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

2010

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

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
SYB CONSTRUCTION CO., INC. 401(K) PLAN AND TRUST

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 10/01/1997

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

421 COMPTON
IRVING, TX 75061

2b Employer Identification Number (EIN)
75-2053952

2c Sponsor's telephone number
972-399-1066

2d Business code (see instructions)
237990

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.	10/13/2011	SHIRLEY BENNETT
	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")
SYB CONSTRUCTION COMPANY INC.

421 COMPTON
IRVING, TX 75061

3b Administrator's EIN
75-2053952

3c Administrator's telephone number
972-399-1066

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**	137
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**	130
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	6
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	136
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	136
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	59
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 2J 2K 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)	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)		0	**A** (Insurance Information)
(4)			**C** (Service Provider Information)
(5)			**D** (DFE/Participating Plan Information)
(6)			**G** (Financial Transaction Schedules)

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

2010

This Form is Open to Public Inspection

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

A Name of plan
SYB CONSTRUCTION CO., INC. 401(K) PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
SYB CONSTRUCTION COMPANY INC.

D Employer Identification Number (EIN)
75-2053952

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	2385	484
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	30000	0
(2) Participant contributions	1b(2)	3006	1186
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	325118	528830
(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)	98411	132913
(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)		
(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)	376077	262083
(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	834997	925496
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		54
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	54
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	834997	925442

Part II Income and Expense Statement

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

	Income		(a) Amount	(b) Total
a	**Contributions:**			
	(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)		
	(B) Participants	2a(1)(B)	125392	
	(C) Others (including rollovers)	2a(1)(C)		
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		125392
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	88	
	(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)		
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		88
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)	907	
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	4726	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		5633
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	146475	
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	144392	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		2083

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	34501	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		34501
(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)		26971
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		194668
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	45466	
(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)		45466
f Corrective distributions (see instructions)	2f		58127
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)	630	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		630
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		104223
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		90445
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) [X] 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 [X] No

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

(1) Name: SMITH, JACKSON, BOYER & BOVARD PLLC (2) EIN: 75-2911056

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		55912
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		400000
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

2010

This Form is Open to Public Inspection.

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

A Name of plan
SYB CONSTRUCTION CO., INC. 401(K) PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
SYB CONSTRUCTION COMPANY INC.

D Employer Identification Number (EIN)
75-2053952

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): 75-2053952

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):

SYB CONSTRUCTION CO., INC. 401(k) PLAN AND TRUST

Financial Statements

December 31, 2010 and 2009

SYB CONSTRUCTION CO., INC. 401(k) PLAN AND TRUST

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SMITH, JACKSON, BOYER & BOVARD
A Professional Limited Liability Company
CERTIFIED PUBLIC ACCOUNTANTS

INDEPENDENT AUDITORS' REPORT

To the Board of Trustees and Plan Administrator
SYB Construction Co., Inc. 401(k) Plan and Trust

We have audited the accompanying statement of net assets available for benefits of SYB Construction Co., Inc. 401(k) Plan and Trust (the "Plan") as of December 31, 2010, and the related statement of changes in net assets available for benefits for the year then ended. These financial statements are the responsibility of the Plan's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of SYB Construction Co., Inc. 401(k) Plan and Trust as of December 31, 2010, and the changes in its net assets available for benefits for the year then ended in conformity with accounting principles generally accepted in the United States of America.

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules of delinquent participant contributions, assets held for investment purposes at end of year, and reportable transactions, together referred to as "supplemental information", are presented for the purpose of additional analysis and are not a required part of the financial statements, but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepared the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

We have compiled the accompanying statement of net assets available for benefits of SYB Construction Co., Inc. 401(k) Plan and Trust as of December 31, 2009, in accordance with the Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants.

INDEPENDENT AUDITORS' REPORT (Continued)

A compilation is limited to presenting in the form of financial statements information that is the representation of management. We have not audited or reviewed the accompanying statement of net assets available for benefits and, accordingly do not express an opinion or any other form of assurance on it.

