule for the years then ended. These financial statements and supplemental schedules 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 which was certified by Western Reserve Life Assurance Co. of Ohio, MFS Heritage Trust Company and Reliance Trust Company, except for comparing the information with the related information included in the 2009 and 2008 financial statements and the supplemental schedule. We have been informed by the plan administrator that Western Reserve Life Assurance Co. of Ohio, MFS Heritage Trust Company and Reliance Trust Company hold the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from Western Reserve Life Assurance Co. of Ohio, MFS Heritage Trust Company and Reliance Trust Company as of and for the years ended December 31, 2009 and 2008, that the information provided to the plan administrator is complete and accurate.

Because of the significance of the information in the Plan's financial statements that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedule as of or for the years ended December 31, 2009 and 2008. 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 Western Reserve Life Assurance Co. of Ohio, MFS Heritage Trust Company and Reliance Trust Company, 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.

Middleton Burns & Davis, P.C.

Certified Public Accountants

August 23, 2010

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BK GLOBAL, INC. 401(k) PROFIT SHARING PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2009 AND 2008

	2009	2008
ASSETS:		
CONTRIBUTIONS RECEIVABLE	$ 0	$ 28,093
INVESTMENTS:		
Registered investment companies	2,107,660	1,427,871
Participant loans	41,147	49,599
Total investments	2,148,807	1,477,470
Total assets	2,148,807	1,505,563
LIABILITIES:		
Excess contributions payable	30,465	30,968
NET ASSETS AVAILABLE FOR BENEFITS	$ 2,118,342	$ 1,474,595

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

BK GLOBAL, INC. 401(k) PROFIT SHARING PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEARS ENDED DECEMBER 31, 2009 AND 2008

	2009	2008
ADDITIONS:		
Investment income:		
Net appreciation (depreciation) and earnings on registered investment companies	$ 417,156	$ (791,501)
Loan interest	3,581	3,912
Total investment income	420,737	(787,589)
Contributions:		
Employee deferral	335,107	358,588
Rollovers	8,559	2,983
Total contributions	343,666	361,571
Total additions	764,403	(426,018)
DEDUCTIONS:		
Distributions to participants	120,256	103,522
Administrative expenses	400	874
Total deductions	120,656	104,396
Net increase (decrease)	643,747	(530,414)
NET ASSETS AVAILABLE FOR BENEFITS:		
Beginning of year	1,474,595	2,005,009
End of year	$ 2,118,342	$ 1,474,595

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

BK GLOBAL, INC. 401(k) PROFIT SHARING PLAN

NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

NOTE 1 - DESCRIPTION OF THE PLAN:

The following brief description of the BK Global, Inc. 401(k) Profit Sharing Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan agreement for more complete information.

General

The Plan is a defined contribution plan covering all eligible employees of BK Global, Inc. (the Company). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Eligibility

In order to be eligible, an employee must be at least twenty-one years of age and complete 333 hours of service within four months from the eligible employee's employment commencement date, but in no event more than one year of service. Employees meeting these eligibility requirements are allowed to enroll in the Plan. Effective date of participation will be the first day of the month coinciding with or following the date on which the Employee completes the eligibility conditions.

Contributions

Each eligible participant may elect to make salary reduction contributions to the Plan within the limits established by the IRS.

The Company may make qualified non-elective contributions on a nondiscriminatory basis.

Participant Accounts

Each participant's account is credited with the participant's contributions, rollover contributions, account earnings and an allocation of the Company's contributions based upon the relation of the participant's compensation to total compensation for the Plan year. There were no Company contributions for the years ended December 31, 2009 and 2008.

Participant Loans

Participants may borrow from their fund accounts up to a maximum equal to the lesser of $50,000 or 50% of their account balance, with a minimum borrowing amount of $1,000. The loans are secured by the balance in the participant's account and bear interest at rates that range from 4.25% to 9.25%, which are commensurate with local prevailing rates as determined quarterly by the plan administrator.

Forfeitures

Participants separating from the plan and receiving a distribution will forfeit their non-vested portion of employer contributions at the Plan year end immediately following the date of payment of the vested portion of the account. There were no amounts forfeited during the years ended December 31, 2009 and 2008.

