

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), 6057(b), 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 2011 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2011 or fiscal plan year beginning <u>01/01/2011</u> and ending <u>12/31/2011</u>	
A This return/report is for:	<input type="checkbox"/> a multiemployer plan; <input type="checkbox"/> a multiple-employer plan; or <input checked="" type="checkbox"/> a single-employer plan; <input type="checkbox"/> a DFE (specify) ____
B This return/report is:	<input type="checkbox"/> the first return/report; <input type="checkbox"/> the final return/report; <input type="checkbox"/> an amended return/report; <input type="checkbox"/> a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	<input type="checkbox"/>
D Check box if filing under:	<input checked="" type="checkbox"/> Form 5558; <input type="checkbox"/> automatic extension; <input type="checkbox"/> the DFVC program; <input type="checkbox"/> special extension (enter description)

Part II	Basic Plan Information —enter all requested information
1a Name of plan <u>STORY WORLDWIDE, LLC 401K PLAN</u>	1b Three-digit plan number (PN) ▶ <u>001</u> 1c Effective date of plan <u>12/29/1999</u>
2a Plan sponsor's name and address, including room or suite number (Employer, if for single-employer plan) <u>STORY WORLDWIDE, LLC.</u> <u>87 WALL STREET</u> <u>SEATTLE, WA 98121</u>	2b Employer Identification Number (EIN) <u>20-2658265</u> 2c Sponsor's telephone number <u>206-336-3007</u> 2d Business code (see instructions) <u>511190</u>

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	<u>Filed with authorized/valid electronic signature.</u>	<u>10/15/2012</u>	<u>HEATHER DWYER</u>
	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

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

Form 5500 (2011)
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3a Plan administrator's name and address (if same as plan sponsor, enter "Same") STORY WORLDWIDE, LLC. 87 WALL STREET SEATTLE, WA 98121	3b Administrator's EIN 20-2658265 3c Administrator's telephone number 206-336-3007
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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
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5 Total number of participants at the beginning of the plan year	5	117
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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	100
b Retired or separated participants receiving benefits.....	6b	0
c Other retired or separated participants entitled to future benefits.....	6c	35
d Subtotal. Add lines 6a , 6b , and 6c	6d	135
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	0
f Total. Add lines 6d and 6e	6f	135
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	97
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	0

7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	
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8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
 2F 2G 2J 2K 2T 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)	9b Plan benefit arrangement (check all that apply)
(1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	(1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor

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

a Pension Schedules

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

b General Schedules

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

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider 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
		2011
		This Form is Open to Public Inspection.

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan <u>STORY WORLDWIDE, LLC 401K PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>STORY WORLDWIDE, LLC.</u>	D Employer Identification Number (EIN) <u>20-2658265</u>

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
FID.INV.INST.OPS.CO.

04-2647786

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

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

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
64 37 60	RECORDKEEPER	175	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

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

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

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

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

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

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

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

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

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

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

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

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
ABF LG CAP VAL INV - STATE STREET B	0.40%	
04-1867445		
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III **Termination Information on Accountants and Enrolled Actuaries (see instructions)**
(complete as many entries as needed)

a Name: KOSTIN, RUFFKESS AND COMPANY, LLC	b EIN: 06-0754920
c Position: AUDITOR	
d Address: 76 BATTERSON PARK ROAD FARMINGTON, CT 06032	e Telephone: 860-678-6000

Explanation: KOSTIN, RUFFKESS AND COMPANY, LLC COMBINED PRACTICES WITH J.H. COHN LLP, SUBSEQUENTLY NAMED COHNREZNICK LLP.

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	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 <div style="text-align: center; font-size: 1.2em; font-weight: bold;">2011</div> This Form is Open to Public Inspection.
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For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan STORY WORLDWIDE, LLC 401K PLAN	B Three-digit plan number (PN)	001
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 STORY WORLDWIDE, LLC.	D Employer Identification Number (EIN) 20-2658265	

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)
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a Name of MTIA, CCT, PSA, or 103-12 IE: FID MGD INC PORT

b Name of sponsor of entity listed in (a): FIDELITY MANAGEMENT TRUST COMPANY

c EIN-PN 04-3022712-024	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 63056
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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)
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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)
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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)
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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)
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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)
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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)
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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)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
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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)**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**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**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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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 <div style="border: 1px solid black; padding: 5px; font-size: 1.2em; font-weight: bold;">2011</div> This Form is Open to Public Inspection
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For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011		
A Name of plan STORY WORLDWIDE, LLC 401K PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 STORY WORLDWIDE, LLC.	D Employer Identification Number (EIN) 20-2658265	

Part I	Asset and Liability Statement
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1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	31265	64682
(2) U.S. Government securities.....	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other.....	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	76893	73919
(9) Value of interest in common/collective trusts.....	1c(9)	53880	63056
(10) Value of interest in pooled separate accounts.....	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	3673274	3773300
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	3835312	3974957

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	3835312	3974957
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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 Contributions:**

		(a) Amount	(b) Total
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	211538	
(B) Participants	2a(1)(B)	417975	
(C) Others (including rollovers)	2a(1)(C)	11687	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		641200

b Earnings on investments:**(1) Interest:**

(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	5	
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	3913	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		3918

(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	87823	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		87823