Smith, Jackson, Boyer & Bovard

SMITH, JACKSON, BOYER & BOVARD
A Professional Limited Liability Company

Dallas, Texas
October 4, 2011

SYB Construction Co., Inc. 401(k) Plan and Trust
Statements of Net Assets Available For Benefits
December 31, 2010 and 2009

	2010	2009 (unaudited)
ASSETS		
Investments, at fair value:		
Cash and cash equivalents	$ 529,314	$ 327,503
Common stocks	78,290	52,635
Exchange traded funds	54,623	45,777
Mutual funds	152,292	137,302
Unit investment trusts	109,790	238,774
	924,309	801,991
Receivables:	1,187	3,006
Participant contributions	-	30,000
Employer contributions	1,187	33,006
Total Assets	925,496	834,997
LIABILITIES		
Excess contributions payable	8,472	58,128
Other liabilities	54	-
	8,526	58,128
NET ASSETS AVAILABLE FOR BENEFITS	$ 916,970	$ 776,869

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

SYB Construction Co., Inc. 401(k) Plan and Trust
Statement of Changes in Net Assets Available For Benefits
Year Ended December 31, 2010

ADDITIONS TO NET ASSETS ATTRIBUTED TO:		
Contributions:		
Participants	$	125,392
Investment income:		
Interest and dividend income		5,721
Net realized gain (loss)		622
Net unrealized gain (loss)		62,934
		69,277
TOTAL ADDITIONS		194,669
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Benefits paid to participants		45,466
Corrective distributions		8,472
Administrative expenses		630
TOTAL DEDUCTIONS		54,568
NET INCREASE		140,101
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year		776,869
End of year	$	916,970

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

NOTE 1 - DESCRIPTION OF THE PLAN

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

General

SYB Construction Co., Inc. 401(k) Plan and Trust was established on October 1, 2007. The Plan is a defined contribution plan covering all employees of SYB Construction Company, Inc. (the "Company") and its affiliated entities, B&B Erosion Control LLC and Performance Paver Systems, Inc. ("Affiliated Entities"). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Plan Administration

The Plan is under the administration of a board of trustees and a plan administrator who are appointed by the Company. Wells Fargo is the custodian of the investments and the investment advisor for the Plan. Sanford, Baumeister & Frazier, PLLC is the third party administrator for the Plan and sponsor of the prototype plan. The Company may, but is not required to, pay all of the fees and administrative expenses. Those fees or expenses not paid by the Company are paid from the Plan's funds.

Eligibility and Enrollment

On the first pay period following date of hire, an employee is eligible to participate in the Plan. An employee is eligible to participate for purposes of employer matching and profit sharing contributions when the employee satisfies the eligibility conditions of 21 years of age and completing one year of service, defined as completion of 1,000 hours of service during a twelve month period following date of hire.

Contributions

Each year, participants may contribute up to the maximum allowable of their pretax annual wages, as defined under the 401(k) provisions of the Plan and subject to certain regulatory limitations of the Internal Revenue Service. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. Participant contributions are not subject to federal income taxes until withdrawn in accordance with Section 401(k) of the Internal Revenue Code. In addition, the Company can make discretionary matching contributions and profit sharing contributions, but is not required to do so. The Company did not make any discretionary matching contributions or profit sharing contributions to the Plan in 2010.

Participant Accounts

Each participant's account is credited with the participant's contribution, an allocation of the Company's contribution, if any, and Plan earnings, and charged with an allocation of any administrative expenses not paid by the Company. Allocations are based on

participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately vested in their voluntary contributions plus actual earnings thereon. Vesting in the Company's contribution portion of their accounts plus actual earnings thereon is based on years of continuous service under the 401(k) provisions of the Plan, and the participant is 100% vested after six years of credited service.

Payment of Benefits

On termination of service, a participant has the option of receiving a distribution equal to the value of his or her vested account as specified in the Plan. If a terminated participant has a balance of $1,000 or greater in the Plan, the terminated participant may defer distribution of his or her vested account.

Forfeited Accounts

At December 31, 2010, the forfeited nonvested accounts totaled $573. These accounts will be used to reduce future administrative expenses. The Plan did not use any forfeited nonvested accounts to offset administrative expenses in 2010.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The Plan prepared its financial statements on the accrual basis of accounting in conformity with accounting principles generally accepted in the United States of America. Accordingly, contributions and investment income are recognized when earned rather than when received, and corrective distributions and administrative expenses are recognized when incurred rather than when paid.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions. These estimates and assumptions affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of investment income and expenses during the reporting period. Significant accounting estimates reflected in the Plan's financial statements include the determination of the fair value of investments. Actual results could differ from those estimates.

Contributions

Participant contributions are accrued in the period in which they are deducted from the participants' pay. Rollover contributions are recorded when received.