BK GLOBAL, INC. 401(k) PROFIT SHARING PLAN

NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

NOTE 1 - DESCRIPTION OF THE PLAN (CONTINUED):

Vesting

Participants are immediately vested in their contributions and earnings thereon. Participants are vested in Company's contributions after completing years of service as follows:

Years of Service	Vesting Percentage
0-1	0%
2	20%
3	40%
4	60%
5	80%
6	100%

Payment of Benefits

On termination of service, participants receive their vested account balance in a lump-sum distribution as soon as administratively feasible, generally sent by Reliance Trust Company.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

Investment Valuation & Income Recognition

The financial statements of the Plan are prepared under the accrual basis of accounting. Investments in registered investment companies are carried at estimated fair value as quoted by Reliance Trust Company. The change in the difference between current value and the cost of the investment is reflected in the statements of changes in net assets available for benefits and is included in net appreciation (depreciation) and earnings on investments.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amount of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Payment of Benefits

Benefits are recorded when paid.

BK GLOBAL, INC. 401(k) PROFIT SHARING PLAN

NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

NOTE 3 - INFORMATION PREPARED AND CERTIFIED BY TRUSTEE:

	2009			2008		
	Number of Shares	Fair Value		Number of Shares	Fair Value	
Registered investment companies:						
MFS Cash Reserve R2	152,583	$ 152,730	*	171,627	$ 171,713	*
Davis New York Venture R	480	14,900		331	7,844	
American Funds Growth Fund R2	26,312	702,795	*	25,485	510,968	*
Franklin Income R	53,103	108,862	*	46,670	77,006	*
Templeton Developing Markets R	1,930	41,897		967	12,277	
Oppenheimer Main St Small Cap N	879	14,176		650	7,687	
Thornburg International Value R3	11,264	279,914	*	10,170	194,141	*
Columbia Mid Cap Core R	19,703	269,541	*	18,080	188,394	*
BlackRock Large Cap Value R	9,412	121,229	*	11,141	127,011	*
Oppenheimer Real Estate N	1,739	25,871		211	2,472	
T. Rowe Price Equity-income R	97	2,030		43	733	
Franklin U.S. Government Secs R	12,180	80,756		1,532	10,127	
Oppenheimer International Bond N	8,397	53,574		6,880	40,595	
MS MFS Lifetime retirement income R2	6,516	66,857		1,506	13,008	
MFS Lifetime 2010	2,293	24,700		908	8,223	
MFS Lifetime 2020	3,241	31,473		2,128	16,658	
MFS Lifetime 2030	5,797	52,521		2,501	17,384	
MFS Lifetime 2040	7,172	63,834		3,790	21,630	
Total registered investment companies:		2,107,660			1,427,871	
Total fair value of investments		$ 2,107,660			$ 1,427,871	

* - Assets representing 5% or more of net assets available for benefit.

BK GLOBAL, INC. 401(k) PROFIT SHARING PLAN

NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

NOTE 4 - PLAN TERMINATION:

Although it has not expressed any intent to do so, the Company has the right under the Plan to terminate the Plan subject to the provisions set forth in ERISA. In the event of Plan termination, participants will become 100% vested in the employer contributions allocated to their accounts.

NOTE 5 - STATUS OF PLAN:

During 2008 the Plan was amended to adopt the MFS Retirement Services Prototype Standardized Profit Sharing Plan, which the Internal Revenue Service stated, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan administrator and trustees believe that the Plan is currently designed and operated in compliance with the applicable requirements of the Internal Revenue Code. Therefore, they believe that the Plan is qualified as of December 31, 2009.

NOTE 6 - FUNDING OF PLAN:

Salary reduction contributions are based on a percentage of gross salary as elected by the employee on their Plan enrollment form. The contributions are required to be submitted by the Company on a monthly basis.

NOTE 7 - PLAN EXPENSES:

Plan administration expenses and qualification expenses are to be paid by the Plan unless the Company pays the expenses. The Company paid Plan expenses of approximately $21,954 and $21,454 for the years ended December 31, 2009 and 2008, respectively.

NOTE 8 - HARDSHIP WITHDRAWALS:

The plan permits participant hardship withdrawals. Hardship withdrawals are allowed to the full extent allowable under law. The Plan also allows hardship distributions to participants who have not separated from service. The Plan made no hardship distributions for the years ended December 31, 2009 and 2008.

NOTE 9 - NET APPRECIATION OR DEPRECIATION IN FAIR VALUE OF INVESTMENTS:

The Plan recognizes all income of the investments in registered investment companies as net appreciation or depreciation in fair value. The Plan’s net appreciation in fair value of investments for the year ended December 31, 2009, totaled $417,156. The Plan's net depreciation in fair value of investments for the year ended December 31, 2008, totaled $791,501.

