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
ABLE ENGINEERING SERVICES 401 K PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1996

2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.)
CROWN ENERGY, INC. DBA ABLE ENGINEERING SERVICES

868 FOLSOM STREET
SAN FRANCISCO, CA 94107

2b Employer Identification Number (EIN)
94-3226677

2c Sponsor's telephone number
415-546-6534

2d Business code (see instructions)
561790

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.	10/17/2011	PAUL BOSCHETTO
	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")
ADMINISTRATIVE COMMITTEE

868 FOLSOM STREET
SAN FRANCISCO, CA 94107-1122

3b Administrator's EIN
94-3245273

3c Administrator's telephone number
415-543-6534

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**	2034
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**	2062
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**	2062
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	2062
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	122
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	
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 2J 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)	X	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)	X	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)	X	1	**A** (Insurance Information)
(4)			**C** (Service Provider Information)
(5)	X		**D** (DFE/Participating Plan Information)
(6)			**G** (Financial Transaction Schedules)

SCHEDULE A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

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
ABLE ENGINEERING SERVICES 401 K PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500.
CROWN ENERGY, INC. DBA ABLE ENGINEERING SERVICES

D Employer Identification Number (EIN)
94-3226677

Part I **Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
JOHN HANCOCK LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
01-0233346	65838	51476	226	01/01/2010	12/31/2010

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in item 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
23919	5038

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
FINANCIAL TELESIS INC
17727 CHATSWORTH STREET
GRANADA HILLS, CA 91344

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
23919		COMMISSION PAID	3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
THE OSBORNE ORGANIZATION, INC.
2937 VENEMAN AVENUE
MODESTO, CA 95356

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
	2478	TPA COMPENSATION	5

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MCK ASSOCIATES, INC.
220 BUSH STREET
SAN FRANCTSCO, CA 94104

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
	2360	FEES PAID	5

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

VANGUARD GROUP, INC.
100 VANGUARD BLVD.
MALVERN, PA 19355

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
	200	REDEMPTION FEES	6

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	4	77691
5	Current value of plan's interest under this contract in separate accounts at year end	5	6158824

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.	6d	

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity

(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee

(3) ☒ guaranteed investment (4) ☐ other ▶

b	Balance at the end of the previous year			7b	83161
c	Additions: (1) Contributions deposited during the year	7c(1)	12239		
	(2) Dividends and credits	7c(2)			
	(3) Interest credited during the year	7c(3)	2007		
	(4) Transferred from separate account	7c(4)	4850		
	(5) Other (specify below)	7c(5)	22		
	▶ LOAN REPAYMENTS				
	(6) Total additions			7c(6)	19118
d	Total of balance and additions (add **b** and **c(6)**)			7d	102279
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	17697		
	(2) Administration charge made by carrier	7e(2)	418		
	(3) Transferred to separate account	7e(3)	5723		
	(4) Other (specify below)	7e(4)	750		
	▶ MEGATIVE MKT VALUE AND PARTICIPANT LOANS				
	(5) Total deductions			7e(5)	24588
f	Balance at the end of the current year (subtract **e(5)** from **d**)			7f	77691

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organization(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

a ☐ Health (other than dental or vision) **b** ☐ Dental **c** ☐ Vision **d** ☐ Life insurance
e ☐ Temporary disability (accident and sickness) **f** ☐ Long-term disability **g** ☐ Supplemental unemployment **h** ☐ Prescription drug
i ☐ Stop loss (large deductible) **j** ☐ HMO contract **k** ☐ PPO contract **l** ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	0
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	0
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in **c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, item 2 above, report amount.			**10b**	

Specify nature of costs ▶

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

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
ABLE ENGINEERING SERVICES 401 K PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
CROWN ENERGY, INC. DBA ABLE ENGINEERING SERVICES

D Employer Identification Number (EIN)
94-3226677

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING 2010

b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
01-0233346-000	P	1072

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING 2015

b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
01-0233346-000	P	67570

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING 2020

b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
01-0233346-000	P	58628

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING 2025

b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
01-0233346-000	P	96486

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING 2030

b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
01-0233346-000	P	51528

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING 2035

b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
01-0233346-000	P	55575

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING 2040

b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
01-0233346-000	P	27627

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING 2045			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	48713
a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE MODERATE			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	250970
a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE BALANCED			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	264229
a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE GROWTH			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	776728
a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE AGGRESSIVE			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	476708
a Name of MTIA, CCT, PSA, or 103-12 IE: T ROWE PRICE SPECTURM			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	57122
a Name of MTIA, CCT, PSA, or 103-12 IE: LM WESTERN ASSET GLB HIGH YIELD			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	71094
a Name of MTIA, CCT, PSA, or 103-12 IE: PIMCO REAL RETURN			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	28094
a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE CONSERVATIVE			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	75632
a Name of MTIA, CCT, PSA, or 103-12 IE: PIMCO TOTAL RETURN			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	530408