(3) Rents	2b(3)		
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(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		
(6) Net investment gain (loss) from common/collective trusts	2b(6)		1870
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		-239570
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		495241

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	355401	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		355401
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	195	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		195
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		355596

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		139645
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☐ Unqualified (2) ☐ Qualified (3) ☒ Disclaimer (4) ☐ Adverse

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

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

(1) Name: COHNREZNICK LLP (2) EIN: 22-1478099

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.).....	<input checked="" type="checkbox"/>		35997
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.).....		<input checked="" type="checkbox"/>	
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.)		<input checked="" type="checkbox"/>	
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.).....		<input checked="" type="checkbox"/>	
e Was this plan covered by a fidelity bond?.....	<input checked="" type="checkbox"/>		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?		<input checked="" type="checkbox"/>	
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?		<input checked="" type="checkbox"/>	
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?		<input checked="" type="checkbox"/>	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	<input checked="" type="checkbox"/>		
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.).....		<input checked="" type="checkbox"/>	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		<input checked="" type="checkbox"/>	
l Has the plan failed to provide any benefit when due under the plan?		<input checked="" type="checkbox"/>	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		<input checked="" type="checkbox"/>	
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.		<input checked="" type="checkbox"/>	

- 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 2011 This Form is Open to Public Inspection.
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For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan <u>STORY WORLDWIDE, LLC 401K PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>STORY WORLDWIDE, LLC.</u>	D Employer Identification Number (EIN) <u>20-2658265</u>

Part I	Distributions
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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	<u>0</u>
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): <u>04-6568107</u>		
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 412 of the Internal Revenue Code or ERISA section 302, skip this Part)
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4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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 (include any prior year accumulated funding deficiency not waived)	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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

Part III	Amendments
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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. If no, check the "No" box.....	<input type="checkbox"/> Increase	<input type="checkbox"/> Decrease	<input type="checkbox"/> Both	<input type="checkbox"/> No
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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.
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10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11 a Does the ESOP hold any preferred stock?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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.).....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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): _____

- 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): _____

Story Worldwide, LLC 401(k) Plan

**Report of Financial Statements
(With Supplementary Information)**

Year Ended December 31, 2011

STORY WORLDWIDE, LLC 401(k) PLAN

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Report of Independent Public Accountants

To the Participants and Administrator of
Story Worldwide, LLC 401(k) Plan

We were engaged to audit the accompanying statements of net assets available for benefits of Story Worldwide, LLC 401(k) Plan (the "Plan") as of December 31, 2011, and the related statement of changes in net assets available for benefits for the year ended December 31, 2011, and the supplemental schedules of (1) Schedule H, Line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2011 and (2) Schedule H, Line 4a - Schedule of Delinquent Participant Contributions for the year ended December 31, 2011. These financial statements and supplemental schedules are the responsibility of the Plan's management. The financial statements of the Plan as of December 31, 2010 were audited by other auditors. 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 ("ERISA"), the Plan administrator instructed the other auditors not to perform, and they did not perform, any auditing procedures with respect to the information certified by the Trustee. Their report dated September 6, 2011 indicated that (a) because of the significance of the information that they did not audit, they were unable to, and did not, express an opinion on the financial statements taken as a whole and (b) the form and content of the information included in the financial statements other than that derived from the information certified by the Trustee, were 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.

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 3, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing such information with the related information included in the 2011 financial statements and supplemental schedules. 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 year ended December 31, 2011, that the information provided to the Plan administrator by the trustee is complete and accurate.

Because of the significance of the information in the Plan's 2011 financial statements and supplemental schedules that we did not audit, we are unable to, and do not, express an opinion on the accompanying 2011 financial statements and supplemental schedules taken as a whole. The supplemental schedules are presented for the purpose of additional analysis and are not a required part of the financial statements but are required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The form and content of the information included in the 2011 financial statements and supplemental schedules, 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.

A handwritten signature in cursive script that reads "CohnReznick LLP".

Farmington, Connecticut
October 10, 2012

STORY WORLDWIDE, LLC 401(k) PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2011 AND 2010

	<u>2011</u>	<u>2010</u>
Assets:		
Investments, at fair value	\$ 3,901,038	\$ 3,758,419
Notes receivable from participants	<u>73,919</u>	<u>76,893</u>
Net assets reflecting investments at fair value	3,974,957	3,835,312
Adjustment from fair value to contract value for fully benefit-responsive investment contracts	<u>(1,555)</u>	<u>(438)</u>
Net assets available for benefits	<u>\$ 3,973,402</u>	<u>\$ 3,834,874</u>

See Notes to Financial Statements.

STORY WORLDWIDE, LLC 401(k) PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS YEAR ENDED DECEMBER 31, 2011

Additions to net assets attributed to:

Investment income (loss):

Interest and dividend income	\$ 88,581
Net depreciation in fair value of investments	(239,570)
Total investment loss	<u>(150,989)</u>

Interest income on notes receivable from participants	<u>3,913</u>
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Contributions:

Employer	211,538
Participant	417,975
Rollovers	11,687
Total contributions	<u>641,200</u>

Total additions	<u>494,124</u>
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Deductions from net assets attributed to:

Benefits paid to participants	355,401
Administrative expenses	195
Total deductions	<u>355,596</u>

Net increase	138,528
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Net assets available for benefits:

Beginning of year	<u>3,834,874</u>
End of year	<u><u>\$ 3,973,402</u></u>

See Notes to Financial Statements.