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 3 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest and dividend income are recorded when earned. Realized gains and losses on investments are based on the specific identification method. Unrealized gains and losses are recorded for the change in fair value of investments.

Payment of Benefits

Benefits are recorded when paid.

NOTE 3 - INVESTMENTS

The following presents investments at December 31, 2010 and 2009, which represent 5% or more of the Plan's net assets.

	2010	2009
		(Unaudited)
Wellls Fargo cash deposit sweep accounts	$ 528,830	$ 327,503
Apple, Inc.	62,899	41,093
Income Fund of America CL A	121,853	108,827
First Trust Core Holdings Growth 2007	71,999	63,476
First Trust Defensive Equity Portfolio Series 2	-	98,530

Fair Value Measurements

The Plan's investments are reported at fair value in the accompanying statement of net assets available for benefits. The methods used to measure fair value may produce an amount that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The fair value measurement accounting standards establishes a fair value hierarchy that priorities the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, Level 2 inputs consist of observable inputs other than quoted prices for identical assets, and Level 3 inputs are unobservable inputs and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. At December 31, 2010 and 2009, the Plan

used Level 1 and Level 2 inputs. Level 3 inputs were not used. The categorization of an investment within the hierarchy is based on the pricing transparency of the investment and does not necessarily correspond to the Plan's perceived risk of that investment.

Level 1 Fair Value measurements - The fair values of cash deposits held in the investment manager's account, common stocks, exchange traded funds, and mutual funds are based on the closing price reported in active market where the individual securities are traded.

Level 2 Fair Value measurements - The fair values of unit investment trusts are based on the observable redemption price quoted daily by the investment sponsor.

The following table set forth, by Level within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2010 and 2009:

	Fair Value Measurements 2010		
	Level 1	**Level 2**	**Total**
Cash and cash equivalents	$ 529,314	$ -	$ 529,314
Common stocks	78,290	-	78,290
Exchange traded funds	54,623	-	54,623
Mutual funds	152,292	-	152,292
Unit investment trusts	-	109,790	109,790
	$ 814,519	$ 109,790	$ 924,309

	Fair Value Measurements 2009 (Unaudited)		
	Level 1	**Level 2**	**Total**
Cash and cash equivalents	$ 327,503	$ -	$ 327,503
Common stocks	52,635	-	52,635
Exchange traded funds	45,777	-	45,777
Mutual funds	137,302	-	137,302
Unit investment trusts	-	238,774	238,774
	$ 563,217	$ 238,774	$ 801,991

NOTE 4 – CORRECTIVE DISTRIBUTIONS

Excess deferral contributions received from certain active participants of $8,472 for the year ended December 31, 2010, and $58,128 for the year ended December 31, 2009, have been corrected by distributing to the participants these excess deferral contributions in the following year as required to satisfy the relevant nondiscrimination provisions of the Plan. These corrective distributions have been accrued and presented in the statements of net assets available for benefits under excess contributions payable.

NOTE 5 – DELINQUENT CONTRIBUTIONS

During the year ended December 31, 2010, the Company failed to deposit certain participant contributions to the Plan within the time frames required by Department of Labor's regulations. The Company has self-corrected these violations during 2010. All participant contributions were deposited during 2010, and the related lost earnings on these delinquent contributions were deposited and allocated to participants' accounts during 2010.

NOTE 6 - 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.

NOTE 7 - FEDERAL INCOME TAX STATUS

The Plan is a defined contribution prototype plan ("Prototype Plan") and has not been submitted to the Internal Revenue Service ("IRS") for a determination as to whether it meets the qualification requirements of IRS Code Section 401(a). The IRS issued an opinion letter dated March 31, 2008, stating that the Prototype Plan was designed in accordance with applicable Internal Revenue Code requirements as of that date. The Prototype Plan and the related adoption agreement have been amended since receiving the opinion letter. However, the plan administrator, trustees and third party administrator believe that the Plan is designed and is being operated within the terms of the Prototype Plan and the related adoption agreement, and is in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the financial statements.

NOTE 8 - RISKS AND UNCERTAINTIES

The Plan invests in various securities. Investments in securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain securities, it is at least reasonably possible that changes in the values of securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

NOTE 9 - RELATED PARTY TRANSACTIONS

Certain Plan investments are cash deposit and sweep accounts held in the investment manager's accounts, Wells Fargo. Therefore, these cash deposit and sweep accounts qualify as party-in-interest transactions.