a Name of MTIA, CCT, PSA, or 103-12 IE: SHORT-TERM FEDERAL			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	122762
a Name of MTIA, CCT, PSA, or 103-12 IE: PIMCO ALL ASSET			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	7464
a Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN BALANCED FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	17277
a Name of MTIA, CCT, PSA, or 103-12 IE: INVESTMENT COMPANY OF AMERCIA			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	962
a Name of MTIA, CCT, PSA, or 103-12 IE: MUTUAL BEACON			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	154036
a Name of MTIA, CCT, PSA, or 103-12 IE: VALUE INDEX FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	6806
a Name of MTIA, CCT, PSA, or 103-12 IE: T ROWE PRICE EQUITY INC			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	75756
a Name of MTIA, CCT, PSA, or 103-12 IE: DAVIS NEW YORK VENTURE			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	108197
a Name of MTIA, CCT, PSA, or 103-12 IE: MUTUAL GLOBAL DISCOVERY			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	38705
a Name of MTIA, CCT, PSA, or 103-12 IE: FIDELITY CONTRAFUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	152157

a Name of MTIA, CCT, PSA, or 103-12 IE: THE GROWTH FUND OF AMERICA			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	8837
a Name of MTIA, CCT, PSA, or 103-12 IE: STRATEGIC INCOME OPP FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	16758
a Name of MTIA, CCT, PSA, or 103-12 IE: GROWTH INDEX FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	2873
a Name of MTIA, CCT, PSA, or 103-12 IE: TEMPLETON WORLD			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	51419
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LARGE VALUE			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	13051
a Name of MTIA, CCT, PSA, or 103-12 IE: MFS UTILITIES			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	41236
a Name of MTIA, CCT, PSA, or 103-12 IE: DOMINI SOCIAL EQUITY			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	16788
a Name of MTIA, CCT, PSA, or 103-12 IE: OPPENHEIMER GLOBAL			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	37646
a Name of MTIA, CCT, PSA, or 103-12 IE: RIVERSOURCE MID CAP VALUE			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	18103
a Name of MTIA, CCT, PSA, or 103-12 IE: FRANKLIN BALANCE SHEET			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	193590

a Name of MTIA, CCT, PSA, or 103-12 IE: JPM MIDCAP VALUE FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	19536
a Name of MTIA, CCT, PSA, or 103-12 IE: COLUMBIA VALUE & RESTRUCTURING			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	88795
a Name of MTIA, CCT, PSA, or 103-12 IE: EUROPACIFIC GROWTH FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	99321
a Name of MTIA, CCT, PSA, or 103-12 IE: T ROWE PRICE HEALTH SCI			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	100030
a Name of MTIA, CCT, PSA, or 103-12 IE: LEGG MASON CLEARBR AGG GROWTH			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	26247
a Name of MTIA, CCT, PSA, or 103-12 IE: FRANKLIN SMALL-MID GROWTH			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	117198
a Name of MTIA, CCT, PSA, or 103-12 IE: GLOBAL BOND FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	37625
a Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN CENTURY VISTA			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	163793
a Name of MTIA, CCT, PSA, or 103-12 IE: INV SMALL CAP GROWTH			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	8472
a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP INDEX			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	7135

a Name of MTIA, CCT, PSA, or 103-12 IE: DFA INTERNATIONAL VALUE			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	24071
a Name of MTIA, CCT, PSA, or 103-12 IE: T ROWE PRICE SCI & TECH			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	229530
a Name of MTIA, CCT, PSA, or 103-12 IE: OPPENHEIMER DEVELOPING MARKET			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	124769
a Name of MTIA, CCT, PSA, or 103-12 IE: ENERGY			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	135166
a Name of MTIA, CCT, PSA, or 103-12 IE: DFA EMERGING MARKETS VALUE			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	19150
a Name of MTIA, CCT, PSA, or 103-12 IE: MID-CAP GROWTH INDEX FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	1278
a Name of MTIA, CCT, PSA, or 103-12 IE: MONEY MARKET FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	493241
a Name of MTIA, CCT, PSA, or 103-12 IE: TOTAL BOND MARKET FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	22715
a Name of MTIA, CCT, PSA, or 103-12 IE: 500 INDEX FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	166514
a Name of MTIA, CCT, PSA, or 103-12 IE: OPTIMIZED VALUE FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	10784