STORY WORLDWIDE, LLC 401(k) PLAN

NOTES TO FINANCIAL STATEMENTS

Note 1 - Description of the Plan:

The following description of the Story Worldwide, LLC 401(k) Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan agreement for a more comprehensive description of the Plan's provisions.

General:

The Plan is a defined contribution plan established effective December 29, 1999, and most recently amended and restated effective January 1, 2010. Employees of Story Worldwide, LLC (the "Company") become eligible to participate in pre-tax and discretionary employer matching contributions on the first day of the month after hire. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Contributions:

Each year, participants may contribute an amount up to 90% of compensation, as defined in the Plan agreement, for the contribution period. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also make rollover contributions from other qualified plans. Participants direct the investment of their contributions into various investment options offered by the Plan. The Plan currently offers a common/collective trust and various mutual funds as investment options for participants. Participant contributions are recorded in the period during which the Company makes payroll deductions from the participant's earnings.

The Company makes safe harbor matching contributions in an amount equal to 100% of the first 3% of compensation, and 50% of the next 2% of compensation that a participant contributed to the Plan, up to a maximum of 4% of the participant's Plan compensation. Company contributions are invested directly in the common/collective trust or mutual funds as directed by the participant. Company matching contributions are recorded in the same period as employee contributions.

Participant accounts:

Each participant's account is credited with the participant's contribution, the Company's contributions and Plan earnings, and charged with an allocation of administrative expenses. Allocations are based on the participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting:

Participants are immediately vested in their own contributions and Company matching contributions, plus actual earnings thereon.

Payment of benefits:

Participants can elect to receive either a lump-sum amount or annual installments equal to the value of the participant's vested interest in their account on termination of employment, retirement, the attainment of age 59½, death, or permanent and total disability. Distributions are subject to the applicable provisions of the Plan agreement.

STORY WORLDWIDE, LLC 401(k) PLAN

NOTES TO FINANCIAL STATEMENTS

Note 1 - Description of the Plan (concluded):

Notes receivable from participants:

Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their account balance. The loans are secured by the balance in the participant's account and bear interest at 5.00%. The rates are determined quarterly by the Plan administrator based on the prevailing interest rates charged by persons in the business of lending money for loans which would be made under similar circumstances. Principal and interest is paid ratably through semi-monthly payroll deductions.

Note 2 - Summary of significant accounting policies:

Basis of accounting:

The Plan's financial statements have been 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 investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The statements of net assets available for benefits presents the fair value of the investment contracts as well as the adjustment of the fully benefit-responsive investment 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 accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Investment valuation and income recognition:

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (see Note 5).

Purchases and sales of investments are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net depreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

STORY WORLDWIDE, LLC 401(k) PLAN

NOTES TO FINANCIAL STATEMENTS

Note 2 - Summary of significant accounting policies (concluded):

Notes receivable from participants:

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent notes receivable from participants are recorded as distributions based upon the terms of the Plan document.

Payment of benefits:

Benefit payments are recorded when paid.

Administrative expenses:

The Plan is responsible for payment of the trustee expenses; however, the Company may pay the Plan expenses directly. Transaction charges for loan transactions are paid by the Plan by reducing the balances of those participants initiating the transactions. For the year ended December 31, 2011, administrative expenses totaled \$195.

Subsequent events:

Subsequent events were evaluated through October 10, 2012, the date the financial statements were available to be issued.

Note 3 - Certified by the trustee:

The following account balances and transactions were obtained from statements certified by Fidelity Management Trust Company ("FMTC"):

Statement of net assets available for benefits:

Investments

Notes receivable from participants

Statement of changes in net assets available for benefits:

Investment income (loss)

Interest income from notes receivable from participants

Schedule of assets (held at year end)

Note 4 - Investments:

The following investments represent 5% or more of the Plan's net assets as of December 31, 2011 and 2010:

	<u>2011</u>	<u>2010</u>
Fidelity Balanced Fund	\$ 424,522	\$ 417,386
Fidelity Contrafund	428,829	401,101
Fidelity Freedom 2025 Fund	167,873*	191,975
Fidelity Freedom 2040 Fund	566,397	513,330
Fidelity Freedom 2045 Fund	242,596	224,191
Fidelity International Discovery Fund	360,616	391,400
Fidelity Leveraged Company Stock Fund	211,144	198,481
Fidelity Value Fund	237,291	250,551

*Investment represents less than 5% of the Plan's net assets.

STORY WORLDWIDE, LLC 401(k) PLAN

NOTES TO FINANCIAL STATEMENTS

Note 4 - Investments (concluded):

During the year ended December 31, 2011, the Plan's investments in mutual funds (including gains and losses on mutual funds bought and sold as well as held during the period) depreciated in value by \$239,570.

Note 5 - Fair value measurements:

Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 820, Fair Value Measurements and Disclosures, provides the 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 the fair value hierarchy under FASB ASC 820 are described below:

- 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 or similar assets or liabilities in inactive markets;
 - inputs other than quoted prices that are observable for the asset or liability;
 - 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.

STORY WORLDWIDE, LLC 401(k) PLAN

NOTES TO FINANCIAL STATEMENTS

Note 5 - Fair value measurements (continued):

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 31, 2011 and 2010.