The Plan paid administrative expenses of $630 in 2010. The Company paid fees of $8,595 to the third party administrator in 2010 on behalf of the Plan.

Officers and employees of the Company performed certain administrative functions for the Plan in 2010. However, the officers or employees did not receive any compensation from the Plan.

NOTE 10 – RECONCILIATION OF FINANCIAL STATEMENTS TO FROM 5500

The following is a reconciliation of net assets available for benefits appearing in the accompanying financial statements to Form 5500:

	2010	2009
		(Unaudited)
Net assets available for benefits per financial statements	$ 916,970	$ 776,869
2010 excess contributions accrued in 2010	8,472	-
2009 excess contributions accrued in 2009	-	58,128
Net assets available for benefits per Form 5500	$ 925,442	$ 834,997

The following is a reconciliation of benefits paid to participants appearing in the accompanying statement of changes in net assets available for benefits to Form 5500:

	2010
Corrective distributions per financial statements	$ 8,472
2010 excess contributions distributed in 2011	(8,472)
2009 excess contributions distributed in 2010	58,128
Corrective distributions per Form 5500	$ 58,128

NOTE 11 - SUBSEQUENT EVENTS

The Plan has evaluated all subsequent events and transactions through October 4, 2011, the date the financial statements were available for issue. The Plan has determined that there are no subsequent events that require recognition or disclosure in the financial statements.

SUPPLEMENTAL INFORMATION

SYB Construction Co., Inc. 401(k) Plan and Trust
Form 5500 - Schedule H - Line 4a
Schedule of Delinquent Participant Contributions
December 31, 2010

EIN: 75-2053952
PN: 001

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under VFCP and PTE 2002-51
Check here if Late Participant Loan Repayments are included: ❑	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
$ 3,006	$ -	$ 3,006	$ -	$ -
2,669	-	2,669	-	-
2,717	-	2,717	-	-
2,436	-	2,436	-	-
2,353	-	2,353	-	-
2,377	-	2,377	-	-
2,327	-	2,327	-	-
2,354	-	2,354	-	-
2,892	-	2,892	-	-
2,322	-	2,322	-	-
2,319	-	2,319	-	-
2,338	-	2,338	-	-
2,499	-	2,499	-	-
2,435	-	2,435	-	-
2,196	-	2,196	-	-
2,177	-	2,177	-	-
2,209	-	2,209	-	-
2,156	-	2,156	-	-
2,181	-	2,181	-	-
3,062	-	3,062	-	-
2,172	-	2,172	-	-
2,562	-	2,562	-	-
2,153	-	2,153	-	-
$ 55,912	$ -	$ 55,912	$ -	$ -

See independent auditors' report.

SYB Construction Co., Inc. 401(k) Plan and Trust
Form 5500 - Schedule H - Line 4i
Schedule of Assets Held For Investment Purposes at End of Year
December 31, 2010

EIN: 75-2053952
PN: 001

(a)	(b) Identity of Issue	(c) Description of Investment		(d) Cost	(e) Current Value
	Non-Participant Directed				
*	Wells Fargo	Cash noninterest bearing	Bank deposit account	$ 484	$ 484
*	Wells Fargo	Cash interest bearing	Bank deposit sweep accounts	528,830	528,830
	Apple, Inc.	Common stock	195 shares	29,930	62,899
	ConocoPhillips	Common stock	226 shares	13,054	15,391
	Powershare Dynamic MKT Portfolio	Exchange Traded Fund	612 shares	18,775	26,934
	Powershare Dynamic OTC Portfolio	Exchange Traded Fund	556 shares	18,673	27,689
	American Funds	Mutual fund	Bond Fund of America CL A	21,341	21,314
	American Funds	Mutual fund	Capital World Bond CL A	7,492	9,125
	American Funds	Mutual fund	Income Fund America CL A	110,000	121,853
	First Trust Portfolios L.P.	Unit investment trust	Core Holdings Growth 2007	102,465	71,999
	First Trust Portfolios L.P.	Unit investment trust	Dividend Income C/E Series 6	61,068	37,791
			Total Assets	$ 912,112	$ 924,309

* - represents a "party-in-interest" to the Plan

See independent auditors' report.