a Name of MTIA, CCT, PSA, or 103-12 IE: LARGE CAP FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	5956
a Name of MTIA, CCT, PSA, or 103-12 IE: ALL CAP VALUE FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	28178
a Name of MTIA, CCT, PSA, or 103-12 IE: CAPITAL APPRECIATION FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	86556
a Name of MTIA, CCT, PSA, or 103-12 IE: TOTAL STOCK MARKET INDEX FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	80059
a Name of MTIA, CCT, PSA, or 103-12 IE: BLUE CHIP GROWTH FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	206277
a Name of MTIA, CCT, PSA, or 103-12 IE: MID CAP INDEX FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	23546
a Name of MTIA, CCT, PSA, or 103-12 IE: OPTIMIZED ALL CAP FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	27367
a Name of MTIA, CCT, PSA, or 103-12 IE: REAL EST SECURITIES FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	90238
a Name of MTIA, CCT, PSA, or 103-12 IE: FINANCIAL SERVICES FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	15937
a Name of MTIA, CCT, PSA, or 103-12 IE: INTL EQUITY INDEX FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	22649

a Name of MTIA, CCT, PSA, or 103-12 IE: MID CAP STOCK FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 23280

a Name of MTIA, CCT, PSA, or 103-12 IE: INTERNATIONAL VALUE FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 52544

a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP GROWTH INDEX FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 7353

a Name of MTIA, CCT, PSA, or 103-12 IE: INTERNATIONAL OPPS FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 19004

a Name of MTIA, CCT, PSA, or 103-12 IE: INTL SMALL CAP FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 45145

a Name of MTIA, CCT, PSA, or 103-12 IE: 3 YEAR GUARANTEED ACCOUNT

b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 9436

a Name of MTIA, CCT, PSA, or 103-12 IE: 5 YEAR GUARANTEED ACCOUNT

b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 68197

a Name of MTIA, CCT, PSA, or 103-12 IE: 10 YEAR GUARANTEED ACCOUNT

b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INS CO USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 347

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

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b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

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
ABLE ENGINEERING SERVICES 401 K PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
CROWN ENERGY, INC. DBA ABLE ENGINEERING SERVICES

D Employer Identification Number (EIN)
94-3226677

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	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	26227	0
(2) Participant contributions	1b(2)	17659	35757
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	502088	493241
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	0	86681
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	5188612	6158824
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	0	0
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	85311	78854
(15) Other	1c(15)	-2150	-873

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	5817747	6852484
Liabilities			
g Benefit claims payable	1g	0	0
h Operating payables	1h	0	0
i Acquisition indebtedness	1i	0	0
j Other liabilities	1j	45933	58481
k Total liabilities (add all amounts in lines 1g through1j)	1k	45933	58481
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	5771814	6794003

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)	866842	
(C) Others (including rollovers)	2a(1)(C)	469	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		867311
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	2007	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	2305	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		4312
(2) Dividends: **(A)** Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	0	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
(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)	0	
	(B) Other	2b(5)(B)	0	
	(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)		0
	(7) Net investment gain (loss) from pooled separate accounts	2b(7)		760424
	(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
	(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
	(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		0
c	Other income	2c		0
d	Total income. Add all **income** amounts in column (b) and enter total	2d		1632047
	Expenses			
e	Benefit payment and payments to provide benefits:			
	(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	546078	
	(2) To insurance carriers for the provision of benefits	2e(2)	0	
	(3) Other	2e(3)	0	
	(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		546078
f	Corrective distributions (see instructions)	2f		28963
g	Certain deemed distributions of participant loans (see instructions)	2g		0
h	Interest expense	2h		0
i	Administrative expenses: (1) Professional fees	2i(1)	0	
	(2) Contract administrator fees	2i(2)	34817	
	(3) Investment advisory and management fees	2i(3)	0	
	(4) Other	2i(4)	0	
	(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		34817
j	Total expenses. Add all **expense** amounts in column (b) and enter total	2j		609858
	Net Income and Reconciliation			
k	Net income (loss). Subtract line 2j from line 2d	2k		1022189
l	Transfers of assets:			
	(1) To this plan	2l(1)		0
	(2) From this plan	2l(2)		0

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: POLLY SCATETJA VASHERESSE MAY **(2)** EIN: 94-1246445

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		500000
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
ABLE ENGINEERING SERVICES 401 K PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
CROWN ENERGY, INC. DBA ABLE ENGINEERING SERVICES

D Employer Identification Number (EIN)
94-3226677

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): 01-0233346

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):