Common/collective trust: Valued at the daily net asset value ("NAV") of units held in the common/collective trust fund which invests in guaranteed investment contracts and security-backed contracts.

Mutual funds: Valued at the quoted NAV of shares held by the Plan at year end.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The estimated fair value of the common/collective trust is the NAV, exclusive of the adjustment to contract value. The use of the NAV as fair value is deemed appropriate as the collective trust funds do not have finite lives, unfunded commitments relating to these types of investments, or significant restrictions on redemptions.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2011 and 2010:

Assets at Fair Value as of December 31, 2011

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual funds:				
Large cap	\$ 636,885	\$ -	\$ -	\$ 636,885
Mid cap	618,526	-	-	616,526
Small cap	30,000	-	-	30,000
International	361,573	-	-	361,573
Blended	1,778,847	-	-	1,778,847
Bond	347,469	-	-	347,469
Short-term	<u>64,682</u>	<u>-</u>	<u>-</u>	<u>64,682</u>
Total mutual funds	3,837,982	-	-	3,837,982
Common/collective trust	<u>-</u>	<u>63,056</u>	<u>-</u>	<u>63,056</u>
Total assets at fair value	<u>\$ 3,837,982</u>	<u>\$ 63,056</u>	<u>\$ -</u>	<u>\$ 3,901,038</u>

STORY WORLDWIDE, LLC 401(k) PLAN

NOTES TO FINANCIAL STATEMENTS

Note 5 - Fair value measurements (concluded):

Assets at Fair Value as of December 31, 2010

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual funds:				
Large cap	\$ 590,020	\$ -	\$ -	\$ 590,020
Mid cap	514,925	-	-	514,925
Small cap	150,622	-	-	150,622
International	392,273	-	-	392,273
Blended	1,733,647	-	-	1,733,647
Bond	291,787	-	-	291,787
Short-term	31,265	-	-	31,265
Total mutual funds	3,704,539	-	-	3,704,539
Common/collective trust	-	53,880	-	53,880
Total assets at fair value	<u>\$ 3,704,539</u>	<u>\$ 53,880</u>	<u>\$ -</u>	<u>\$ 3,758,419</u>

Note 6 - Related party transactions:

Plan assets include investments in funds managed by affiliates of FMTC. FMTC is the Plan's trustee and, as such, transactions with the trustee qualify as party-in-interest transactions. Personnel and facilities of the Company have been used to perform administrative functions for the Plan at no charge to the Plan. Fees paid by the Plan for investment management services are included in net depreciation in fair value of investments.

Note 7 - Plan termination:

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA.

Note 8 - 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 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 statements of net assets available for benefits.

STORY WORLDWIDE, LLC 401(k) PLAN

NOTES TO FINANCIAL STATEMENTS

Note 9 - Tax status:

The Plan utilizes a Fidelity volume submitter Plan document, which obtained its latest determination letter dated March 31, 2008 in which the Internal Revenue Service (the "IRS") stated that the volume submitter Plan, as then designed, was in compliance with applicable requirements of the Internal Revenue Code (the "IRC"). The Plan has been amended since receiving the determination letter; however, management believes that the Plan currently is designed and 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 IRS. 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 2008.

Note 10 - Reconciliation of financial statements to Form 5500:

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2011 and 2010 to Form 5500:

	<u>2011</u>	<u>2010</u>
Net assets available for benefits per the financial statements	\$3,973,402	\$ 3,834,874
Adjustment from fair value to contract value for fully benefit-responsive investment contract	<u>1,555</u>	<u>438</u>
Net assets available for benefits per Form 5500	<u>\$3,974,957</u>	<u>\$ 3,835,312</u>

The following is a reconciliation of investment loss per the financial statements for the year ended December 31, 2011 to Form 5500:

Investment loss per the financial statements	\$(150,989)
Prior year adjustment from contract value to fair value for the investment contract	(438)
Current year adjustment from contract value to fair value for the investment contract	<u>1,555</u>
Investment loss per Form 5500	<u>\$(149,872)</u>

Net assets on Form 5500 are reported at fair value. The financial statements are reported at contract value.

STORY WORLDWIDE, LLC 401(k) PLAN

NOTES TO FINANCIAL STATEMENTS

Note 11 - Non-exempt transactions:

The Company determined that nonexempt transactions occurred during 2010 and 2011. These violations involved the submission of employee contributions, loan repayments and loan interest to the Plan later than the earliest day on which such contributions could reasonably be segregated from the employer's general assets; however, in no event later than the 15th business day of the month following the month of being withheld from compensation. The Company has taken corrective action by making a contribution to the Plan on August 17, 2011, for lost earnings in the amount of \$26 for the 2010 transaction and on August 8, 2012, for lost earnings in the amount of \$9 for the 2011 transaction. The Company believes that the transactions should not affect the tax-qualified status of the Plan. The Company calculated the lost earnings using the Department of Labor's prescribed methodology. Therefore, no provision for income taxes has been included in the Plan's financial statements.