SYB Construction Co., Inc. 401(k) Plan and Trust
Form 5500 - Schedule H - Line 4j
Schedule of Reportable Transactions
December 31, 2010

EIN: 75-2053952
PN: 001

(a) Identity of Party Involved	(b) Description of Asset (including interest rate and maturity in case of loan)	(c) Purchase Price	(d) Selling Price	(e) Lease Rental	(f) Expenses Incurred with Transaction	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain or (Loss)
	11,123 units, First Trust Defensive Equity Portfolio	$ -	$ 102,135	$ -	$ -	$ 102,465	$ 102,135	$ (330)
	Total	$ -	$ 102,135	$ -	$ -	$ 102,465	$ 102,135	$ (330)

See independent auditors' report.

SYB Construction Co., Inc. 401(k) Plan and Trust
Form 5500 - Schedule H - Line 4a
Schedule of Delinquent Participant Contributions
December 31, 2010

EIN: 75-2053952
PN: 001

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under VFCP and PTE 2002-51
Check here if Late Participant Loan Repayments are included: ❑	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
$ 3,006	$ -	$ 3,006	$ -	$ -
2,669	-	2,669	-	-
2,717	-	2,717	-	-
2,436	-	2,436	-	-
2,353	-	2,353	-	-
2,377	-	2,377	-	-
2,327	-	2,327	-	-
2,354	-	2,354	-	-
2,892	-	2,892	-	-
2,322	-	2,322	-	-
2,319	-	2,319	-	-
2,338	-	2,338	-	-
2,499	-	2,499	-	-
2,435	-	2,435	-	-
2,196	-	2,196	-	-
2,177	-	2,177	-	-
2,209	-	2,209	-	-
2,156	-	2,156	-	-
2,181	-	2,181	-	-
3,062	-	3,062	-	-
2,172	-	2,172	-	-
2,562	-	2,562	-	-
2,153	-	2,153	-	-
$ 55,912	$ -	$ 55,912	$ -	$ -

See independent auditors' report.

SYB Construction Co., Inc. 401(k) Plan and Trust
Form 5500 - Schedule H - Line 4j
Schedule of Reportable Transactions
December 31, 2010

EIN: 75-2053952
PN: 001

(a) Identity of Party Involved	(b) Description of Asset (including interest rate and maturity in case of loan)	(c) Purchase Price	(d) Selling Price	(e) Lease Rental	(f) Expenses Incurred with Transaction	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain or (Loss)
	11,123 units, First Trust Defensive Equity Portfolio	$ -	$ 102,135	$ -	$ -	$ 102,465	$ 102,135	$ (330)
	Total	$ -	$ 102,135	$ -	$ -	$ 102,465	$ 102,135	$ (330)

See independent auditors' report.

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

2010

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

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
SYB CONSTRUCTION CO., INC. 401(K) PLAN AND TRUST

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 10/01/1997

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

421 COMPTON

IRVING TX 75061

2b Employer Identification Number (EIN)
75-2053952

2c Sponsor's telephone number
972-399-1066

2d Business code (see instructions)
237990

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	Shirley Bennett	10/11/2011	SHIRLEY BENNETT
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Shirley Bennett	10/11/2011	SHIRLEY BENNETT
	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

SYB Construction Co., Inc. 401(k) Plan and Trust
Form 5500 - Schedule H - Line 4i
Schedule of Assets Held For Investment Purposes at End of Year
December 31, 2010

EIN: 75-2053952
PN: 001

(a)	(b) Identity of Issue	(c) Description of Investment		(d) Cost	(e) Current Value
	Non-Participant Directed				
*	Wells Fargo	Cash noninterest b	Bank deposit accou	$ 484	$ 484
*	Wells Fargo	Cash interest beari	Bank deposit swee	528,830	528,830
	Apple, Inc.	Common stock	195 shares	29,930	62,899
	ConocoPhillips	Common stock	226 shares	13,054	15,391
	Powershare Dynam	Exchange Traded F	612 shares	18,775	26,934
	Powershare Dynam	Exchange Traded F	556 shares	18,673	27,689
	American Funds	Mutual fund	Bond Fund of Amer	21,341	21,314
	American Funds	Mutual fund	Capital World Bond	7,492	9,125
	American Funds	Mutual fund	Income Fund Amer	110,000	121,853
	First Trust Portfolio	Unit investment tru	Core Holdings Grov	102,465	71,999
	First Trust Portfolio	Unit investment tru	Dividend Income C,	61,068	37,791
			Total Assets	$ 912,112	$ 924,309

***** - represents a "party-in-interest" to the Plan

See independent auditors' report.