NOTE 10 - PLAN TERMINATIONS:

Some participants have elected to withdraw from the plan but have not been paid their balances. The amounts allocated to these previous participants totaled $78,557 and $42,389 as of December 31, 2009 and 2008, respectively.

BK GLOBAL, INC. 401(k) PROFIT SHARING PLAN

NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

NOTE 11 - RECONCILIATION OF SCHEDULE H FORM 5500:

Differences between accounting methods used for the Schedule H of Form 5500 and accounting principals generally accepted in the United States of America, has required that a reconciliation be provided to agree to amounts reported on the Plan's Form 5500.

The following is a reconciliation of net assets available for benefits per the financial statements to Form 5500 at December 31, 2009 and 2008:

	2009	2008
Net assets available for benefits per the financial statements	$ 2,118,342	$ 1,474,595
Add: Excess contributions payable	30,465	30,968
Net assets available for benefits per Form 5500	$ 2,148,807	$ 1,505,563

The following is a reconciliation of contributions per the financial statements to Form 5500 at December 31, 2009 and 2008:

	2009	2008
Participant contributions per the financial statements	$ 343,666	$ 361,571
Add: excess contributions payable	30,465	30,968
Loss on investment of excess contributions	(11,258)	
Participant contributions per Form 5500	$ 362,873	$ 392,539

NOTE 12 - SUBSEQUENT EVENTS:

In preparing these financial statements, the Plan has evaluated events and transactions for potential recognition or disclosure through August 23, 2010, the date which the financial statements were available to be issued.

SUPPLEMENTAL SCHEDULE

BK GLOBAL, INC. 401(k) PROFIT SHARING PLAN

75-2752015
PLAN 001
SCHEDULE H, LINE 4i
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR
DECEMBER 31, 2009

(a)	(b) Identity of Issue	(c) Description of Investment	(d) Current Cost	(e) Current Value
REGISTERED INVESTMENT COMPANIES:				
*	MFS Investment Management	MFS Cash Reserve R2 152,583 shares		$ 152,730
	Davis Selected Advisors	Davis New York Venture R 480 shares		14,900
	American Funds	American Funds Growth Fund R2 26,312 shares		702,795
	Franklin Templeton Investments	Franklin Income R 53,103 shares		108,862
	Franklin Templeton Investments	Templeton Developing Markets R 1,930 shares		41,897
	Oppenheimer Funds	Oppenheimer Main St Small Cap N 879 shares		14,176
	Thornburg Investment Management	Thornburg International Value R3 11,264 shares		279,914
	Columbia Management	Columbia Mid Cap Core R 19,703 shares		269,541
	BlackRock, Inc.	BlackRock Large Cap Value R 9,412 shares		121,229
	Oppenheimer Funds	Oppenheimer Real Estate N 1,739 shares		25,871
	T. Rowe Price	T. Rowe Price Equity-income R 97 shares		2,030
	Franklin Templeton Investments	Franklin U.S. Government Secs R 12,180 shares		80,756
	Oppenheimer Funds	Oppenheimer International Bond N 8,397 shares		53,574
*	MFS Investment Management	MS MFS Lifetime retirement income R2 6,516 shares		66,857
*	MFS Investment Management	MFS Lifetime 2010 2,293 shares		24,700

BK GLOBAL, INC. 401(k) PROFIT SHARING PLAN

75-2752015
PLAN 001
SCHEDULE H, LINE 4i
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR
DECEMBER 31, 2009

(a)	(b) Identity of Issue	(c) Description of Investment	(d) Current Cost	(e) Current Value
*	MFS Investment Management	MFS Lifetime 2020 3,241 shares		$ 31,473
*	MFS Investment Management	MFS Lifetime 2030 5,797 shares		52,521
*	MFS Investment Management	MFS Lifetime 2040 7,172 shares		63,834
	Total registered investment companies			2,107,660
NOTES RECEIVABLE:				
*	Participants	Notes Receivable with interest rates of 4.25% to 9.25%		41,147
Total investments held at year end				$ 2,148,807

Note: Column (d) is blank as all investments are participant directed.

