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. . . . . ▶ [X]

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
DEVCON CONSTRUCTION INC. EMPLOYEES WELFARE BENEFIT PLAN

1b Three-digit plan number (PN) ▶ 501

1c Effective date of plan 04/01/1986

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

690 GIBRALTAR DRIVE
MILPITAS, CA 95035

690 GIBRALTAR DRIVE
MILPITAS, CA 95035

2b Employer Identification Number (EIN)
94-2685009

2c Sponsor's telephone number
408-942-8200

2d Business code (see instructions)
236200

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.	10/12/2011	GARY FILIZETTI
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2011	BRET SISNEY
	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")
DEVCON CONSTRUCTION INC

690 GIBRALTAR DR
MILPITAS, CA 95035

3b Administrator's EIN
94-2685009

3c Administrator's telephone number
408-942-8200

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**	155
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**	177
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	0
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	177
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	177
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	0
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:

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:
4A 4B 4D

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)		**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)		**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
DEVCON CONSTRUCTION INC. EMPLOYEES WELFARE BENEFIT PLAN

B Three-digit plan number (PN) ▶ 501

C Plan sponsor's name as shown on line 2a of Form 5500
LAKESIDE ASSOCAITES

D Employer Identification Number (EIN)
94-2685009

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)		
(3) Other	1b(3)	8264	12125
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	2031346	2289351
(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)	1983422	1838967
(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)		
(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	4023032	4140443
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k		
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	4023032	4140443

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)		
	(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)		
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	17289	
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)	100122	
	(E) Participant loans	2b(1)(E)		
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		117411
	(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)		
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		117411
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)		
(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)		
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		117411
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: JOHANSON & YAU **(2)** EIN: 94-2702860

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		1000000
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**		X	

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? If yes, enter the amount of any plan assets that reverted to the employer this year ☐ **Yes** ☒ **No** **Amount:**

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)

RECEIVED
OCT 05 2011
DEVCON

DEVCON CONSTRUCTION, INC.

EMPLOYEES' WELFARE BENEFIT PLAN

FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2010 AND 2009

AND

INDEPENDENT AUDITORS' REPORT

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JOHANSON & YAU
ACCOUNTANCY CORPORATION

DAVID R. DAVIS
FREDERICK U. LEONARD
SHERYL L. HINSHAW
BYRON J. ISHIWATA
SARA E. KELLEY

ANTHONY S. C. YAU
Of Counsel

INDEPENDENT AUDITORS' REPORT

To the Administrative Committee of
Devcon Construction, Inc.
Employees' Welfare Benefit Plan
Milpitas, California

We have audited the accompanying statements of net assets available for plan benefits of Devcon Construction, Inc. Employees' Welfare Benefit Plan (the Plan), as of December 31, 2010 and 2009, and the related statement of changes in net assets available for plan benefits for the year ended December 31, 2010. 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 audits.

We conducted our audits 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 audits provide 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 plan benefits as of December 31, 2010 and 2009, and the changes in net assets available for plan benefits for the year ended December 31, 2010 in conformity with accounting principles generally accepted in the United States of America.

Our audits were conducted for the purpose of forming an opinion on the basic financial statements taken as a whole. The supplemental information included in the schedule of assets held for investment purposes at end of year and schedule of reportable transactions are presented for the purpose of additional analysis and are not a required part of the basic financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The supplemental information is the responsibility of the Plan's management. The supplemental information has been subjected to the auditing procedures applied in the audits of basic financial statements and, in our opinion, is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

Johanson & Yau
Accountancy Corporation

July 19, 2011

CERTIFIED PUBLIC ACCOUNTANTS
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SAN JOSE, CALIFORNIA 95113-1700
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AN INDEPENDENT MEMBER
OF BKR INTERNATIONAL
WITH OFFICES IN PRINCIPAL
CITIES AROUND THE WORLD

DEVCON CONSTRUCTION, INC.
EMPLOYEES' WELFARE BENEFIT PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR PLAN BENEFITS
DECEMBER 31, 2010 AND 2009

ASSETS

	2010	2009
Investments, at fair value		
Cash and cash equivalents	$ 1,937,352	$ 631,346
Certificates of deposit	352,000	1,400,000
Note receivable	1,838,966	1,983,422
	4,128,318	4,014,768
Receivable		
Accrued interest	12,125	8,264
Net assets available for plan benefits	$ 4,140,443	$ 4,023,032

See accompanying notes to financial statements

DEVCON CONSTRUCTION, INC.
EMPLOYEES' WELFARE BENEFIT PLAN
STATEMENT OF CHANGES IN NET ASSETS
AVAILABLE FOR PLAN BENEFITS
YEAR ENDED DECEMBER 31, 2010

Additions:	
Interest income	$ 117,411
Increase during year	117,411
Net assets:	
Beginning of year	4,023,032
End of year	$ 4,140,443

See accompanying notes to financial statements

NOTE 1 – DESCRIPTION OF THE PLAN

The following description of the Devcon Construction, Inc. (the Company) Employees' Welfare Benefit Plan (the Plan) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

The Plan is a qualified Union VEBA under Internal Revenue Code Section 501(c)(9). Under the Plan, the Company must maintain a balance in the fund sufficient to provide each eligible employee stated benefits under the Plan. No contributions were made by the Company for the year ended December 31, 2010.