Able Engineering Services 401(k) Plan

Financial Statements and Additional Information December 31, 2010 and 2009

Able Engineering Services 401(k) Plan

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To the Administrative Committee of
Able Engineering Services 401(k) Plan

We were engaged to audit the accompanying statements of net assets available for benefits of Able Engineering Services 401(k) Plan as of December 31, 2010 and 2009 and the related statement of changes in net assets available for benefits for the years ended December 31, 2010 and 2009, and the supplemental schedule I – Schedule H, line 4i – Schedule of Assets (Held At End of Year) as of December 31, 2010. These financial statements and supplemental schedule are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4, which was certified by John Hancock Financial, the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2010 and 2009, that the information provided to the plan administrator by the trustee is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and schedules taken as a whole. The form and content of the information included in the financial statements and schedule, other than that derived from the information certified by the Trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Polly, Scatena, Vasheresse & May

San Mateo, CA
October 6, 2011

655 Mariners Island Blvd. #304 · San Mateo, CA 94404 · TEL: 650-578-1200 · FAX: 650-578-1209 · www.PSVM.net
Partners: Jack Polly (1921-2001) David Scatena Jeanette Vasheresse Marcena May

Able Engineering Services 401(k) Plan
Statement of Net Assets Available for Benefits
December 31, 2010 and 2009

	2010	2009
ASSETS		
Investments at fair value:		
Mutual Funds (Notes 2 & 3)	$ 6,158,824	$ 5,188,612
Guaranteed Interest Contracts (Note 6)	78,854	85,311
Money Market Fund	493,241	502,088
	6,730,919	5,776,011
Receivables:		
Notes Receivable from Participants	86,681	-
Employee Contributions	35,757	17,659
Employer Contributions	-	26,227
	122,438	43,886
TOTAL ASSETS	6,853,357	5,819,897
LIABILITIES		
Accounts payable	29,518	29,518
Corrective distributions	28,963	16,415
TOTAL LIABILITIES	58,481	45,933
Net assets available for benefits at fair value	6,794,876	5,773,964
Adjustment from fair value to contract value for fully benefit-responsive investment contracts	(873)	(2,150)
NET ASSETS AVAILABLE FOR BENEFITS	$ 6,794,003	$ 5,771,814

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

Able Engineering Services 401(k) Plan
Statement of Changes in Net Assets Available for Benefits
For the Years Ended December 31, 2010 and 2009

	2010	2009
ADDITIONS		
Additions to net assets attributed to:		
Investment income:		
Interest income	$ 2,007	$ 3,097
Interest income - participant loans	2,305	-
Net appreciation in fair value of investments	760,424	1,228,922
	764,736	1,232,019
Contributions:		
Participants	866,842	862,135
Participant Rollovers	469	12,202
Employer Contributions	-	26,227
	867,311	900,564
TOTAL ADDITIONS	1,632,047	2,132,583
DEDUCTIONS		
Deductions from net assets attributed to:		
Benefits paid to participants	546,078	295,291
Corrective distributions	28,963	16,415
Administrative expenses (Note 7)	34,817	27,910
TOTAL DEDUCTIONS	609,858	339,616
NET INCREASE	1,022,189	1,792,967
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year	5,771,814	3,978,847
End of year	$ 6,794,003	$ 5,771,814

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

1. Description of the Plan

The following description of the Able Engineering Services 401(k) Plan (the Plan) provides only general information. Participants should refer to the plan document for a more complete description of the Plan's provisions.

General

The Able Engineering Services 401(k) Plan is a 401(k) plan which became effective January 1, 1996. The Plan contains a deferred income arrangement intended to satisfy the requirements of Internal Revenue Code Section 401(k).

Crown Energy, Inc. dba Able Engineering Services (the Company) is the sponsor of the plan and delegates all of its responsibility to oversee the Plan's operations to the Administrative Committee. The Administrative Committee has a service agreement with John Hancock Financial, which among other services, holds the Plan's assets, establishes and maintains an individual account for each participant, maintains the financial records relating to the trust, executes all of the investments, and makes all benefit payments as directed by the plan administrator.

The plan covers only eligible employees whose compensation and conditions of employment are established by the terms of a good-faith collective bargaining agreement between the Company and such employee's lawful representative or bargaining agent.

The Plan provides that employees of the Company are eligible to participate on the first day of the pay period coinciding with or following one month of service or upon reaching age twenty-one, whichever comes later. For this purpose, an employee is deemed to have completed one month of service after one calendar month with at least 80 hours of service.