BK GLOBAL, INC.
401(k) PROFIT SHARING PLAN

Report on
Financial Statements
For the Years Ended
December 31, 2009 and 2008

MIDDLETON BURNS & DAVIS, PC
SINCE 1948

CERTIFIED PUBLIC
ACCOUNTANTS
AND CONSULTANTS

KARL V. SPRINGER
PAUL A. PARKER
PETER G. ROBBINS
RANDY D. NETEK

RETIRED
ALVIN E. BURNS
DANIEL M. DAVIS
ROBIN E. LONG

INDEPENDENT AUDITORS' REPORT

To the Board of Directors
BK Global, Inc. 401(k) Profit Sharing Plan
Dallas, Texas

We were engaged to audit the accompanying statements of net assets available for benefits of BK Global, Inc. 401(k) Profit Sharing Plan as of December 31, 2009 and 2008, and the related statements of changes in net assets available for benefits and supplemental schedule for the years then ended. These financial statements and supplemental schedules 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 which was certified by Western Reserve Life Assurance Co. of Ohio, MFS Heritage Trust Company and Reliance Trust Company, except for comparing the information with the related information included in the 2009 and 2008 financial statements and the supplemental schedule. We have been informed by the plan administrator that Western Reserve Life Assurance Co. of Ohio, MFS Heritage Trust Company and Reliance Trust Company hold the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from Western Reserve Life Assurance Co. of Ohio, MFS Heritage Trust Company and Reliance Trust Company as of and for the years ended December 31, 2009 and 2008, that the information provided to the plan administrator is complete and accurate.

Because of the significance of the information in the Plan's financial statements that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedule as of or for the years ended December 31, 2009 and 2008. 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 Western Reserve Life Assurance Co. of Ohio, MFS Heritage Trust Company and Reliance Trust Company, 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.

Middleton Burns & Davis, P.C.

Certified Public Accountants

August 23, 2010

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BK GLOBAL, INC. 401(k) PROFIT SHARING PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2009 AND 2008

	2009	2008
ASSETS:		
CONTRIBUTIONS RECEIVABLE	$ 0	$ 28,093
INVESTMENTS:		
Registered investment companies	2,107,660	1,427,871
Participant loans	41,147	49,599
Total investments	2,148,807	1,477,470
Total assets	2,148,807	1,505,563
LIABILITIES:		
Excess contributions payable	30,465	30,968
NET ASSETS AVAILABLE FOR BENEFITS	$ 2,118,342	$ 1,474,595

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

BK GLOBAL, INC. 401(k) PROFIT SHARING PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEARS ENDED DECEMBER 31, 2009 AND 2008

	2009	2008
ADDITIONS:		
Investment income:		
Net appreciation (depreciation) and earnings on registered investment companies	$ 417,156	$ (791,501)
Loan interest	3,581	3,912
Total investment income	420,737	(787,589)
Contributions:		
Employee deferral	335,107	358,588
Rollovers	8,559	2,983
Total contributions	343,666	361,571
Total additions	764,403	(426,018)
DEDUCTIONS:		
Distributions to participants	120,256	103,522
Administrative expenses	400	874
Total deductions	120,656	104,396
Net increase (decrease)	643,747	(530,414)
NET ASSETS AVAILABLE FOR BENEFITS:		
Beginning of year	1,474,595	2,005,009
End of year	$ 2,118,342	$ 1,474,595

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

BK GLOBAL, INC. 401(k) PROFIT SHARING PLAN

NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

NOTE 1 - DESCRIPTION OF THE PLAN:

The following brief description of the BK Global, Inc. 401(k) Profit Sharing Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan agreement for more complete information.

General

The Plan is a defined contribution plan covering all eligible employees of BK Global, Inc. (the Company). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Eligibility

In order to be eligible, an employee must be at least twenty-one years of age and complete 333 hours of service within four months from the eligible employee's employment commencement date, but in no event more than one year of service. Employees meeting these eligibility requirements are allowed to enroll in the Plan. Effective date of participation will be the first day of the month coinciding with or following the date on which the Employee completes the eligibility conditions.

Contributions

Each eligible participant may elect to make salary reduction contributions to the Plan within the limits established by the IRS.

The Company may make qualified non-elective contributions on a nondiscriminatory basis.

Participant Accounts

Each participant's account is credited with the participant's contributions, rollover contributions, account earnings and an allocation of the Company's contributions based upon the relation of the participant's compensation to total compensation for the Plan year. There were no Company contributions for the years ended December 31, 2009 and 2008.

Participant Loans

Participants may borrow from their fund accounts up to a maximum equal to the lesser of $50,000 or 50% of their account balance, with a minimum borrowing amount of $1,000. The loans are secured by the balance in the participant's account and bear interest at rates that range from 4.25% to 9.25%, which are commensurate with local prevailing rates as determined quarterly by the plan administrator.