Stated benefits under the Plan include health care, vacation and holiday pay and death benefits. No benefits were paid in the year ended December 31, 2010.

All employees covered by a collective bargaining agreement are eligible to participate in the Plan on the first day of their employment with Devcon Construction, Inc.

NOTE 2 – SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting – The accompanying financial statements have been prepared on the accrual basis of accounting and present the net assets available for plan benefits and changes in those net assets.

Investments – Investments of the Plan at December 31, 2010 and 2009 were held by Comerica Bank of California and The Hartford in their capacity as custodians of the Plan. All of the assets of the Plan are invested in cash and cash equivalents, certificates of deposit and a note receivable.

Investments are valued at fair value. If available, quoted market prices are used to value investments. The amounts shown in Note 3 for investments that have no quoted market price represent estimated fair value, which is determined based on yields equivalent for such securities or for securities of comparable maturity, quality, and type as obtained from market makers. Gains and losses on investments that were both bought and sold during the year are included in net appreciation in fair value.

NOTE 2 – SIGNIFICANT ACCOUNTING POLICIES (Continued)

Income Taxes – The Plan received its determination letter on March 23, 1988, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the determination letter. However, the Plan administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

The Plan's tax filings are subject to audit by various taxing authorities. As of December 31, 2010 the Plan is no longer subject to federal or state examinations by tax authorities for years ended before 2006.

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 that affect the reported amounts of assets and liabilities at the date of the financial statements and the reported amounts of income and expenses during the reporting period. Actual results could differ from those estimates.

Cash and Cash Equivalents – Cash and cash equivalents include all highly liquid securities purchased with an original maturity of three months or less at the date of purchase, and consist primarily of money market instruments. The Company maintains cash equivalent deposits in excess of federally insured limits.

Administrative Expenses – Administrative expenses of the Plan, other than investment fees, are paid by the sponsor, Devcon Construction, Inc.

Payment of Benefits – Benefits are recorded and recognized as an expense when incurred.

NOTE 3 – INVESTMENTS

The following summarizes the Plan's investments at December 31, 2010 and 2009. Investments that represent 5% or more of total plan assets are separately identified.

December 31, 2010	Par Value	Fair Value
Investments at quoted market values		
Money market funds	$ 1,937,352	$ 1,937,352
Certificates of deposit	352,000	352,000
Investments at estimated fair value		
Note receivable from Tom Albanese, an individual, with monthly payments of $20,000 at 5% interest, maturing on September 30, 2011.	1,838,966	1,838,966
	$ 4,128,318	$ 4,128,318

December 31, 2009	Par Value	Fair Value
Investments at quoted market values		
Money market funds	$ 631,346	$ 631,346
Certificates of deposit	1,400,000	1,400,000
Investments at estimated fair value		
Note receivable from Tom Albanese, an individual, with monthly payments of $20,000 at 5% interest, maturing on September 30, 2011.	1,983,422	1,983,422
	$ 4,014,768	$ 4,014,768

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 of ERISA.

NOTE 5 – NOTE RECEIVABLE

In November 2008, the Plan loaned $2,131,628 to Tom Albanese, an individual. This note requires payments of principal and interest of $20,000 per month. The note matures on September 30, 2011, and bears an annual interest rate of 5%. The note balance at December 31, 2010 and 2009 is $1,838,966 and $1,983,422, respectively. Interest received for the year ending December 31, 2010 and 2009 was $91,858 and $102,651, respectively.

NOTE 6 – FAIR VALUE MEASUREMENTS

Generally accepted accounting principles establish a hierarchy to prioritize the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest ranking to fair values determined using unadjusted quoted prices in active markets for identical assets (Level 1) and the lowest ranking to fair values determined using methodologies and models with unobservable inputs (Level 3). Observable inputs are those that market participants would use in pricing the assets based on market data obtained from sources independent of the Plan. Unobservable inputs reflect the Plan's assumption about the inputs market participants would use in pricing the asset or liability developed based on the best information available in the circumstances.