Contributions

Each year, participants may make voluntary contributions in the form of regular payroll deductions ranging from 1% of pretax annual compensation, as defined in the Plan, to the maximum contribution allowed by Internal Revenue Code. The maximum employee contribution for the 2010 and 2009 plan years was $16,500 per year. Employees who attained age 50 by year end could make an additional catch-up contribution of $5,500 per year for 2010 and 2009. The maximum allowable contribution will be adjusted annually for inflation in accordance with Internal Revenue Service regulations.

The Plan will accept rollover contributions, direct rollovers, and transfers from certain other profit sharing plans. Rollover contributions will be invested with the balance of the trust fund and will share proportionately in fund gains and losses.

Upon enrollment in the Plan, participants direct the investment of their contributions into various investment options offered by the Plan. The Plan currently offers eighty eight mutual funds, three guaranteed interest contracts (guaranteed accounts), and a money market account as investment options for participants. The participant may change investment options as often as he chooses, with the exception of the guaranteed accounts.

The Company did not provide matching contributions in 2010. In 2009 the Company matched each eligible participant's 401(k) contributions and allocated the matching contribution as a Company contribution as of the last day of the plan year. To be eligible, the participant must have been a non-highly compensated employee, employed by the Company as of the last day of the plan year, and worked at an eligible location. The matching contribution was 50 percent of the participant's 401(k) contribution for the year, but was limited to no more than 3 percent of the participant's compensation. Company profit sharing contributions are neither required nor intended.

Participant Accounts

Each participant's account is credited with the participant's contribution, any matching contributions, and allocation of the Plan earnings, and charged with an allocation of administrative expenses. Allocations are based on participant account balances. 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 employee contributions, matching contributions and actual earnings. Amounts rolled over or transferred will be 100% vested in the participant.

Notes Receivable from Participants

Effective February 10, 2010, the Plan was amended to allow participants to borrow from their accounts. Under the terms of the Plan, at the discretion of the Administrative Committee, the Plan may extend loans to participants up to a maximum of $50,000 or 50 percent of their account balance, whichever is less. The loans are secured by the balance in the participant's account and bear interest at 5 percent, which is commensurate with local prevailing rates as determined by the Administrative Committee. Principal and interest is paid ratably through payroll deductions. If a participant terminates employment with the Company with an outstanding loan, the participant must repay the loan within 60 days of termination.

Payment of Benefits

Under the terms of the Plan, any participant may apply for a hardship withdrawal, which will be evaluated by the Administrative Committee. Withdrawals cannot exceed the total amount of 401(k) contributions made by participant (less amounts already withdrawn) plus pre-1989 earnings, if any, which have been allocated to those contributions.

Distributions are generally made in cash, but may be offered in investments if selling the investments would harm the fund as a whole. Accounts worth $5,000 or less will be distributed in a single payment or series of payments, during one calendar year. The normal form of distribution for all other accounts is a lump sum distribution, but if the participant does not consent to such a distribution, then the participant may elect to have payment deferred until normal retirement age. If a participant retires at or after 55, she or he may elect to receive periodic distributions over a period not to exceed 10 years or the term the Administrator permits, whichever is shorter.

Forfeited Accounts

The Plan does not have any forfeited accounts.

2. Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting. Investment contracts held by a defined-contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined-contribution plan attributable to fully benefit-responsive interest contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the plan. The Statement of Net Assets Available for Benefits presents the fair value of the interest contracts as well as the adjustment of the fully-benefit responsive interest contracts from fair value to contract value. The Statement of Changes in Net Assets Available for Benefits is prepared on a contract value basis.

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 amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value except for its guaranteed interest accounts, which are carried at contract value (Note 6). Quoted market prices are used to value investments. Shares of mutual funds are valued at the net asset value of shares held by the Plan at year end.

Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Gains and losses on investments sold are determined by sales proceeds less market value of the investment at the beginning of the year or acquisition cost if purchased during the year. Unrealized appreciation or depreciation is determined by the market value of investments at the end of the year less their market value at the beginning of the year or acquisition cost if purchased during the year.

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the plan document.

Payment of Benefits

Benefits are recorded when paid.

Operating Expenses

All expenses of maintaining the plan are paid by the company.

Subsequent Events

The plan has evaluated subsequent events through October 6, 2011, the date the financial statements were issued.

3. Investments

The following presents investments that represent 5% or more of the Plan's net assets.