Forfeitures

Participants separating from the plan and receiving a distribution will forfeit their non-vested portion of employer contributions at the Plan year end immediately following the date of payment of the vested portion of the account. There were no amounts forfeited during the years ended December 31, 2009 and 2008.

BK GLOBAL, INC. 401(k) PROFIT SHARING PLAN

NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

NOTE 1 - DESCRIPTION OF THE PLAN (CONTINUED):

Vesting

Participants are immediately vested in their contributions and earnings thereon. Participants are vested in Company's contributions after completing years of service as follows:

Years of Service	Vesting Percentage
0-1	0%
2	20%
3	40%
4	60%
5	80%
6	100%

Payment of Benefits

On termination of service, participants receive their vested account balance in a lump-sum distribution as soon as administratively feasible, generally sent by Reliance Trust Company.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

Investment Valuation & Income Recognition

The financial statements of the Plan are prepared under the accrual basis of accounting. Investments in registered investment companies are carried at estimated fair value as quoted by Reliance Trust Company. The change in the difference between current value and the cost of the investment is reflected in the statements of changes in net assets available for benefits and is included in net appreciation (depreciation) and earnings on investments.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amount of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Payment of Benefits

Benefits are recorded when paid.

BK GLOBAL, INC. 401(k) PROFIT SHARING PLAN

NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

NOTE 3 - INFORMATION PREPARED AND CERTIFIED BY TRUSTEE:

	2009			2008		
	Number of Shares	Fair Value		Number of Shares	Fair Value	
Registered investment companies:						
MFS Cash Reserve R2	152,583	$ 152,730	*	171,627	$ 171,713	*
Davis New York Venture R	480	14,900		331	7,844	
American Funds Growth Fund R2	26,312	702,795	*	25,485	510,968	*
Franklin Income R	53,103	108,862	*	46,670	77,006	*
Templeton Developing Markets R	1,930	41,897		967	12,277	
Oppenheimer Main St Small Cap N	879	14,176		650	7,687	
Thornburg International Value R3	11,264	279,914	*	10,170	194,141	*
Columbia Mid Cap Core R	19,703	269,541	*	18,080	188,394	*
BlackRock Large Cap Value R	9,412	121,229	*	11,141	127,011	*
Oppenheimer Real Estate N	1,739	25,871		211	2,472	
T. Rowe Price Equity-income R	97	2,030		43	733	
Franklin U.S. Government Secs R	12,180	80,756		1,532	10,127	
Oppenheimer International Bond N	8,397	53,574		6,880	40,595	
MS MFS Lifetime retirement income R2	6,516	66,857		1,506	13,008	
MFS Lifetime 2010	2,293	24,700		908	8,223	
MFS Lifetime 2020	3,241	31,473		2,128	16,658	
MFS Lifetime 2030	5,797	52,521		2,501	17,384	
MFS Lifetime 2040	7,172	63,834		3,790	21,630	
Total registered investment companies:		2,107,660			1,427,871	
Total fair value of investments		$ 2,107,660			$ 1,427,871	

* - Assets representing 5% or more of net assets available for benefit.

BK GLOBAL, INC. 401(k) PROFIT SHARING PLAN

NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

NOTE 4 - PLAN TERMINATION:

Although it has not expressed any intent to do so, the Company has the right under the Plan to terminate the Plan subject to the provisions set forth in ERISA. In the event of Plan termination, participants will become 100% vested in the employer contributions allocated to their accounts.

NOTE 5 - STATUS OF PLAN:

During 2008 the Plan was amended to adopt the MFS Retirement Services Prototype Standardized Profit Sharing Plan, which the Internal Revenue Service stated, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan administrator and trustees believe that the Plan is currently designed and operated in compliance with the applicable requirements of the Internal Revenue Code. Therefore, they believe that the Plan is qualified as of December 31, 2009.

NOTE 6 - FUNDING OF PLAN:

Salary reduction contributions are based on a percentage of gross salary as elected by the employee on their Plan enrollment form. The contributions are required to be submitted by the Company on a monthly basis.

NOTE 7 - PLAN EXPENSES:

Plan administration expenses and qualification expenses are to be paid by the Plan unless the Company pays the expenses. The Company paid Plan expenses of approximately $21,954 and $21,454 for the years ended December 31, 2009 and 2008, respectively.

NOTE 8 - HARDSHIP WITHDRAWALS:

The plan permits participant hardship withdrawals. Hardship withdrawals are allowed to the full extent allowable under law. The Plan also allows hardship distributions to participants who have not separated from service. The Plan made no hardship distributions for the years ended December 31, 2009 and 2008.