The fair value hierarchy is categorized into three levels based on the inputs as follows:

Level 1- Values are unadjusted quoted prices for identical assets or liabilities in active markets accessible at the measurement date.

Level 2- Inputs included in quoted prices for similar assets or liabilities in active markets, quoted prices from those willing to trade in markets that are not active, or other inputs that are observable or can be corroborated by market data for the term of the instrument. Such inputs include market interest rates and volatilities, spreads and yield curves.

Level 3- Certain inputs are unobservable (supported by little or no market activity) and significant to the fair value measurement. Unobservable inputs reflect the Plan's best estimate of what hypothetical market participants would use to determine a transaction price for the asset or liability at the reporting date.

NOTE 6 – FAIR VALUE MEASUREMENTS (Continued)

In accordance with generally accepted accounting principles the following table represents the Plan's fair value hierarchy for its financial assets and liabilities (cash and investments) measured at fair value on a recurring basis of as December 31, 2010.

	Level 1	Level 2	Level 3	Total Carrying Amount
Cash and cash equivalents	$ 1,937,352	$ -	$ -	$ 1,937,352
Certificates of deposit	352,000	-	-	352,000
Note receivable	-	-	1,838,966	1,838,966
Total investments at fair value	$ 2,289,352	$ -	$ 1,838,966	$ 4,128,318

NOTE 7 – SUBSEQUENT EVENTS

Subsequent events were evaluated through July 19, 2011, the date the financials were available to be issued.

DEVCON CONSTRUCTION, INC. EMPLOYEES' WELFARE BENEFIT PLAN
EIN 94-2685009
SCHEDULE H, LINE 4j – SCHEDULE OF ASSETS HELD FOR INVESTMENT AT END OF YEAR

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment, including maturity date, rate of interest, par or maturity value	(d) Cost	(e) Current Value
	Tom Albanese	Promissory note, matures 9/30/2011, 5% interest	$ 1,838,966	$ 1,838,966
	Comerica Securities- Certificates of Deposit	1,400,000.000 (SHS)	352,000	352,000
	Comerica Business Money Market	682,302.560 (K SHS)	682,304	682,304
	Comerica Prime Obligations	3,318.350 (K SHS)	3,318	3,318
	The Hartford Stable Value/Money Market	1,251,730.210 (K SHS)	1,251,730	1,251,730
				$ 4,128,318

DEVCON CONSTRUCTION, INC. EMPLOYEES' WELFARE BENEFIT PLAN
EIN 94-2685009
SCHEDULE H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS

(a)	(b)	(c)	(d)	(e)	(f)	(g)
Identity of party involved	Description of assets (including maturity date, rate of interest, par or maturity value)	Purchase price	Selling price/ Maturity value	Cost of asset	Current value of asset on transaction date	Net gain or loss
Comerica Securities- Certificates of Deposit	350,000.000 SHARES		$ 350,000	$ 350,000	$ 350,000	-
Comerica Business Money Market	350,000.000 SHARES	$ 350,000		$ 350,000	$ 350,000	
Comerica Business Money Market	350,000.000 SHARES		$ 350,000	$ 350,000	$ 350,000	-
Comerica Prime Obligations	350,000.000 SHARES	$ 350,000		$ 350,000	$ 350,000	
Comerica Securities- Certificates of Deposit	350,000.000 SHARES		$ 350,000	$ 350,000	$ 350,000	-
Comerica Business Money Market	350,000.000 SHARES	$ 350,000		$ 350,000	$ 350,000	
Comerica Business Money Market	350,000.000 SHARES		$ 350,000	$ 350,000	$ 350,000	-
Comerica Prime Obligations	350,000.000 SHARES	$ 350,000		$ 350,000	$ 350,000	
Comerica Securities- Certificates of Deposit	249,000.000 SHARES		$ 249,000	$ 249,000	$ 249,000	-
Comerica Business Money Market	249,000.000 SHARES	$ 249,000		$ 249,000	$ 249,000	
Comerica Business Money Market	249,000.000 SHARES		$ 249,000	$ 249,000	$ 249,000	-
Comerica Prime Obligations	249,000.000 SHARES	$ 249,000		$ 249,000	$ 249,000	
Comerica Prime Obligations	1,250,000.000 SHARES		$ 1,250,000	$ 1,250,000	$ 1,250,000	-
Comerica Business Money Market	1,250,000.000 SHARES	$1,250,000		$ 1,250,000	$ 1,250,000	
Comerica Business Money Market	1,250,000.000 SHARES		$ 1,250,000	$ 1,250,000	$ 1,250,000	-
The Hartford Stable Value / Money Market	1,250,000.000 SHARES	$1,250,000		$ 1,250,000	$ 1,250,000	