	December 31, 2010	2009
Investments at Fair Value as Determined by Quoted Market Prices:		
JH Lifestyle Moderate Fund, * and 1,682 shares, respectively	$ *	$ 270,312
JH Lifestyle Balanced Fund, * and 1,327 shares, respectively	*	268,317
JH Lifestyle Growth Fund, 2,395 & 2,286 shares, respectively	776,728	641,190
JH Lifestyle Aggressive Fund, 1,425 & 1,259 shares, respectively	476,708	360,655
PIMCO Total Return, 24,200 & 11,488 shares, respectively	430,408	230,849
Fidelity ContraFund * and 1,576 shares, respectively	*	204,327
Oppenheimer Developing Mkt, * and 4,337 shares, respectively	*	232,485

*Investment in this fund did not represent 5 percent or more of the Plan's net assets.

During 2010, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) increased in value by $760,424 as follows:

Mutual Funds	$760,424

4. Information prepared and certified by the Trustee (Unaudited)

At December 31, 2010 and 2009, the Plan's investments were held by the Trustee. The following is a summary of the Plan's financial information that is included in the financial statements based on information certified by the Trustee as complete and accurate in accordance with Section 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 fair value of investments as December 31, 2010 and 2009, as reported by the Trustee is summarized as follows:

	2010	2009
Investments		
At fair value:		
Mutual Funds	$ 6,158,824	$ 5,188,612
At contract value:		
Guaranteed Interest Contracts	77,981	83,161
Money Market Fund	493,241	502,088
Interest Income	2,007	3,097

5. Fair Value Measurements

FASB ASC 820, *Fair Value Measurements and Disclosures*, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of fair value hierarchy under FASB ASC 820 are described as follows:

Level 1- Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the plan has the ability to access.

Level 2- Inputs to the valuation methodology include quoted prices for similar assets or liabilities in active markets, quoted prices for identical assets and liabilities in inactive markets, inputs other than quoted prices that are observable for the asset or liability, and inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3- Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 2010 and 2009.

Mutual Funds: Valued at the net asset value (NAV) of shares held by the plan at year-end. *Notes Receivable - Participants:* Valued at amortized cost, which approximates fair value. *Guaranteed interest contract:* Valued at fair value by discounting the related cash flows based on current yields of similar instruments with comparable durations considering the credit worthiness of the issuer.

The preceding methods may produce a fair value calculation that may not be indicative of net realizable value or reflective of future 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 fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following tables set forth by level, within the fair value hierarchy, the plan's assets at fair value as of December 31, 2010 and 2009:

	Assets at Fair Value as of December 31, 2010			
	Level 1	Level 2	Level 3	Total
Mutual Funds:				
Growth Funds	$ 3,032,030	$ -	$ -	$ 3,032,030
Asset Allocation Funds	733,800	-	-	733,800
Balance Funds	281,506	-	-	281,506
Sector Funds	480,663	-	-	480,663
Index Funds	318,213	-	-	318,213
Fixed Income Funds	755,144	-	-	755,144
Bond Funds	131,434	-	-	131,434
Equity Income Funds	401,782	-	-	401,782
Other Funds	24,252	-	-	24,252
Total Mutual Funds	6,158,824	-	-	6,158,824
Guaranteed Investment Contracts	-	-	78,854	78,854
Money Market Fund	493,241	-	-	493,241
Receivables	-	-	122,438	122,438
Total Assets at Fair Value	$ 6,652,065	$ -	$ 201,292	$ 6,853,357

	Assets at Fair Value as of December 31, 2009			
	Level 1	Level 2	Level 3	Total
Mutual Funds:				
Growth Funds	$ 2,712,330	$ -	$ -	$ 2,712,330
Asset Allocation Funds	537,199	-	-	537,199
Balance Funds	282,400	-	-	282,400
Sector Funds	452,413	-	-	452,413
Index Funds	267,456	-	-	267,456
Fixed Income Funds	404,516	-	-	404,516
Bond Funds	190,245	-	-	190,245
Equity Income Funds	315,570	-	-	315,570
Other Funds	26,483	-	-	26,483
Total Mutual Funds	5,188,612	-	-	5,188,612
Guaranteed Investment Contracts	-	-	85,311	85,311
Money Market Fund	502,088	-	-	502,088
Receivables	-	-	43,886	43,886
Total Assets at Fair Value	$ 5,690,700	$ -	$ 129,197	$ 5,819,897

6. Guaranteed Interest Contracts

The Plan entered into a benefit-responsive guaranteed interest account with the John Hancock Insurance Company (John Hancock). John Hancock maintains the contributions in a general account. The account is credited with earnings on the underlying principal and charged for participant withdrawals and administrative expenses. The guaranteed interest account issuer is contractually obligated to repay the principal and a specified interest rate that is guaranteed to the plan.