STORY WORLDWIDE, LLC 401(k) PLAN

E.I. #: 20-2658265

PLAN #: 001

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

(Schedule H, Line 4i)

DECEMBER 31, 2011

(a)	(b) Identity of Issue, borrower, lessor or similar party	(c) Description of investment Including maturity date, rate of interest, collateral, par or maturity value	(d) Cost (A)	(e) Current Value
	American Beacon Large Cap Value Fund Investor Class	Mutual fund		\$ 41,246
*	Fidelity Balanced Fund	Mutual fund		424,522
*	Fidelity Capital Appreciation Fund	Mutual fund		19,035
*	Fidelity Contrafund	Mutual fund		428,829
*	Fidelity Freedom 2000 Fund	Mutual fund		43,740
*	Fidelity Freedom 2010 Fund	Mutual fund		323
*	Fidelity Freedom 2020 Fund	Mutual fund		16,732
*	Fidelity Freedom 2025 Fund	Mutual fund		167,873
*	Fidelity Freedom 2030 Fund	Mutual fund		117,337
*	Fidelity Freedom 2035 Fund	Mutual fund		142,222
*	Fidelity Freedom 2040 Fund	Mutual fund		566,397
*	Fidelity Freedom 2045 Fund	Mutual fund		242,596
*	Fidelity Freedom 2050 Fund	Mutual fund		46,056
*	Fidelity Freedom Income Fund	Mutual fund		11,049
*	Fidelity International Discovery Fund	Mutual fund		360,616
*	Fidelity International Real Estate Fund	Mutual fund		957
*	Fidelity Leveraged Company Stock Fund	Mutual fund		211,144
*	Fidelity Managed Income Portfolio	Common/collective trust		63,056
*	Fidelity Mid Cap Growth Fund	Mutual fund		64,250
*	Fidelity Retirement Money Market Portfolio	Mutual fund		64,682
*	Fidelity Small Cap Stock Fund	Mutual fund		105,841
*	Fidelity Spartan 500 Index Fund	Mutual fund		147,775
*	Fidelity Spartan U.S. Bond Index Fund	Mutual fund		169,343
*	Fidelity Stock Select Small Cap	Mutual fund		30,000
*	Fidelity Strategic Income Fund	Mutual fund		178,126
*	Fidelity Value Fund	Mutual fund		237,291
	Total			3,901,038
*	Notes receivable from participants	Interest rate of 5%; loans maturing 2014 through 2015. Collateral is equal to the participants' vested balance. Repaid through salary deductions.		73,919
				<u>\$ 3,974,957</u>

* Party-in-interest.

(A) Cost not required.

STORY WORLDWIDE, LLC 401(k) PLAN
E.I. #: 20-2658265
PLAN #: 001

SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
(Schedule H, Line 4a)
YEAR ENDED DECEMBER 31, 2011

(a) Participant Contributions Transferred <u>Late to Plan</u>	(b) Total that Constitute Nonexempt Prohibited <u>Transactions</u>	(c) Total Fully Corrected Under VFCP <u>and PTE 2002-51</u>	(d) Check Here if Late Participant Loan Repayments are <u>Included</u>	(e) Contributions not <u>Corrected</u>	(f) Contributions Corrected Outside <u>VFCP</u>	(g) Contributions Pending Correction <u>in VFCP</u>
\$ 17,585	\$ 17,585 *	\$ -	✓	\$ -	\$ 17,585	\$ -
18,412	18,412 **	-	✓	-	18,412	-

* Late contributions are related to 2010. Management has taken corrective action during 2011.

** Late contributions are related to 2011. Management has taken corrective action during 2012.

Required Statement of Explanation for Termination

I, as plan administrator, verify that the explanation that is reproduced below or attached to this notice is the explanation concerning your termination reported on the Schedule C (Form 5500) attached to the 2011 Form 5500, Annual Return/Report of Employee Benefit Plan, for the Story Worldwide, LLC 401k plan.

This Form 5500 is identified in line 2b by the nine-digit EIN - 20-2658265, and in line 1b by the three-digit PN 001.

Services were terminated due to:

Kostin, Ruffkess and company, LLC combined practices with J.H. Cohn LLP, subsequently named CohnReznick LLP.

You have the opportunity to comment to the Department of Labor concerning any aspect of this explanation. Comments should include the name, EIN, and the 3-digit plan number of the plan and submitted to:

Office of Enforcement
Employee Benefits Security Administration
U.S. Department of Labor
200 Constitution Avenue, N.W.,
Washington, DC 20210

Signed (by Plan Administrator)

Date

Story Worldwide, LLC 401(k) Plan

**Report of Financial Statements
(With Supplementary Information)**

Year Ended December 31, 2011

STORY WORLDWIDE, LLC 401(k) PLAN

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Report of Independent Public Accountants

To the Participants and Administrator of
Story Worldwide, LLC 401(k) Plan

We were engaged to audit the accompanying statements of net assets available for benefits of Story Worldwide, LLC 401(k) Plan (the "Plan") as of December 31, 2011, and the related statement of changes in net assets available for benefits for the year ended December 31, 2011, and the supplemental schedules of (1) Schedule H, Line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2011 and (2) Schedule H, Line 4a - Schedule of Delinquent Participant Contributions for the year ended December 31, 2011. These financial statements and supplemental schedules are the responsibility of the Plan's management. The financial statements of the Plan as of December 31, 2010 were audited by other auditors. 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 ("ERISA"), the Plan administrator instructed the other auditors not to perform, and they did not perform, any auditing procedures with respect to the information certified by the Trustee. Their report dated September 6, 2011 indicated that (a) because of the significance of the information that they did not audit, they were unable to, and did not, express an opinion on the financial statements taken as a whole and (b) the form and content of the information included in the financial statements other than that derived from the information certified by the Trustee, were 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.