NOTE 9 - NET APPRECIATION OR DEPRECIATION IN FAIR VALUE OF INVESTMENTS:

The Plan recognizes all income of the investments in registered investment companies as net appreciation or depreciation in fair value. The Plan’s net appreciation in fair value of investments for the year ended December 31, 2009, totaled $417,156. The Plan's net depreciation in fair value of investments for the year ended December 31, 2008, totaled $791,501.

NOTE 10 - PLAN TERMINATIONS:

Some participants have elected to withdraw from the plan but have not been paid their balances. The amounts allocated to these previous participants totaled $78,557 and $42,389 as of December 31, 2009 and 2008, respectively.

BK GLOBAL, INC. 401(k) PROFIT SHARING PLAN

NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

NOTE 11 - RECONCILIATION OF SCHEDULE H FORM 5500:

Differences between accounting methods used for the Schedule H of Form 5500 and accounting principals generally accepted in the United States of America, has required that a reconciliation be provided to agree to amounts reported on the Plan's Form 5500.

The following is a reconciliation of net assets available for benefits per the financial statements to Form 5500 at December 31, 2009 and 2008:

	2009	2008
Net assets available for benefits per the financial statements	$ 2,118,342	$ 1,474,595
Add: Excess contributions payable	30,465	30,968
Net assets available for benefits per Form 5500	$ 2,148,807	$ 1,505,563

The following is a reconciliation of contributions per the financial statements to Form 5500 at December 31, 2009 and 2008:

	2009	2008
Participant contributions per the financial statements	$ 343,666	$ 361,571
Add: excess contributions payable	30,465	30,968
Loss on investment of excess contributions	(11,258)	
Participant contributions per Form 5500	$ 362,873	$ 392,539

NOTE 12 - SUBSEQUENT EVENTS:

In preparing these financial statements, the Plan has evaluated events and transactions for potential recognition or disclosure through August 23, 2010, the date which the financial statements were available to be issued.

SUPPLEMENTAL SCHEDULE

BK GLOBAL, INC. 401(k) PROFIT SHARING PLAN

75-2752015
PLAN 001
SCHEDULE H, LINE 4i
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR
DECEMBER 31, 2009

(a)	(b) Identity of Issue	(c) Description of Investment	(d) Current Cost	(e) Current Value
REGISTERED INVESTMENT COMPANIES:				
*	MFS Investment Management	MFS Cash Reserve R2 152,583 shares		$ 152,730
	Davis Selected Advisors	Davis New York Venture R 480 shares		14,900
	American Funds	American Funds Growth Fund R2 26,312 shares		702,795
	Franklin Templeton Investments	Franklin Income R 53,103 shares		108,862
	Franklin Templeton Investments	Templeton Developing Markets R 1,930 shares		41,897
	Oppenheimer Funds	Oppenheimer Main St Small Cap N 879 shares		14,176
	Thornburg Investment Management	Thornburg International Value R3 11,264 shares		279,914
	Columbia Management	Columbia Mid Cap Core R 19,703 shares		269,541
	BlackRock, Inc.	BlackRock Large Cap Value R 9,412 shares		121,229
	Oppenheimer Funds	Oppenheimer Real Estate N 1,739 shares		25,871
	T. Rowe Price	T. Rowe Price Equity-income R 97 shares		2,030
	Franklin Templeton Investments	Franklin U.S. Government Secs R 12,180 shares		80,756
	Oppenheimer Funds	Oppenheimer International Bond N 8,397 shares		53,574
*	MFS Investment Management	MS MFS Lifetime retirement income R2 6,516 shares		66,857
*	MFS Investment Management	MFS Lifetime 2010 2,293 shares		24,700

BK GLOBAL, INC. 401(k) PROFIT SHARING PLAN

75-2752015
PLAN 001
SCHEDULE H, LINE 4i
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR
DECEMBER 31, 2009

(a)	(b) Identity of Issue	(c) Description of Investment	(d) Current Cost	(e) Current Value
*	MFS Investment Management	MFS Lifetime 2020 3,241 shares		$ 31,473
*	MFS Investment Management	MFS Lifetime 2030 5,797 shares		52,521
*	MFS Investment Management	MFS Lifetime 2040 7,172 shares		63,834
	Total registered investment companies			2,107,660
NOTES RECEIVABLE:				
*	Participants	Notes Receivable with interest rates of 4.25% to 9.25%		41,147
Total investments held at year end				$ 2,148,807

Note: Column (d) is blank as all investments are participant directed.