Because the guaranteed interest account is fully benefit-responsive, contract value is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the guaranteed interest account. The guaranteed interest account is presented on the face of the statement of net assets available for benefits at fair value with an adjustment to contract value in arriving at net assets available for benefits. Contract value, as reported to the Plan by John Hancock, represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

There are no reserves against contract value for credit risk of the contract issuer or otherwise. The fair value of the interest contract at December 31, 2010 and 2009 was $78,854 and

$85,311, respectively. Interest rates are established on the first day of each calendar month and apply to all contributions made to the account in that month. At the end of each reporting year, a "composite rate" of interest is determined. The composite rate is the effective annual rate earned by all contributions to that Guaranteed Interest Account during that reporting year. After the end of each reporting year, contributions made will continue to earn that reporting year's composite interest rate until the end of the guaranteed term.

Certain events limit the ability of the plan to transact at contract value with the issuer. Such events include the following: (1) amendments to the plan documents (including complete or partial plan termination or merger with another plan), (2) bankruptcy of the plan sponsor or other plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the plan, or (3) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under ERISA. The Plan administrator does not believe that any events which would limit the Plan's ability to transact at contract value with participants are probable of occurring.

The guaranteed interest contract does not permit the insurance company to terminate the agreement prior to the scheduled maturity date.

The average annual interest rates for "new money" contributions made during the year are as follows:

	2010	2009
Average Yield Based on Annualized Earnings (1)		
3 Year Account	.30%	.15%
5 Year Account	.70%	.80%
10 Year Account	1.25%	1.40%
Average Yield Based on Interest Rate Credited To Participants (2)		
3 Year Account	.30%	.15%
5 Year Account	.70%	.80%
10 Year Account	1.25%	1.40%

(1) The average yield earned by the plan
(2) The average yield earned by the plan, with an adjustment to reflect the actual interest rate credited to the plan participant

7. Related-Party Transactions

Certain plan investments are shares of mutual funds managed by John Hancock. John Hancock is the trustee as defined by the plan, and, therefore, these transactions qualify as party-in-interest transactions. Fees paid by the plan for the investment management services totaled $32,256 and $26,391 for the years ended December 31, 2010 and 2009, respectively.

8. Termination of the Plan

Although it has not expressed any intent to do so, the company has the right under the plan to discontinue its contributions at any time and to terminate the plan subject to the provisions of ERISA. In the event of plan termination, participants would become 100 percent vested in their employer contributions.

9. Tax Status of the Plan

The Internal Revenue Service has determined and informed the company by a letter dated February 4, 1998, that the plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan administrator and the plan's tax counsel believe that the plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and therefore believe that the plan is qualified and the related trust is tax-exempt.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the plan and recognize a tax liability (or asset) if the plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service or Department of Labor. The plan administrator has analyzed the tax positions taken by the plan, and has concluded that as of December 31, 2010, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2007.

10. Risks and Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment 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.

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
ABLE ENGINEERING SERVICES 401 K PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1996

2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.)
CROWN ENERGY, INC. DBA ABLE ENGINEERING SERVICES

868 FOLSOM STREET

SAN FRANCISCO CA 94107

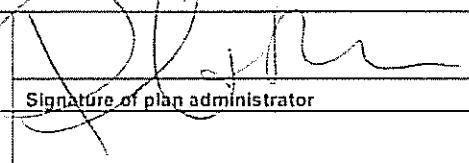
2b Employer Identification Number (EIN)
94-3226677

2c Sponsor's telephone number
415-546-6534

2d Business code (see instructions)
561790

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		10/17/11	Paul Boschetto
	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")
ADMINISTRATIVE COMMITTEE

868 FOLSOM STREET

SAN FRANCISCO CA 94107-1122

3b Administrator's EIN: 94-3245273

3c Administrator's telephone number: 415-543-6534

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**	2034
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**	2062
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**	2062
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	2062
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	122
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	
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 2J 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)	[X]	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)	[X]	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)	[X]	1	**A** (Insurance Information)
(4)	[ ]		**C** (Service Provider Information)
(5)	[X]		**D** (DFE/Participating Plan Information)
(6)	[ ]		**G** (Financial Transaction Schedules)

Able Engineering Services 401(k) Plan
EIN 94-3226677
Plan Number 001
Schedule of Assets (Held at End of Year)
Schedule H, Part IV, Line 4i, Form 5500
December 31, 2010