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 3, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing such information with the related information included in the 2011 financial statements and supplemental schedules. 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 year ended December 31, 2011, that the information provided to the Plan administrator by the trustee is complete and accurate.

Because of the significance of the information in the Plan's 2011 financial statements and supplemental schedules that we did not audit, we are unable to, and do not, express an opinion on the accompanying 2011 financial statements and supplemental schedules taken as a whole. The supplemental schedules are presented for the purpose of additional analysis and are not a required part of the financial statements but are required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The form and content of the information included in the 2011 financial statements and supplemental schedules, 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.

A handwritten signature in cursive script that reads "CohnReznick LLP".

Farmington, Connecticut
October 10, 2012

STORY WORLDWIDE, LLC 401(k) PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2011 AND 2010

	<u>2011</u>	<u>2010</u>
Assets:		
Investments, at fair value	\$ 3,901,038	\$ 3,758,419
Notes receivable from participants	<u>73,919</u>	<u>76,893</u>
Net assets reflecting investments at fair value	3,974,957	3,835,312
Adjustment from fair value to contract value for fully benefit-responsive investment contracts	<u>(1,555)</u>	<u>(438)</u>
Net assets available for benefits	<u>\$ 3,973,402</u>	<u>\$ 3,834,874</u>

See Notes to Financial Statements.

STORY WORLDWIDE, LLC 401(k) PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED DECEMBER 31, 2011

Additions to net assets attributed to:

Investment income (loss):

Interest and dividend income

\$ 88,581

Net depreciation in fair value of investments

(239,570)

Total investment loss

(150,989)

Interest income on notes receivable from participants

3,913

Contributions:

Employer

211,538

Participant

417,975

Rollovers

11,687

Total contributions

641,200

Total additions

494,124

Deductions from net assets attributed to:

Benefits paid to participants

355,401

Administrative expenses

195

Total deductions

355,596

Net increase

138,528

Net assets available for benefits:

Beginning of year

3,834,874

End of year

\$ 3,973,402

See Notes to Financial Statements.

STORY WORLDWIDE, LLC 401(k) PLAN

NOTES TO FINANCIAL STATEMENTS

Note 1 - Description of the Plan:

The following description of the Story Worldwide, LLC 401(k) Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan agreement for a more comprehensive description of the Plan's provisions.

General:

The Plan is a defined contribution plan established effective December 29, 1999, and most recently amended and restated effective January 1, 2010. Employees of Story Worldwide, LLC (the "Company") become eligible to participate in pre-tax and discretionary employer matching contributions on the first day of the month after hire. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Contributions:

Each year, participants may contribute an amount up to 90% of compensation, as defined in the Plan agreement, for the contribution period. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also make rollover contributions from other qualified plans. Participants direct the investment of their contributions into various investment options offered by the Plan. The Plan currently offers a common/collective trust and various mutual funds as investment options for participants. Participant contributions are recorded in the period during which the Company makes payroll deductions from the participant's earnings.

The Company makes safe harbor matching contributions in an amount equal to 100% of the first 3% of compensation, and 50% of the next 2% of compensation that a participant contributed to the Plan, up to a maximum of 4% of the participant's Plan compensation. Company contributions are invested directly in the common/collective trust or mutual funds as directed by the participant. Company matching contributions are recorded in the same period as employee contributions.

Participant accounts:

Each participant's account is credited with the participant's contribution, the Company's contributions and Plan earnings, and charged with an allocation of administrative expenses. Allocations are based on the participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting:

Participants are immediately vested in their own contributions and Company matching contributions, plus actual earnings thereon.

Payment of benefits:

Participants can elect to receive either a lump-sum amount or annual installments equal to the value of the participant's vested interest in their account on termination of employment, retirement, the attainment of age 59½, death, or permanent and total disability. Distributions are subject to the applicable provisions of the Plan agreement.

STORY WORLDWIDE, LLC 401(k) PLAN

NOTES TO FINANCIAL STATEMENTS

Note 1 - Description of the Plan (concluded):

Notes receivable from participants:

Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their account balance. The loans are secured by the balance in the participant's account and bear interest at 5.00%. The rates are determined quarterly by the Plan administrator based on the prevailing interest rates charged by persons in the business of lending money for loans which would be made under similar circumstances. Principal and interest is paid ratably through semi-monthly payroll deductions.

Note 2 - Summary of significant accounting policies:

Basis of accounting:

The Plan's financial statements have been 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 investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The statements of net assets available for benefits presents the fair value of the investment contracts as well as the adjustment of the fully benefit-responsive investment 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 accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Investment valuation and income recognition:

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (see Note 5).

Purchases and sales of investments are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net depreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

STORY WORLDWIDE, LLC 401(k) PLAN

NOTES TO FINANCIAL STATEMENTS

Note 2 - Summary of significant accounting policies (concluded):

Notes receivable from participants:

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent notes receivable from participants are recorded as distributions based upon the terms of the Plan document.

Payment of benefits:

Benefit payments are recorded when paid.

Administrative expenses:

The Plan is responsible for payment of the trustee expenses; however, the Company may pay the Plan expenses directly. Transaction charges for loan transactions are paid by the Plan by reducing the balances of those participants initiating the transactions. For the year ended December 31, 2011, administrative expenses totaled \$195.

Subsequent events:

Subsequent events were evaluated through October 10, 2012, the date the financial statements were available to be issued.

Note 3 - Certified by the trustee:

The following account balances and transactions were obtained from statements certified by Fidelity Management Trust Company ("FMTC"):

Statement of net assets available for benefits:

Investments

Notes receivable from participants

Statement of changes in net assets available for benefits:

Investment income (loss)

Interest income from notes receivable from participants

Schedule of assets (held at year end)

Note 4 - Investments:

The following investments represent 5% or more of the Plan's net assets as of December 31, 2011 and 2010:

	<u>2011</u>	<u>2010</u>
Fidelity Balanced Fund	\$ 424,522	\$ 417,386
Fidelity Contrafund	428,829	401,101
Fidelity Freedom 2025 Fund	167,873*	191,975
Fidelity Freedom 2040 Fund	566,397	513,330
Fidelity Freedom 2045 Fund	242,596	224,191
Fidelity International Discovery Fund	360,616	391,400
Fidelity Leveraged Company Stock Fund	211,144	198,481
Fidelity Value Fund	237,291	250,551

*Investment represents less than 5% of the Plan's net assets.

STORY WORLDWIDE, LLC 401(k) PLAN

NOTES TO FINANCIAL STATEMENTS

Note 4 - Investments (concluded):

During the year ended December 31, 2011, the Plan's investments in mutual funds (including gains and losses on mutual funds bought and sold as well as held during the period) depreciated in value by \$239,570.

Note 5 - Fair value measurements:

Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 820, Fair Value Measurements and Disclosures, provides the 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 the fair value hierarchy under FASB ASC 820 are described below:

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 or similar assets or liabilities in inactive markets;
- inputs other than quoted prices that are observable for the asset or liability;
- 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.

STORY WORLDWIDE, LLC 401(k) PLAN

NOTES TO FINANCIAL STATEMENTS

Note 5 - Fair value measurements (continued):

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 31, 2011 and 2010.

Common/collective trust: Valued at the daily net asset value ("NAV") of units held in the common/collective trust fund which invests in guaranteed investment contracts and security-backed contracts.

Mutual funds: Valued at the quoted NAV of shares held by the Plan at year end.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The estimated fair value of the common/collective trust is the NAV, exclusive of the adjustment to contract value. The use of the NAV as fair value is deemed appropriate as the collective trust funds do not have finite lives, unfunded commitments relating to these types of investments, or significant restrictions on redemptions.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2011 and 2010:

Assets at Fair Value as of December 31, 2011

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual funds:				
Large cap	\$ 636,885	\$ -	\$ -	\$ 636,885
Mid cap	618,526	-	-	616,526
Small cap	30,000	-	-	30,000
International	361,573	-	-	361,573
Blended	1,778,847	-	-	1,778,847
Bond	347,469	-	-	347,469
Short-term	<u>64,682</u>	<u>-</u>	<u>-</u>	<u>64,682</u>
Total mutual funds	3,837,982	-	-	3,837,982
Common/collective trust	<u>-</u>	<u>63,056</u>	<u>-</u>	<u>63,056</u>
Total assets at fair value	<u>\$ 3,837,982</u>	<u>\$ 63,056</u>	<u>\$ -</u>	<u>\$ 3,901,038</u>

STORY WORLDWIDE, LLC 401(k) PLAN

NOTES TO FINANCIAL STATEMENTS

Note 5 - Fair value measurements (concluded):

Assets at Fair Value as of December 31, 2010

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual funds:				
Large cap	\$ 590,020	\$ -	\$ -	\$ 590,020
Mid cap	514,925	-	-	514,925
Small cap	150,622	-	-	150,622
International	392,273	-	-	392,273
Blended	1,733,647	-	-	1,733,647
Bond	291,787	-	-	291,787
Short-term	31,265	-	-	31,265
Total mutual funds	3,704,539	-	-	3,704,539
Common/collective trust	-	53,880	-	53,880
Total assets at fair value	<u>\$ 3,704,539</u>	<u>\$ 53,880</u>	<u>\$ -</u>	<u>\$ 3,758,419</u>

Note 6 - Related party transactions:

Plan assets include investments in funds managed by affiliates of FMTC. FMTC is the Plan's trustee and, as such, transactions with the trustee qualify as party-in-interest transactions. Personnel and facilities of the Company have been used to perform administrative functions for the Plan at no charge to the Plan. Fees paid by the Plan for investment management services are included in net depreciation in fair value of investments.

Note 7 - Plan termination:

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA.

Note 8 - 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 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 statements of net assets available for benefits.

STORY WORLDWIDE, LLC 401(k) PLAN

NOTES TO FINANCIAL STATEMENTS

Note 9 - Tax status:

The Plan utilizes a Fidelity volume submitter Plan document, which obtained its latest determination letter dated March 31, 2008 in which the Internal Revenue Service (the "IRS") stated that the volume submitter Plan, as then designed, was in compliance with applicable requirements of the Internal Revenue Code (the "IRC"). The Plan has been amended since receiving the determination letter; however, management believes that the Plan currently is designed and 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 IRS. 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 2008.