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
*	John Hancock	Retirement Living 2010		$ 1,072
*	John Hancock	Retirement Living 2015		67,570
*	John Hancock	Retirement Living 2020		58,628
*	John Hancock	Retirement Living 2025		96,486
*	John Hancock	Retirement Living 2030		51,528
*	John Hancock	Retirement Living 2035		55,575
*	John Hancock	Retirement Living 2040		27,627
*	John Hancock	Retirement Living 2045		48,713
*	John Hancock	Lifestyle Conservative		75,632
*	John Hancock	Lifestyle Moderate		250,970
*	John Hancock	Lifestyle Balanced		264,229
*	John Hancock	Lifestyle Growth		776,728
*	John Hancock	Lifestyle Aggressive		476,708
*	John Hancock	Short-Term Federal		122,762
*	John Hancock	Total Bond Market Fund		22,715
*	John Hancock	Strategic Income Opp Fund		16,758
*	John Hancock	PIMCO Total Return		530,408
*	John Hancock	PIMCO All Asset		7,464
*	John Hancock	T Rowe Price Spectrum Inc		57,122
*	John Hancock	PIMCO Real Return		28,094
*	John Hancock	Global Bond Fund		37,625
*	John Hancock	LM Western Asset Gloal High Yield		71,094
*	John Hancock	American Balanced Fund		17,277
*	John Hancock	T Rowe Price Equity Inc		75,756
*	John Hancock	Davis New York Venture		108,197
*	John Hancock	Mutual Beacon		154,036
*	John Hancock	Value Index Fund		6,806

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

Able Engineering Services 401(k) Plan
EIN 94-3226677
Plan Number 001
Schedule of Assets (Held at End of Year)
Schedule H, Part IV, Line 4i, Form 5500
December 31, 2010

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
*	John Hancock	The Growth Fund of America		$ 8,837
*	John Hancock	Mutual Global Discovery		38,705
*	John Hancock	Investment Company of America		962
*	John Hancock	Growth Index Fund		2,873
*	John Hancock	Blackrock Large Value		13,051
*	John Hancock	Fidelity ContraFund		152,157
*	John Hancock	Money Market Fund		493,241
*	John Hancock	Optimized Value Fund		10,784
*	John Hancock	500 Index Fund		166,514
*	John Hancock	Total Stock Market Index Fund		80,059
*	John Hancock	MFS Utilities		41,236
*	John Hancock	JPM MidCap Value Fund		19,536
*	John Hancock	All CapValue Fund		28,178
*	John Hancock	Domini Social Equity		16,788
*	John Hancock	Templeton World		51,419
*	John Hancock	Capital Appreciation Fund		86,556
*	John Hancock	Optimized All Cap Fund		27,367
*	John Hancock	Oppenheimer Global		37,646
*	John Hancock	Mid Cap Index Fund		23,546
*	John Hancock	Franklin Balance Sheet		193,590
*	John Hancock	Blue Chip Growth Fund		206,277
*	John Hancock	Riversource Mid Cap Value		18,103
*	John Hancock	T Rowe Price Health Science		100,030
*	John Hancock	Legg Mason ClearBr Agg Growth		26,247
*	John Hancock	Franklin Small-Mid Growth		117,198
*	John Hancock	EuroPacific Growth Fund		99,321
*	John Hancock	Inv Small Cap Growth		8,472

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

Able Engineering Services 401(k) Plan
EIN 94-3226677
Plan Number 001
Schedule of Assets (Held at End of Year)
Schedule H, Part IV, Line 4i, Form 5500
December 31, 2010

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
*	John Hancock	T Rowe Price Science & Technology		$ 229,530
*	John Hancock	Financial Services Fund		15,937
*	John Hancock	International Equity Index Fund		22,649
*	John Hancock	Small Cap Growth Index		7,353
*	John Hancock	American Century Vista		163,793
*	John Hancock	Small Cap Index Fund		7,135
*	John Hancock	Columbia Value & Restructuring		88,795
*	John Hancock	Mid Cap Stock Fund		23,280
*	John Hancock	International Value Fund		52,544
*	John Hancock	Mid-Cap Growth Index Fund		1,278
*	John Hancock	DFA International Value		24,071
*	John Hancock	Energy		135,166
*	John Hancock	Oppenheimer Developing Markets		124,769
*	John Hancock	International Opps Fund		19,004
*	John Hancock	Intl Small Cap Fund		45,145
*	John Hancock	DFA Emerging Markets Value		19,150
*	John Hancock	Real Estate Securities Fund		90,238
*	John Hancock	Large Cap Fund		5,956
*	John Hancock	#51476 3 Year Guaranteed Account		9,436
*	John Hancock	#51476 5 Year Guaranteed Account		68,197
*	John Hancock	#51476 10 Year Guaranteed Account		347
*	Participant Loans	Interest Rate at 5%		86,681
				$ 6,816,727

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

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