Note 10 - Reconciliation of financial statements to Form 5500:

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2011 and 2010 to Form 5500:

	<u>2011</u>	<u>2010</u>
Net assets available for benefits per the financial statements	\$3,973,402	\$ 3,834,874
Adjustment from fair value to contract value for fully benefit-responsive investment contract	<u>1,555</u>	<u>438</u>
Net assets available for benefits per Form 5500	<u>\$3,974,957</u>	<u>\$ 3,835,312</u>

The following is a reconciliation of investment loss per the financial statements for the year ended December 31, 2011 to Form 5500:

Investment loss per the financial statements	\$(150,989)
Prior year adjustment from contract value to fair value for the investment contract	(438)
Current year adjustment from contract value to fair value for the investment contract	<u>1,555</u>
Investment loss per Form 5500	<u>\$(149,872)</u>

Net assets on Form 5500 are reported at fair value. The financial statements are reported at contract value.

STORY WORLDWIDE, LLC 401(k) PLAN

NOTES TO FINANCIAL STATEMENTS

Note 11 - Non-exempt transactions:

The Company determined that nonexempt transactions occurred during 2010 and 2011. These violations involved the submission of employee contributions, loan repayments and loan interest to the Plan later than the earliest day on which such contributions could reasonably be segregated from the employer's general assets; however, in no event later than the 15th business day of the month following the month of being withheld from compensation. The Company has taken corrective action by making a contribution to the Plan on August 17, 2011, for lost earnings in the amount of \$26 for the 2010 transaction and on August 8, 2012, for lost earnings in the amount of \$9 for the 2011 transaction. The Company believes that the transactions should not affect the tax-qualified status of the Plan. The Company calculated the lost earnings using the Department of Labor's prescribed methodology. Therefore, no provision for income taxes has been included in the Plan's financial statements.

STORY WORLDWIDE, LLC 401(k) PLAN

E.I. #: 20-2658265

PLAN #: 001

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

(Schedule H, Line 4i)

DECEMBER 31, 2011

(a)	(b) Identity of Issue, borrower, lessor or similar party	(c) Description of investment Including maturity date, rate of interest, collateral, par or maturity value	(d) Cost (A)	(e) Current Value
	American Beacon Large Cap Value Fund Investor Class	Mutual fund		\$ 41,246
*	Fidelity Balanced Fund	Mutual fund		424,522
*	Fidelity Capital Appreciation Fund	Mutual fund		19,035
*	Fidelity Contrafund	Mutual fund		428,829
*	Fidelity Freedom 2000 Fund	Mutual fund		43,740
*	Fidelity Freedom 2010 Fund	Mutual fund		323
*	Fidelity Freedom 2020 Fund	Mutual fund		16,732
*	Fidelity Freedom 2025 Fund	Mutual fund		167,873
*	Fidelity Freedom 2030 Fund	Mutual fund		117,337
*	Fidelity Freedom 2035 Fund	Mutual fund		142,222
*	Fidelity Freedom 2040 Fund	Mutual fund		566,397
*	Fidelity Freedom 2045 Fund	Mutual fund		242,596
*	Fidelity Freedom 2050 Fund	Mutual fund		46,056
*	Fidelity Freedom Income Fund	Mutual fund		11,049
*	Fidelity International Discovery Fund	Mutual fund		360,616
*	Fidelity International Real Estate Fund	Mutual fund		957
*	Fidelity Leveraged Company Stock Fund	Mutual fund		211,144
*	Fidelity Managed Income Portfolio	Common/collective trust		63,056
*	Fidelity Mid Cap Growth Fund	Mutual fund		64,250
*	Fidelity Retirement Money Market Portfolio	Mutual fund		64,682
*	Fidelity Small Cap Stock Fund	Mutual fund		105,841
*	Fidelity Spartan 500 Index Fund	Mutual fund		147,775
*	Fidelity Spartan U.S. Bond Index Fund	Mutual fund		169,343
*	Fidelity Stock Select Small Cap	Mutual fund		30,000
*	Fidelity Strategic Income Fund	Mutual fund		178,126
*	Fidelity Value Fund	Mutual fund		237,291
	Total			3,901,038
*	Notes receivable from participants	Interest rate of 5%; loans maturing 2014 through 2015. Collateral is equal to the participants' vested balance. Repaid through salary deductions.		73,919
				<u>\$ 3,974,957</u>

* Party-in-interest.

(A) Cost not required.

STORY WORLDWIDE, LLC 401(k) PLAN
E.I. #: 20-2658265
PLAN #: 001

SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
(Schedule H, Line 4a)
YEAR ENDED DECEMBER 31, 2011

(a) Participant Contributions Transferred <u>Late to Plan</u>	(b) Total that Constitute Nonexempt Prohibited <u>Transactions</u>	(c) Total Fully Corrected Under VFCP <u>and PTE 2002-51</u>	(d) Check Here if Late Participant Loan Repayments are <u>Included</u>	(e) Contributions not <u>Corrected</u>	(f) Contributions Corrected Outside <u>VFCP</u>	(g) Contributions Pending Correction <u>in VFCP</u>
\$ 17,585	\$ 17,585 *	\$ -	✓	\$ -	\$ 17,585	\$ -
18,412	18,412 **	-	✓	-	18,412	-

* Late contributions are related to 2010. Management has taken corrective action during 2011.

** Late contributions are related to 2011. Management has taken corrective action during 2012.